



MAHI Muckamore Abbey
Hospital Inquiry

MAHI-MDAG Minutes

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The Inquiry has received disclosure of MDAG minutes from both the Department of Health and the Belfast Health and Social Care Trust. The Inquiry has amalgamated the minutes received from those sources to create this single bundle which contains (so far as it is possible for the Inquiry to ascertain) a complete set of MDAG minutes, up to 28 June 2023. Please note that the minutes of MDAG meetings which took place between 02 September 2020- 28 June 2023 are also published on the Department of Health website.

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Muckamore Departmental Assurance Group (MDAG)**Minutes of Meeting****2pm, Friday 30 August 2019****Castle Buildings****Attendees:**

Sean Holland (Dept of Health)(Joint Chair)
 Charlotte McArdle (Dept of Health)(Joint Chair)
 Mark Lee (Dept of Health)
 Rodney Morton (Dept of Health)
 Aine Morrison (Dept of Health)
 Sean Scullion (Dept of Health)(Note)
 Marie Roulston (Health and Social Care Board)
 Marie Heaney (Belfast Trust)
 Brenda Creaney (Belfast Trust)
 Francis Rice (External Nursing expert)
 Barney McNeaney (Southern Trust)
 Bria Mongan (South Eastern Trust)
 Karen O'Brien (Western Trust)
 Oscar Donnelly (Northern Trust)
 Lourda Geoghan (Regulation and Quality Improvement Authority) (observer)
 Dawn Jones (Family representative)
 Brigene McNeilly (Family representative)
 Brenda Aaroy (Belfast Trust)
 Eileen McEaney (Strengthening the Commitment collaborative)
 Stephen Matthews (Cedar Foundation)
 Petra Corr (Northern Ireland British Psychological Society)
 Gavin Davidson (Queen's University, Belfast)

Apologies:

Ian McMaster (Dept of Health)
 Don Bradley (South Eastern Trust)
 Mary Hinds (Public Health Agency)

Agenda Item 1 - Welcome/Introductions/Apologies

1. The Co-Chairs welcomed attendees to the first meeting of the MDAG, extending a particular welcome to the family representatives. Sean Holland began the meeting by reminding members of the commitments on resettlement made by the Permanent Secretary to the families of in- patients at Muckamore, and he also re-iterated on behalf of the HSC system the apology the Permanent Secretary had previously given to families for the events at Muckamore.
2. Introductions were made and apologies noted.

Agenda Item 2 – draft Terms of Reference and governance structures

3. Charlotte McArdle set out the context for the Group, and advised that its purpose was to provide the Permanent Secretary and any incoming Minister with assurances on the effectiveness of the HSC system's response to the SAI review and the Permanent Secretary's subsequent commitments on resettlement, and also that current services at Muckamore are being delivered in a safe, effective and Human Rights compliant manner.
4. Members agreed the importance of ensuring the Group had effective arrangements in place to ensure the voices of families, carers and individual patients were adequately represented. The Group agreed this would be an essential component in building trust and restoring families' confidence in the services provided at the hospital, and discussed potential arrangements for engaging with the other families involved. It was suggested that it might be helpful to approach the Patient Client Council to seek advice and support with this.

AP1: Consult with the Patient Client Council to develop proposals for extending family and individual patients' involvement in the work of MDAG. (Action: DoH)

5. Subject to this, members agreed the draft Term of Reference for the MDAG and the associated governance structure. It was also agreed that the group would meet monthly initially, with frequency of meetings kept under review depending on progress towards delivery of the Action Plan.
6. The issue of a recent appointment as part of the work to implement the Mental Capacity Act was raised by a family representative. Sean Holland explained that he had recently become aware of this, and as a precautionary measure had taken a decision to rescind this appointment, without prejudice to any of the ongoing investigative processes.

Agenda Item 3 - Highlight Report

7. Sean Holland introduced the Highlight Report, which will be updated for each meeting of MDAG, and will allow members to maintain oversight of progress towards delivering on the HSC Action Plan.
8. Mark Lee provided an overview of the report, including updates on the police investigation, staffing position in the hospital, current resettlement position, measures taken to stabilise services in the hospital, contingency planning, engagement by the Belfast Trust with the East London Foundation Trust as a 'critical friend', the Learning Disability Service Model project and review of acute in-patient care and the proposed Leadership and Governance review of the Hospital.
9. Brenda Creaney clarified that 19 hospital staff were currently on suspension, and Marie Heaney confirmed the present in-patient population as 58. She also confirmed that planning for discharge was ongoing for all patients currently in the hospital, with a number of related business cases in progress.
10. The co-Chairs stressed the importance of MDAG being provided with accurate and consistent information on discharge planning with an appropriate level of detail, and also emphasised the urgency in progressing any relevant business cases. They also clarified that DoH will engage with other Government Departments as required to facilitate timely discharge arrangements.
11. Members discussed the Learning Disability Service Model Transformation project, and Marie Roulston advised that the independent panel reviewing acute care services for people with a Learning Disability as a workstream of the Service Model project was now expected to report on 16th September.
12. The Group discussed uptake of the current on-line survey being used by the project to gather service user and family views on service provision, and stressed the importance of family and service user involvement at all levels of the Transformation project. Charlotte McArdle advised members that there may be a different way to engage families and that is through a workshop supported by the Patient Client Council if engagement in the survey is low.

13. The co-Chairs reiterated the Department's commitment to the principles of co-production underpinning the project, and agreed that an update on the engagement work being taken forward by the Transformation project team would be brought to the next MDAG meeting.

AP2: Provide an update on levels of service user/family participation in on-line engagement survey, and consider steps to facilitate family involvement at Project Board level (Action: HSCB).

14. Mark Lee updated members on the measures in place to ensure services at Muckamore are being delivered safely and sustainably, including an update on contingency planning arrangements. The Group was advised that the Belfast Trust have developed a contingency plan for the hospital, and this will be provided to DoH.

AP3: Belfast Trust contingency plan to be provided to DoH. (Action: Belfast Trust)

15. Members discussed the visit to Muckamore earlier in the summer by a team from the East London Foundation Trust, who were invited to visit the Hospital in a 'critical friend' capacity. It was clarified that any learning emerging from the team's findings would be shared with the Mental Health and Learning Disability Improvement Board.

Agenda Item 4 – Update on spend of additional funding

16. Marie Roulston provided an update on the process for allocating funding to Trusts to address identified inescapable pressures in Learning Disability services. Members discussed a number of related issues, including workforce pressures, skill mix and training, morale of staff working in the hospital and measures being taken by the Belfast Trust to support them, staff retention, and the role of third sector organisations.

17. Charlotte McArdle acknowledged concerns raised by family representatives that some staff in the hospital feel their voices are not being heard, and asked Marie Heaney and Francis Rice to consider measures to address this.

AP4: Review and consider options to strengthen engagement with hospital staff. (Action: Belfast Trust)

Agenda Item 5 – Draft HSC Action Plan

18. Sean Holland acknowledged that calls had been made from a range of sources for a public inquiry into the events at Muckamore, and reiterated that no decision had yet been taken on this. He advised members of the legislative requirement that decisions on public inquiries are ultimately for Ministers to take, and it is likely that a decision on this will be one of the first items to be considered by any new Minister, when appointed.

19. He went on to introduce the draft action plan to members, noting that while it needed further work to finalise the actions and timescales it was being shared with the Group in its current draft state, both in the interests of transparency and also to promote a discussion about the Group's objectives.

20. Mark Lee advised that MDAG will monitor and oversee delivery against the actions set out in the plan, with a progress update to be provided to the Permanent Secretary following each meeting. He stressed the importance of input from HSC organisations to inform the final plan, particularly in relation to identifying and agreeing appropriate and deliverable timescales for actions, and reminded Trusts to forward any comments on the plan as soon as possible.

AP5: Comments on actions and timescales in draft plan to be forwarded to DoH (Action: HSCB/PHA/HSC Trusts)

21. Sean Holland clarified that the plan sought to address all the recommendations made in the Level 3 SAI report in the most appropriate way, setting out the rationale for this clearly. Gavin Davidson advised that the work underway to deliver the actions in the plan should be informed by international best practice, and he also stressed the importance of a standardised approach to evaluating plans.

22. Members agreed the importance of a shared understanding across the HSC system of the actions required, and it was suggested and agreed that a glossary would be a useful addition to the plan.

AP6 – Glossary of terms to be added to Action Plan (Action: DoH)

23. Members also emphasised that effective engagement and partnership arrangements with accommodation providers will be key to delivery of the Permanent Secretary's commitments on resettlement. Sean Holland advised that DoH had been fully engaged with the Department for Communities in relation to this, and indicated that in this context the DfC Permanent Secretary was scheduled to visit the Mews Supported Living scheme in Belfast, following a recent visit to the facility by Richard Pengelly. Mark Lee advised members that DoH will provide input on the current Department for Communities-led consultation on the proposed introduction of a standardised rate for Supporting People schemes.

Agenda Item 6 – Leadership and Governance Review

24. Mark Lee advised members that this review had been instigated to address a gap in the Level 3 SAI review, and DoH had commissioned the Health and Social Care Board and Public Health Agency to develop draft Terms of Reference for the review. These had been prepared and were currently being considered by the Department. Members requested that the Terms of Reference be brought to the next MDAG meeting.

AP7: Draft Terms of Reference for the Leadership and Governance review to be tabled at next MDAG meeting (Action: DoH)

Agenda Item 7 – Timescale for Permanent Secretary meeting with families

25. Sean Holland reminded members that the Permanent Secretary had previously committed to regular meetings with families to update them on progress on his commitments, and sought views on an appropriate timescale for these meetings. Family representatives indicated they would prefer any such meetings to be held only when there was definitive progress to report, as

individual families have specific caring commitments which impact on their capacity to attend meetings.

26. Sean Holland agreed to reflect these comments to the Permanent Secretary, and it was agreed that a meeting should be arranged when a completed Action Plan was agreed.

Agenda Item 8- Format of reporting

27. Charlotte McArdle asked members for any further views on the format for reporting to the Group. Mark Lee advised members that the format of the highlight report which will be brought to each MDAG meeting is still being refined, and a performance dashboard will be developed to show progress against the key objectives in the action plan.

Agenda Item 9 – Date of next meeting

28. Sean Holland advised members that future meeting dates would be identified and circulated to members as quickly as possible. Members suggested that it would be helpful to consider potential alternative venues for future meetings, with the Antrim area proposed as a suitable compromise.

AP8: Circulate dates for future meetings and identify potential alternative meeting venues (Action: DoH)

Agenda Item 10 - Any other business

29. There was no other business.

Summary of Action Points

Ref.	Action	Responsible	Update	Open/closed
30/8/AP1	Consult with the Patient Client Council to develop proposals for extending family and individual patients' involvement in the work of MDAG	Dept of Health		
30/8/AP2	Provide an update on levels of service user/family participation in on-line engagement survey, and consider steps to facilitate family involvement at Project Board level	Health and Social Care Board		
30/8/AP3	Copy of Belfast Trust contingency plan to be provided to DoH.	Belfast Trust		
30/8/AP4	Review and consider options to strengthen engagement with hospital staff.	Belfast Trust		
30/8/AP5	Comments on actions and timescales in draft plan to be forwarded to DoH	Health and Social Care Board/Public Health Agency/Trusts		
30/8/AP6	Glossary of terms to be added to Action Plan	Dept of Health		
30/8/AP7	Draft Terms of Reference for the Leadership and Governance review to be	Dept of Health		

	tabled at next MDAG meeting			
30/8/AP8	Circulate dates for future meetings and identify potential alternative meeting venues	Dept of Health		

Learning Disability Unit
September 2019

DRAFT

Muckamore Departmental Assurance Group (MDAG)**Minutes of Meeting****11am, Tuesday 1 October 2019****Muckamore Abbey Hospital****Attendees:**

Sean Holland	DoH(Joint Chair)
Rodney Morton	DoH(Joint Chair)
Marie Roulston	HSCB
Mark Lee	DoH
Alison McCaffrey	DoH
Maire Redmond	DoH
Sean Scullion	DoH (Note)
Ian McMaster	DoH
Margaret Kelly	Mencap
Margaret Cameron	Cedar Foundation
Brigene McNeilly	Family representative
Brenda Aaroy	Belfast Trust
Dawn Jones	Family representative
Marie Heaney	Belfast Trust
Brenda Creaney	Belfast Trust
Barney McNeaney	Southern Trust
Karen O'Brien	Western Trust
Don Bradley	South Eastern Trust
Oscar Donnelly	Northern Trust
Petra Corr	Northern Ireland British Psychological Society
Lourda Geoghan	RQIA (observer)
Gavin Davidson	QUB

Apologies:

Charlotte McArdle	DoH
Francis Rice	(External Nursing expert)
Eileen McEneaney	(Strengthening the Commitment collaborative)
Briege Quinn	PHA
Aine Morrison	DoH
Jackie McIlroy	DoH

Agenda Item 1 - Welcome/Introductions/Apologies

1. The co-Chairs welcomed attendees to the second meeting of the MDAG. Introductions were made and apologies noted. The meeting noted the replacement of Mary Hinds as Public Health Agency representative by Briege Quinn, following Mary's recent retirement. The co-Chairs recorded their appreciation to Mary Hinds for her contribution.

Agenda Item 2 - Minutes of Previous Meeting

2. The minutes of the previous MDAG meeting on 30 August were agreed.

Agenda Item 3 - Update on Actions

3. Rodney Morton provided an update on the action points arising from the previous meeting. A summary of these is attached at **Annex A**.

Agenda Item 4 - Highlight Report and Dashboard

4. Mark Lee provided an overview of the highlight report, including the current position on the police investigation, and clarified that 31 staff were currently on precautionary suspension as a result of viewing of historic CCTV footage. To assist MDAG's oversight of progress on resettlement, he presented a sample reporting dashboard using indicative figures as a proposed reporting mechanism, and sought views from members on the proposed format and content. Members discussed the content of the dashboard, and suggested that it would be useful to add metrics on predicted resettlements on a Trust by Trust basis.

AP1: Updated dashboard to be tabled at next MDAG meeting for agreement (Action: DoH)

5. The family representatives reflected concerns raised by families and patients about the future of the hospital, and expressed disappointment that they were learning of developments through the media. They highlighted the need to improve communication with families and carers. Seán Holland explained some of the issues in relation to media messaging, and re-emphasised the Department's commitment to transparency in its communications with families and carers as part of an overall programme of engagement. He indicated officials' willingness to meet with any of the groups of families and family representatives. Rodney Morton highlighted the role of the Patient Client Council in brokering these conversations. Brenda Aaroy highlighted the particular need to prioritise communication with those families with family members currently in MAH in light of their concerns about future care arrangements.
6. Mark Lee also updated members on progress on resettlement, advising that an estimated 18 patients have discharge dates over the next 2 months, and that the operational delivery group established to progress the resettlement programme

held its first meeting on 16 September. He advised that the staffing position in the hospital is being kept under daily review, and updated members on the work being taken forward by Francis Rice to support nursing staff in the hospital. Funding has been agreed for a regional bed manager post, and contingency plans have been prepared by 4 of the 5 Trusts. The plans set out how each Trust will ensure continuity of care for the current in-patient population in a range of scenarios for the future of the hospital, including moving staff from other services to the hospital.

AP2: Individual Trust contingency plans and a Regional Plan for the future role of the hospital to be amalgamated and shared with all families (Action: DoH).

7. Seán Holland advised that all Trusts had been directed to take all necessary steps to ensure that services at Muckamore continued to be provided safely and in compliance with all statutory and regulatory requirements. Oscar Donnelly confirmed that Trusts had worked together on a regional basis in the development of their contingency plans. Marie Roulston reinforced this regional approach and gave an assurance that the 5 Trusts and the HSCB are very clear that any decisions would be taken in the best interests of patients and families. This message was welcomed by family representatives.
8. Petra Corr expressed concern over sustaining the spectrum of service delivery and the need to be mindful of any unintended consequences e.g. in community services. Rodney Morton advised that written communication will issue to all Directors on in-reach realisable options and noted that the priority is stabilising the site.
9. In response to a question from family representatives about the number of Learning Disability staff trained across NI, Brenda Creaney advised that 35 Learning Disability nurses graduate each year. In addition, consideration is also being given to the potential to recruit Learning Disability nurses currently working in other disciplines, as well as agency staff. Mark Lee advised that an initial draft of the Learning Disability Service Model was expected by end of October.

Agenda Item 5 - Report on Safeguarding Arrangements in MAH

10. Seán Holland invited Marie Roulston to provide an update on the initial findings from the work to draw up a process map of Adult Safeguarding practices at the

hospital. He also highlighted that safeguarding arrangements had been identified as an issue in the Dunmurry Manor report, and it was likely that the response to this would include a commitment to a review of safeguarding arrangements for vulnerable adults.

11. Marie Roulston provided an overview of initial findings from the adult safeguarding process mapping review in MAH being conducted by Joyce McKee. The report is still being finalised, but initial indications are that safeguarding investigations at the hospital have been carried out in line with current regional procedures and policies. The final report will be shared with the group when completed. Seán Holland re-emphasised the group's commitment to transparency and that all papers in relation to MDAG meetings would be available to the whole group.

AP3: Safeguarding Report to be circulated to MDAG members when completed (Action – HSCB)

Agenda Item 6 – Update on engagement with families

12. Rodney Morton referred to AP4 from the previous meeting, and invited the Belfast Trust to provide an update on their engagement with families. Marie Heaney outlined the key messages from a recent series of meetings held with families, including concerns about future services, and the need for robust community services, especially for people with complex Learning Disability and autism. Families had however given very positive feedback about the high calibre and quality of hospital nursing staff. She also highlighted concerns families had raised about the effectiveness of previous adult safeguarding investigations for example in Ennis ward and their thirst for information and assurances on an ongoing basis.
13. Brenda Aaroy endorsed the need to be more proactive about communication and the need to engage with families in relation to the future of Muckamore as many had concerns about alternative service provision. She advised that some families had suggested that perhaps Muckamore could be rebranded and re-registered as a residential care service. She also highlighted the impact on staff who are concerned about the future and who need support. Brenda Creaney advised that psychological support is provided to families, patients and staff.

14. The family representatives emphasised the impact on families of hearing about developments through the media. Rodney Morton highlighted the ongoing work to develop the new model for learning disability services which would provide a new framework for these services. He further advised that psychological counselling is currently part of the support network and that engagement through the Patient Client Council should strengthen this.

15. Seán Holland advised the group that he had taken part in a media interview on Muckamore prior to the meeting. He also advised that as an immediate practical step to improve communications, a factsheet highlighting the key messages from the MDAG meetings would be prepared following each MDAG meeting and forwarded to the Belfast Trust for dissemination to families and staff at Muckamore.

AP4: Fact sheet to be issued to Belfast Trust following MDAG meetings for circulation to families and staff at Muckamore. (Action: DoH)

16. The group discussed the need to have other representatives around the table, for example the Department for Communities in terms of the service model and planning for the future, front-line staff who know the patients best and who currently have no voice, and other consultants particularly for the resettlement perspective.

17. Concerns that families have over services provided by the private sector were raised by Marie Heaney, including staff training, pay scales, turnover and their understanding of individual patient needs. Margaret Cameron highlighted a significant piece of work with the voluntary and community sector currently being undertaken by the Northern Ireland Social Care Council in respect of the training and development of community staff. She also highlighted the importance of engagement with the Department for Communities. Mark Lee advised of work ongoing with the Department for Communities in relation to strategic needs assessment and agreed to provide an update on this at the next MDAG meeting.

AP5: Update on engagement work with the Department for Communities to be tabled at next MDAG meeting. (Action: DoH)

Agenda Item 7 - Leadership and Governance Review

18. Sean Holland noted that the Terms of Reference had been circulated to members. Mark Lee reminded the group of the background to the Leadership and

Governance Review which is intended to address a gap in the Level 3 SAI review. He advised that the review has a timescale of 6 months and that subject to any comments from members, the Terms of Reference will be finalised and arrangements put in place to initiate the review.

19. In response to a question from Brenda Aaroy about feedback from nursing students on placement in Muckamore to the course tutors in the universities, Brenda Creaney advised that the universities had been asked for this and that the feedback was very positive. The Trust was asked to make the feedback available to the Group.

AP6: Circulate feedback from student nurses on placement at Muckamore (Action – Belfast Trust).

20. Petra Corr reminded members of the importance in assessing feedback of factoring in the power differential between junior and senior staff. Other comments in relation to the Terms of Reference included the need to include external governance arrangements, advocacy, learning since 2017 and the recruitment of members to the review panel. Sean Holland advised that comments would be considered in agreeing the final Terms of Reference for the review, and Mark Lee asked that any further comments be provided by Friday 4th October.

Agenda Item 8 - Acute Care Review

21. Marie Roulston advised the group that she had just received an initial draft copy of the report and was expecting to receive an updated version shortly. She advised that early indications were that the report's recommendations would address the themes already discussed during the MDAG meeting, and that it would be shared with DoH, HSCB and PHA colleagues with the aim of signing off a final version by the end of this week. Seán Holland recognised families and carers interest in the report's recommendations, and indicated that in the interests of transparency it would also be shared with them at the earliest possible juncture. Rodney Morton reminded members that the review was part of Learning Disability Service Model Transformation project.

AP7: Acute Care Review Report to be shared with families and carers. (Action: HSCB/PHA)

Agenda Item 9 - Press Coverage / Media Activity

22. Seán Holland updated the group on the likely content of a media interview given to the BBC by Margaret Flynn, which was expected to be broadcast later. He advised his understanding was that she was likely to express disappointment that the hospital remained open, but he stressed that no firm decision had been taken on the future of services provided at the hospital. He provided an assurance that any decision on future service provision would be taken in the best interests of patients and their families, and with their full involvement.

Agenda Item 10 - Draft HSC Action Plan

23. Mark Lee gave an overview of the draft plan, advising members that it had been updated to include target dates against all actions, and acknowledged the central role of the work being taken forward through the Transformation project to develop a new Learning Disability Service Model. He advised that the plan is a living document which will be kept under review and updated as necessary to reflect any relevant developments. He also acknowledged the challenging deadlines associated with many of the actions.

24. The family representatives queried the delay in implementing the new Deprivation of Liberty legal framework. Mark Lee summarised the background to the changes, and explained that a short delay of 2 months to the implementation of the relevant provisions of the Mental Capacity Act relating to deprivation of liberty had been required to ensure that all necessary preparations had been made. Petra Corr clarified that the deprivation of liberty provisions did not apply to individuals detained under the Mental Health Order. It was agreed that the factsheet for families and staff could usefully include a short summary of forthcoming changes relating to deprivation of liberty.

AP8: Include a summary of the new deprivation of liberty provisions in the MDAG factsheet. (Action – DoH)

25. In relation to the resettlement actions, the family representatives suggested that there will be a core group of the current in-patient population for whom resettlement will not be an option, and queried whether an area of the current hospital site could be re-designed to provide an accommodation solution for these patients. Rodney Morton suggested that the regional operational delivery group would be best

placed to consider this, and Mark Lee indicated that this proposal would also be considered as part of any options appraisal work on the future role of the hospital.

26. Members indicated they were content to agree the draft action plan. Rodney Morton advised that a first progress on the plan would be prepared for consideration at the next MDAG meeting.

AP9: Prepare Action Plan progress report for consideration by MDAG. (Action - DoH)

Agenda Item 11 - Date of next meeting

27. The next meeting will be held on 30th October on the Muckamore site if possible, with details of the venue to be confirmed.

Agenda Item 12 – Any other business

28. There was no other business.

Summary of Action Points

Ref.	Action	Responsible	Update	Open/closed
01/10/AP1	Updated dashboard to be tabled at next MDAG meeting for agreement.	DoH	Updated dashboard circulated with papers for discussion under agenda item 5.	Closed
01/10/AP2	Individual Trust contingency plans and a Regional Plan for the future role of the hospital to be amalgamated and shared with all families.	DoH	Awaiting Western Trust contingency plan and development of Regional Plan in light of findings of independent review of acute care.	Open
01/10/AP3	Safeguarding Report to be circulated to MDAG members when completed.	HSCB	Draft report being considered by HSCB/DoH – final version will be circulated to MDAG when agreed.	Open

01/10/AP4	Fact sheet to be issued to Belfast Trust following MDAG meetings for circulation to families and staff at Muckamore.	DoH/ Belfast Trust	Circulated to MDAG members on 7/10/19.	Closed
01/10/AP5	Update on engagement work with the Department for Communities to be tabled at next MDAG meeting.	DoH	Circulated with MDAG papers for discussion under agenda item 14.	Closed
01/10/AP6	Circulate feedback from student nurses on placement at Muckamore.	Belfast Trust	Circulated with MDAG papers.	Closed
01/10/AP7	Acute Care Review Report to be shared with families and carers.	HSCB	Circulated with MDAG papers for discussion under agenda item 13.	Open
01/10/AP8	Include a summary of the new deprivation of liberty provisions in the MDAG factsheet.	DoH	Circulated to MDAG members on 7/10/19.	Closed
01/10/AP9	Prepare Action Plan progress report for consideration by MDAG.	DoH/ HSCB/ Trusts	RAG rated action plan circulated with MDAG papers for discussion under agenda item 7.	Closed

Update on Action Points

MDAG – 30 August 2019

Ref.	Action	Responsible	Update	Open/closed
30/8/AP1	Consult with the Patient Client Council to develop proposals for extending family and individual patients' involvement in the work of MDAG	DoH	Rodney Morton advised that following discussions with Patient Client Council, a proposal has been provided for independent advocacy to support the work of MDAG. A business case for this is being developed.	Closed
30/8/AP2	Provide an update on levels of service user/family participation in on-line engagement survey, and consider steps to facilitate family involvement at Project Board level	HSCB	The survey closed at the end of Sept with over 670 with over 1800 individuals engaged in local events. The results are currently being collated and analysed and these will inform the preparation of a high level first draft of the Service Model, which is expected to be ready by the end of October.	Closed
30/8/AP3	Copy of Belfast Trust contingency plan to be provided to DoH.	Belfast Trust	Contingency plans have from 4 of the 5 Trusts (including Belfast Trust) have been provided to DoH. Western Trust plan in development.	Closed
30/8/AP4	Review and consider options to strengthen	Belfast Trust	Update provided under agenda item 6.	Closed

	engagement with hospital staff.			
30/8/AP5	Comments on actions and timescales in draft plan to be forwarded to DoH	HSCB/ PHA/ Trusts	Comments from HSCB and Belfast Trust provided, and draft plan amended accordingly.	Closed
30/8/AP6	Glossary of terms to be added to Action Plan	DoH	Glossary of terms has been added– this will be kept under review.	Closed
30/8/AP7	Draft Terms of Reference for the Leadership and Governance review to be tabled at next MDAG meeting	DoH	ToRs tabled at 1 October meeting	Closed
30/8/AP8	Circulate dates for future meetings and identify potential alternative meeting venues	DoH	Dates up to end of December have been circulated and venues will be confirmed.	Closed

Muckamore Departmental Assurance Group (MDAG)
2pm, Wednesday 30 October 2019
Portmore, Muckamore Abbey Hospital
Minutes of Meeting

Attendees:		Apologies:	
Sean Holland	DoH(Joint Chair)	Ian McMaster	DoH
Charlotte McArdle	DoH(Joint Chair)	Oscar Donnelly	Northern Trust
Marie Roulston	HSCB	Jackie McIlroy	DoH
Mark Lee	DoH		
Maire Redmond	DoH		
Sean Scullion	DoH (Note)		
Aine Morrison	DoH		
Briege Quinn	PHA		
Margaret Kelly	Mencap		
Stephen Matthews	Cedar Foundation		
Brigene McNeilly	Family representative		
Brenda Aaroy	Belfast Trust		
Dawn Jones	Family representative		
Marie Heaney	Belfast Trust		
Brenda Creaney	Belfast Trust		
Bernie Owens	Belfast Trust		
Francis Rice	External Nursing expert		
Barney McNeaney	Southern Trust		
Karen O'Brien	Western Trust		
Don Bradley	South Eastern Trust		
Alyson Dunn	Northern Trust		
Petra Corr	Northern Ireland British Psychological Society		
Lourda Geoghan	RQIA (observer)		
Gavin Davidson	QUB		
Eileen McEneaney	Strengthening the Commitment collaborative		

Agenda Item 1 - Welcome/Introductions/Apologies

1. The co-Chairs welcomed attendees to the third meeting of the MDAG. Introductions were made and apologies noted.

Agenda Item 2 - Minutes of Previous Meeting

2. The minutes of the previous MDAG meeting on 30 August were agreed.

Agenda Item 3 - Update on Actions

3. Seán Holland provided an update on the action points arising from the previous meeting. A summary of these is attached at **Annex A**.

Agenda item 4 - Information Sharing / Technology

4. The Group discussed the continuing media interest in Muckamore, the content of recent reporting about staff suspensions and whether there was any scope to influence this. Family representatives stressed the negative impact the media reports were having on patients and their families, referencing in particular speculation about the potential closure of Muckamore. It was emphasised that no decisions have yet been taken on the long-term future role of the hospital. Members recognised the importance of ensuring that patients and their families are kept advised in a timely fashion of any developments in relation to the hospital, and agreed that the Belfast Trust should review their current communication arrangements, with appropriate input from families.

AP1: Existing communication arrangements with families and carers to be reviewed, in partnership with families/carers. (Action: Belfast Trust)

Agenda Item 5 - Highlight Report and Dashboard

5. Mark Lee provided an overview of the highlight report, including the current position on the police investigation, and clarified that 36 staff were currently on precautionary suspension as a result of viewing of historic CCTV footage. He highlighted a regional initiative to bolster the current nursing workforce at the hospital as an important element of the ongoing contingency planning arrangements for services at the hospital. He advised that the Permanent Secretary had recently formally signed off the HSC Action Plan, and was keen to follow up his previous meeting with the families. The timing and arrangements for a meeting were being considered. An updated reporting dashboard was presented to the group which had been amended to reflect comments and feedback from the 01 October MDAG. Members discussed the content of the dashboard, and suggested that it would be useful to include metrics on readmissions to Muckamore Abbey.

AP2: Updated dashboard to be tabled at next MDAG meeting for agreement (Action: DoH)

6. Mark Lee also updated members on progress on resettlement, advising that an estimated 12 patients have discharge dates over the next 2 months, and that the regional operational delivery group established to progress the resettlement programme held its second meeting on 16 October. He further advised of a revision to the timescale for the LD Service model project, with an initial draft of the Service Model now expected in November.
7. Marie Roulston advised that contingency plans setting out how each Trust will ensure continuity of care for the current in-patient population had now been received from each of the 5 Trusts. Mark Lee advised that these would be collated and circulated to MDAG.

AP3: Individual Trust contingency plans and a Regional Plan for the future role of the hospital to be amalgamated and circulated to MDAG (Action: DoH).

8. Bernie Owens provided an update on new staffing arrangements and responsibilities at Muckamore as follows:
 - Bernie Owens has taken responsibility for the safe and sustainable running of Muckamore Hospital;
 - Marie Heaney is responsible for Intellectual Disability community services, resettlement and Adult Safeguarding across the Trust;
 - Carol Diffin has lead responsibility for historic viewing of CCTV and associated safeguarding processes;
 - Gillian Traub becomes co-director of Muckamore; and
 - Patrica McKinney has been appointed as the Divisional Lead Nurse.
9. Brenda Creaney advised the Group that Moira Mannion, co-Director of Nursing, who has worked for many years across the Belfast Trust was retiring from 31st October and wished her well in her retirement.

Agenda item 6 - Update on MAH Staffing Position

10. Francis Rice provided an update on the current nursing staffing position at the hospital, and advised that a new staffing model is being developed which would calculate the number of staff required for each ward. The model will also inform the daily situation report to the Department to provide assurance on safe staffing levels. He further advised that policy in the hospital on use of special observations is being reviewed in consultation with medical staff and also outlined that measures are being introduced to facilitate registered agency nursing staff working at the hospital to take charge of wards. He confirmed that all agency staff receive full Trust training, and Brenda Creaney highlighted that agency staff had been fully integrated into the hospital including wearing Trust rather than Agency uniforms.
11. Francis Rice advised of concerns about staffing levels over the Christmas period as a significant number of agency staff (approximately 75%) employed at the hospital had indicated an intention to return home for the holiday period. He updated the group on incentives being offered to nursing staff willing to relocate to work at Muckamore on a temporary basis and clarified that these incentives would also be extended to staff already working in Muckamore as part of ongoing work to stabilise the hospital. In response to a query he clarified that the incentives would not be extended to staff who were on sick-leave or those who had been placed on precautionary suspension. He also advised of engagement with staff who were currently working out their notice to reconsider their employment at the hospital in light of the incentives, but with limited success.
12. Seán Holland emphasised that this is a system wide issue and not just a Belfast Trust issue and as such it needs a collective regional approach. Trust Directors confirmed that they were working to identify qualifying staff in their Trusts who might be willing to re-locate to work in Muckamore, although it was highlighted that this was in the context of already existing staffing pressures at the other Learning Disability services.
13. The group discussed business continuity planning for Muckamore in the event of strike action by nursing unions, and suggested it might be helpful to consider approaches to retired nurses who had previously worked in Muckamore. Francis Rice advised that this had been done and that a number of these staff were already registered as bank staff, but that he would revisit this option. A family

representative took the opportunity to say how impressed she was with the agency staff in terms of their competency and kindness.

Agenda Item 7 - HSC Action Plan progress report

14. Máire Redmond confirmed to members that the HSC action plan had been formally agreed by the Permanent Secretary and that he had indicated his intention to meet again with families to provide an update on progress. Arrangements for a meeting will be advised in the near future. She further advised that the Action Plan was still a work in progress and that whilst the majority of actions had been given an initial RAG rating from the relevant responsible owner/owners, a small number (4) remained to be agreed. Máire Redmond also advised that work would be taken forward to agree RAG ratings for these actions, and that an update on progress would be sought against each action ahead of the next meeting of MDAG. A family representative raised an issue around communication with staff in relation to addressing an issue in one of the wards onsite, and Brenda Creaney agreed to follow this up with the Trust Estates Department.

AP4: Update on HSC Action Plan to be provided for next MDAG (DOH)

Agenda Item 8 - Update on Regional Operational Delivery Group

15. Members noted that an update on the Operational Delivery Group's work had already been provided under agenda item 5. It was suggested that it would be helpful for the Group to consider the issue of re-admissions to the hospital, with a view to considering any lessons emerging from breakdown of community placements, with appropriate engagement from providers.

AP5: RLDODG to monitor and analyse re-admission rates to identify and disseminate any learning arising (HSCB)

Agenda Item 9 - Psychiatric Support for people leaving Muckamore

16. Marie Roulston advised that Trusts have highlighted the need for psychiatric outreach support as a key success factor in maintaining community placements and thus facilitating the successful resettlement of patients. It was acknowledged that other professional support, such as AHP and psychology, also played an important role in this. Members agreed effective outreach was critical to facilitate and maintain successful placements in the community, and that a regional person centred approach was required. Seán Holland agreed that a regional solution was

required and asked that a presentation be made to MDAG to clarify roles and responsibilities in the provision of these services.

AP6: Develop a presentation for MDAG to clarify roles and responsibilities in psychiatric and other professional outreach and support (HSCB).

Agenda item 10 - Report on Safeguarding Processes in MAH

17. Marie Roulston advised the Group that the review of Adult Safeguarding processes at the hospital has been completed by the Health and Social Care Board, and the draft report is being considered. She agreed that a copy of the report would be issued to MDAG in advance of the next meeting.

AP7: Report on Safeguarding Processes at MAH to be circulated for next MDAG meeting (HSCB)

Agenda item 11 - Update on engagement with all families/media activity

18. Brenda Aaroy provided the Group with an update on the Belfast Trust's programme of engagement with families, including production of a regular newsletter for patients, families and staff, the circulation of a factsheet from meetings of MDAG, and a forthcoming meeting at the hospital on Monday 4 November between families and officials from the Department of Health. The Chief Executive of the Patient Client Council will also attend this meeting. Gillian Traub also advised the Group that she was working on developing a process of internal communication for staff in Muckamore.

Agenda item 12 - MAH Leadership and Governance Review update

19. Briege Quinn advised the Group that the HSCB and PHA were in the process of commissioning this review. A couple of suitably qualified individuals had been identified for the review and it was hoped appointments would be confirmed shortly. She noted that the timescale for completion of the review was very tight and would welcome some flexibility to ensure the scale and quality of the review. The Group recognised this will be challenging and will be kept under review, but considered it was premature to agree an extension at this stage. Marie Roulston advised that the Terms of Reference had been agreed, and would be circulated to MDAG members ahead of the next meeting.

AP8: Terms of reference to be included in papers for November MDAG meeting (HSCB/PHA)

Agenda Item 13 - Update on Acute Care Review, and development of regional plan for acute in-patient care

20. Marie Roulston advised that the report remains in draft and invited feedback from members by 20th November. Briege Quinn informed the Group that the Review Panel members would be available to discuss the report at a meeting arranged for 22nd November. Seán Holland emphasised the significance of this work and the importance of progressing the recommendations.

Agenda Item 14 - Update on Engagement Work with DfC

21. The Group was provided with an update on the ongoing programme of work on Supporting People being taken forward jointly by the Department of Health and Department for Communities. The involvement of housing representatives on the Regional Learning Disability Operational Delivery Group (RLDODG) was highlighted as helpful by Alyson Dunn. The Group acknowledged that effectively meeting the very specific resettlement needs of some of the remaining in-patient population at Muckamore may require exploring other accommodation and support options, including potentially a model of statutory HSC provision. It was noted that any successful model of provision will need to be designed around individuals' needs.
22. A family representative asked about plans for those in-patients who have expressed an unwillingness to leave Muckamore. Seán Holland advised that any discharge plans will be based on assessed need and the wishes of the patient and that in individual cases this may involve developing bespoke housing arrangements. He indicated that Trusts may need to consider alternative models for this, and in this respect should not be constrained by existing models of provision. He clarified that both Departments would be willing to support Trusts in this regard, and that representatives from the Department for Communities (DfC) will be invited to MDAG as required to advise on potential solutions.
23. A family representative referenced recent media reporting about an historic safeguarding report into events at another ward on the hospital site, and asked to see a copy of this. Following a discussion about confidentiality, it was agreed the full report should not be shared as it contained names of individuals. Seán Holland

asked instead that a synopsis of the report be produced and circulated to the Group.

AP9: Synopsis of Ennis Ward Safeguarding Report to be shared with MDAG (Belfast Trust)

Agenda Item 15 - Date of next meeting

24. The next meeting will be held on 27th November on the Muckamore site if possible, with details of the venue to be confirmed.

Agenda Item 16 – Any other business

25. There was no other business.

Summary of Action Points

Ref.	Action	Responsible	Update	Open/closed
30/10/AP1	Existing communication arrangements with families and carers to be reviewed, in partnership with families/carers.	Belfast Trust		
30/10/AP2	Updated dashboard to be tabled at next MDAG meeting for agreement.	DoH		
30/10/AP3	Individual Trust contingency plans and a Regional Plan for the future role of the hospital to be amalgamated and shared with all families.	DoH		
30/10/AP4	Update on HSC Action Plan to be provided for next MDAG.	DoH		

30/10/AP5	RLDODG to monitor and analyse re-admission rates to identify and disseminate any learning arising.	HSCB		
30/10/AP6	Develop a presentation for MDAG to clarify roles and responsibilities iro psychiatric and other professional outreach and support.	HSCB		
30/10/AP7	Report on Safeguarding Processes at MAH to be circulated for next MDAG meeting.	HSCB		
30/10/AP8	Terms of reference for Leadership and Governance review to be included in papers for November MDAG meeting.	HSCB/ PHA		
30/10/AP9	Synopsis of Ennis Ward Safeguarding Report to be shared with MDAG	Belfast Trust		

Annex A

Update on Action Points

MDAG 01 October 2019

Ref.	Action	Responsible	Update	Open/closed
01/10/AP1	Updated dashboard to be tabled at next MDAG meeting for agreement.	DoH	Update provided and discussed under agenda item 5.	Closed
01/10/AP2	Individual Trust contingency plans and a Regional Plan for the future role of the hospital to be amalgamated and shared with all families.	DoH	Final Contingency plan not received in advance of meeting; to be provided for next MDAG.	Open
1/10/AP3	Safeguarding Process Map and Report to be circulated to MDAG members when completed.	HSCB	Draft report being considered by HSCB/DoH – final version will be circulated to MDAG when agreed.	Open
01/10/AP4	Fact sheet to be issued to Belfast Trust following MDAG meetings for circulation to families and staff at Muckamore.	DoH/ Belfast Trust	Fact sheet circulated with MDAG papers; the fact sheet will be produced and distributed after each MDAG meeting.	Ongoing
01/10/AP5	Update on engagement work with the Department for Communities to be tabled at next MDAG meeting.	DoH	Circulated with MDAG papers and discussed under agenda item 14.	Closed
01/10/AP6	Circulate feedback from student nurses on placement at Muckamore.	Belfast Trust	This was circulated with MDAG papers in advance of meeting.	Closed
01/10/AP7	Acute Care Review Report to be shared	HSCB	Report circulated with MDAG papers and	Closed

	with families and carers.		discussed under agenda item 13.	
01/10/AP8	Include a summary of new deprivation of liberty provisions in the MDAG factsheet.	DoH	This was included in the fact sheet which was distributed on 07 October.	Closed
01/10/AP9	Prepare Action Plan progress report for consideration by MDAG.	DoH/ HSCB/ Trusts	RAG rated action plan circulated and discussed under agenda item 7. This will remain a monthly action.	Ongoing

MDAG – 30 August 2019

Ref.	Action	Responsible	Update	Open/closed
30/8/AP1	Consult with the Patient Client Council to develop proposals for extending family and individual patients' involvement in the work of MDAG	DoH	Rodney Morton advised that following discussions with Patient Client Council, a proposal has been provided for independent advocacy to support the work of MDAG. A business case for this is being developed.	Closed
30/8/AP2	Provide an update on levels of service user/family participation in on-line engagement survey, and consider steps to facilitate family involvement at Project Board level	HSCB	The survey closed at the end of Sept with over 670 with over 1800 individuals engaged in local events. The results are currently being collated and analysed and these will inform the preparation of a high level first draft of	Closed

			the Service Model, which is expected to be ready by the end of October.	
30/8/AP3	Copy of Belfast Trust contingency plan to be provided to DoH.	Belfast Trust	Contingency plans have from 4 of the 5 Trusts (including Belfast Trust) have been provided to DoH. Western Trust plan in development.	Closed
30/8/AP4	Review and consider options to strengthen engagement with hospital staff.	Belfast Trust	Update provided under agenda item 6.	Closed
30/8/AP5	Comments on actions and timescales in draft plan to be forwarded to DoH	HSCB/ PHA/ Trusts	Comments from HSCB and Belfast Trust provided, and draft plan amended accordingly.	Closed
30/8/AP6	Glossary of terms to be added to Action Plan	DoH	Glossary of terms has been added– this will be kept under review.	Closed
30/8/AP7	Draft Terms of Reference for the Leadership and Governance review to be tabled at next MDAG meeting	DoH	ToRs tabled at 1 October meeting	Closed
30/8/AP8	Circulate dates for future meetings and identify potential alternative meeting venues	DoH	Dates up to end of December have been circulated and venues will be confirmed.	Closed

Muckamore Departmental Assurance Group (MDAG)**10am, Wednesday 27 November 2019****Portmore, Muckamore Abbey Hospital****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH(Joint Chair)	Bernie Owens	Belfast Trust
Charlotte McArdle	DoH(Joint Chair)	Brenda Aaroy	Belfast Trust
Marie Roulston	HSCB	Don Bradley	South Eastern Trust
Mark Lee	DoH	Gavin Davidson	QUB
Maire Redmond	DoH		
Sean Scullion	DoH (Note)		
Aine Morrison	DoH		
Ian McMaster	DoH		
Briege Quinn	PHA		
Stephen Matthews	Cedar Foundation		
Brigene McNeilly	Family representative		
Dawn Jones	Family representative		
Marie Heaney	Belfast Trust		
Brenda Creaney	Belfast Trust		
Francis Rice	External Nursing expert		
Barney McNeaney	Southern Trust		
Karen O'Brien	Western Trust		
Margaret O'Kane	South Eastern Trust		
Oscar Donnelly	Northern Trust		
Petra Corr	Northern Ireland British Psychological Society		
Lourda Geoghan	RQIA (observer)		

Agenda Item 1 - Welcome/Introductions/Apologies

1. The co-Chairs welcomed attendees to the fourth meeting of the MDAG. Introductions were made and apologies noted. Seán Holland advised members that due to the importance of these meetings, an explanation at Trust Chief Executive level would be sought in the event of apologies being provided for 2 meetings in a row.

Agenda Item 7 – MAH Staffing Position

2. Members agreed to take this agenda item first. Francis Rice provided an update on the current staffing position at Muckamore and advised that a further 2 members

of staff had been placed on precautionary suspension in the past week, bringing the total number of suspensions to date to 38 and that one member of staff had agreed to withdraw their resignation. He advised that 11 members of staff (7.5 whole time equivalents) from the South Eastern and Northern Trusts have so far agreed to work in Muckamore Abbey Hospital on a temporary basis. He advised the group that staffing rotas for the forthcoming holiday period had been developed and indications at this stage were that safe staffing levels were sustainable during this period. He noted however the potential difficulties in maintaining services in the event of any increase in levels of sick leave, any further staff suspensions as a result of the ongoing police investigations and also the ongoing industrial action. He also expressed a concern about the capacity to maintain safe staffing levels at the hospital in the medium term.

3. In relation to work to mitigate effects of the ongoing industrial action on the hospital, Charlotte McArdle advised that talks with Trade Union side (TUS) were ongoing and Brenda Creaney added that TUS would be asked to treat Muckamore as a derogation. Charlotte McArdle acknowledged the intensive work on staffing undertaken by Francis Rice, Belfast, Northern and South Eastern Trusts and Francis Rice acknowledged the support he'd received from the Department and the Belfast Trust.
4. A family representative suggested that some family members might be willing and available to help out at Muckamore if that would be of help. Seán Holland stressed the need to ensure that relatives should not feel pressured to help out.
5. This offer was welcomed and it was agreed that a communication should be issued to family members advising that any additional support they were able to provide would be gratefully received.

AP1: Circulate communication to families/carers of in-patients advising that Belfast Trust would welcome any additional family support during the forthcoming holiday period (BHSCT)

Agenda Item 2 - Minutes of Previous Meeting

6. The minutes of the previous MDAG meeting on 30 October were agreed.

Update on Actions

7. Seán Holland provided an update on the action points arising from the previous meeting. A summary of these is attached at **Annex A**. It was agreed that a note of the action points from each meeting would be circulated to members within 24 hours, given the monthly timetable for meetings.

AP2: Action points from each MDAG meeting will be circulated to members within 24 hours of the meeting. (DOH)

8. The Group was advised that further work was required in relation to the contingency plans provided by each of the HSC Trusts to develop a regional contingency plan, and this would be discussed at the next Adult Mental Health & Learning Disability Improvement Board meeting.
9. Comments were invited on the synopsis of the Ennis ward safeguarding investigation report which had been provided by Belfast Trust and circulated to members. Mark Lee advised that since the last MDAG meeting, DoH had received a request for a copy of the full report, which was being dealt with under Freedom of Information legislation. Aine Morrison advised the Group that she had been the Designated Officer in the safeguarding investigation and that the original report was a summary report of a complex safeguarding investigation. She had concerns that the conclusions summarised in the synopsis included the more positive findings but omitted the findings that were of more concern. Charlotte McArdle acknowledged the learning for all involved, and proposed that the full report should be circulated to the group. Aine Morrison advised members that the investigation had been conducted with the PSNI under Adult Safeguarding Joint Protocol arrangements, and accordingly the PSNI's views on disclosure of the report should be sought.
10. Family representatives expressed their shock at the content of the report, and also their concern about a lack of clarity on what actions had been taken to address the findings. Seán Holland gave a commitment that all requests for information received by MDAG would, in the interests of transparency and building trust, be responded to in line with all relevant information management legislation. A family representative asked whether the safeguarding investigation should now be re-opened in light of the current investigation and was advised that the PSNI

investigation had resulted in 2 staff members facing criminal charges. Seán also asked Aine Morrison, as the lead investigator on the Ennis safeguarding investigation to provide a separate briefing for relatives on the Report.

AP3: Requests for information raised at MDAG meetings to be responded to in line with relevant information management legislation. (DOH)

AP4: Briefing for relatives on Ennis Report to be arranged. (DOH/BHSCT)

Agenda item 4 - Update on meeting with families 04 November

11. Seán Holland provided a summary of the issues that had been raised at the Friends of Muckamore Support Group meeting held on Monday 4 November. These included arrangements for communication with families and carers, advocacy support for families and concerns around the resettlement programme. In response to a question from a family representative about the role of the Patient Client Council (PCC), Charlotte McArdle advised that the Department has provided a resource to allow the PCC to engage with families and suggested that Vivian McConvey be invited to join MDAG; this was agreed by the Group.

AP5: Vivian McConvey to be invited to join MDAG (DOH)

12. A suggestion from a family representative for a 'one-stop shop' event for families and carers to allow them to seek support and advice on an individual basis about the services available to support their relatives was considered and supported by the Group. Seán Holland suggested it would be helpful to seek the support of the PCC to organise an event. Members agreed that the PCC should be approached to ask for their support in organising the event.

AP6: Belfast Trust to approach PCC to seek support in organising one stop shop event (BHSCT)

13. Brenda Creaney provided an update of the engagement work currently being taken forward by Belfast Trust, including issue of the 3rd Muckamore newsletter and the management team joining the Trust's Carers Forum on 18th November. She advised the group that further work will be done including agreeing a tailored communication approach between each family member and the management

team, and seeking feedback on how communication could be improved more widely. She also advised that the Trust is engaging with the PCC in its role as an advocate.

14. Seán Holland referred to a proposal received from a family representative in relation to installing CCTV in all areas of LD facilities (including bedrooms). He advised that the Department is looking at the use of CCTV in facilities, and will be communicating with HSC organisations about this in the near future.

15. Seán Holland also referred to a paper he had received from a family representative outlining the pressure (expressed as bullying and intimidation) that some families felt they were being put under by HSC staff in order to expedite the resettlement programme. The Group agreed that this was not acceptable and Seán undertook to advise Trust Directors of Social Work of the issues raised by families around resettlement and to remind them of the principles underpinning resettlement.

AP7: Trust Directors of Social Work to be advised of issues raised by families around resettlement and reminded of the principles underpinning resettlement (DoH)

16. The co-chairs of the Group reiterated their commitment to continued participation in meetings with families for as long as the families find this to be helpful. It was clarified that anyone with an interest in the hospital was very welcome to attend Support Group meetings, with the next meeting scheduled for 2 December. Seán Holland reiterated a commitment made at the Friends of Muckamore meeting that additional family representatives were welcome to attend MDAG.

Agenda Item 5 - Highlight Report and Dashboard

17. Mark Lee provided an overview of the highlight report, including the current position on the police investigation, and clarified that 38 staff were currently on precautionary suspension as a result of viewing of historic CCTV footage. He highlighted a regional initiative to bolster the current nursing workforce at the hospital as an important element of the ongoing contingency planning arrangements for services at the hospital.

18. Brenda Creaney advised the Group of a Belfast Trust presentation provided to RQIA which provides detail of ongoing work including to re-modelling Multi-disciplinary Teams, ward based leadership, a new staffing model for the hospital and re-admissions to Muckamore.

AP8: Belfast Trust presentation to RQIA to be circulated to MDAG (BHSCT)

19. Seán Scullion presented the reporting dashboard to the group which had been updated to reflect comments at last MDAG on 30th October. He advised that work is continuing with the Regional Learning Disability Operational Delivery Group (RLDODG) to develop and improve reporting arrangements on the resettlement programme and highlighted the ongoing work to review placement break downs and to monitor re-admissions to Muckamore to identify learning. Petra Corr suggested it would be helpful to see a report on all the restrictive practices in the highlight report. Marie Heaney advised that it would be possible to provide this information on a monthly basis.

AP9: Reporting on use of restrictive practices at the hospital to be included in MDAG highlight report and meeting agendas (DoH)

20. Seán Scullion advised that the Permanent Secretary's commitment to resettle all the remaining Priority Target List patients by end of December is not likely to be met. Petra Corr suggested it would be more helpful to progress with meaningful safe placements than push to get patients out quickly. Marie Heaney advised that the Belfast Trust had established a work stream on resettlement and the key messages coming from providers were a lack of central planning and assumptions being made which weren't borne out by infrastructure. Other issues identified are staff terms and conditions, difficulties in recruitment, training and community support. She further advised that she was working on a paper to refresh the resettlement programme, and that patient and carer involvement would be a part of a new project.

21. The Group discussed the difficulties in providing suitable placements and the challenges for providers. Aine Morrison highlighted that there have been some very successful placements which have delivered significant improvements in quality of life for individuals. Seán Holland stressed the need to identify and understand the limiting factors impacting on successful resettlement, to inform the development of

proposals to overcome these. Marie Heaney undertook to bring proposals to the Group.

AP10: Proposals to address barriers to resettlement to be tabled for consideration by MDAG (Belfast Trust/HSCB)

Agenda Item 6 - HSC Action Plan progress report

22. Máire Redmond provided an overview of the HSC Action Plan which contains 43 actions, of which 1 is rated red (progress required), 37 amber (work in progress) and 5 green (completed). She advised that two updates were provided after the papers were circulated and that the progress report will be updated to reflect these. She reminded members that the plan was a living document, and progress (including any delays) would continue to be reported to MDAG.

Agenda Item 8 - Update on Regional Operational Delivery Group

23. Members noted that an update on the Operational Delivery Group's work had already been provided under agenda item 5. It was suggested that it would be helpful for the Group to consider the issue of re-admissions to the hospital, with a view to considering any lessons emerging from breakdown of community placements, with appropriate engagement from providers. Marie Roulston advised that work was underway to provide Positive Behaviour Support training to staff and providers in the New Year and that funding for this was being sourced.

AP11: Information on numbers of re-admissions to MAH due to community placement breakdown (including those occurring at weekends) to be provided to MDAG (HSCB)

24. Marie Roulston further advised that a meeting to discuss regional psychiatric support would be held on 02 December, and that a workshop is being organised for 11 December to consider the findings of the Acute Care Review and to develop and agree an implementation plan.

Agenda Item 9 – Report on Safeguarding arrangements in MAH

25. Marie Roulston referred to the report of the review of Adult Safeguarding Processes at the hospital which had been circulated with papers for the meeting;

it was agreed that any comments or questions from members arising from this would be considered at the December MDAG meeting.

Agenda item 10 – Leadership and Governance Review update

26. Briege Quinn advised that 2 individuals, Maura Devlin and Marion Reynolds, had agreed to join the independent team taking forward the Leadership and Governance Review and that a third individual had been approached. She also clarified that the Terms of Reference circulated to members was not the final version, and when these were agreed a timeline for completion of the review will be included.

AP12: Leadership and Governance review Terms of Reference to be agreed and finalised (PHA/HSCB)

Agenda item 11 - Forensic Scoping work update

27. Marie Heaney updated the Group on a scoping exercise being carried out to consider the potential to provide an in-patient forensic service for people with a Learning Disability on the Knockbracken Healthcare Park site. She advised that a workshop was planned for January, and a proposal paper will be developed for submission to DoH.

Agenda item 12 - Pathway for student feedback

28. The Group discussed the arrangements to review feedback from students from all disciplines who had undertaken placements at the hospital as part of their professional training. Rodney Morton advised that the Department was exploring the mechanisms by which student experiences and perspectives were fed back to placing universities, and that assurance would be sought from universities in relation to this.

Agenda Item 13 - AOB

29. Seán Holland noted that a number of MDAG members have previously worked at the Hospital, and that in the interests of transparency a register for the declaration of any conflicts should be established. The Group agreed with this suggestion.

AP13: Declaration of Interests form to be circulated to MDAG members (DoH)

Agenda Item 14 - Date of next meeting

30. The next meeting will be held on 18th December.

Summary of Action Points

Ref.	Action	Respon -sible	Update	Open/ closed
27/11/AP1	Circulate communication to families/carers of in-patients advising that Belfast Trust would welcome any additional family support during the forthcoming holiday period	BHSCT		
27/11/AP2	Action points from each MDAG meeting to be circulated to members within 24 hours.	DoH		
27/11/AP3	Requests for information raised at MDAG meetings to be responded to in line with relevant information management legislation.	DoH		
27/11/AP4	Briefing for relatives on Ennis Report to be arranged.	DoH		
27/11/AP5	Invite Vivian McConvey to join MDAG.	DoH		
27/11/AP6	Belfast Trust to approach PCC to seek support in organising one stop shop event.	BHSCT		
27/11/AP7	Trust Directors of Social Work to be advised of issues raised by families around resettlement and reminded of the principles underpinning resettlement.	DoH		

27/11/AP8	Belfast Trust presentation to RQIA to be circulated to MDAG	BHSCT		
27/11/AP9	Reporting on use of restrictive practices at the hospital to be included in MDAG highlight report and meeting agendas.	DoH		
27/11/AP10	Proposals to address barriers to resettlement to be tabled for consideration by MDAG.	BHSCT / HSCB		
27/11/AP11	Information on numbers of re-admissions to MAH due to community placement breakdown (including those occurring at weekends) to be provided to MDAG	HSCB		
27/11/AP12	Leadership and Governance review Terms of Reference to be agreed and finalised.	HSCB/ PHA		
27/11/AP13	Declaration of Interests form to be circulated to MDAG members.	DoH		

ANNEX A**Update on Action Points****MDAG 30 October 2019**

Ref.	Action	Respon- sible	Update	Open/ closed
30/10/AP1	Existing communication arrangements with families and carers to be reviewed, in partnership with families/carers.	Belfast Trust	BHSCT to update MDAG on progress.	Open
30/10/AP2	Updated dashboard to be tabled at next MDAG meeting for agreement.	DoH	Dashboard updated and circulated with papers for 27 Nov meeting for further consideration.	Closed
30/10/AP3	Individual Trust contingency plans and a Regional Plan for the future role of the hospital to be amalgamated and shared with all families.	DoH	The HSCB is co-ordinating the development of a regional contingency plan for consideration by MDAG.	Open
30/10/AP4	Update on HSC Action Plan to be provided for next MDAG.	DoH	November update circulated with papers for 27 Nov meeting.	Closed
30/10/AP5	RLDODG to monitor and analyse re-admission rates to identify and disseminate any learning arising.	HSCB	Discussed at RLDODG meeting on 13 November – proposal to be developed by RLDODG for consideration by MDAG.	Open
30/10/AP6	Develop a presentation for MDAG to clarify roles and responsibilities iro psychiatric and other	HSCB	HSCB to present to MDAG – date to be advised.	Open

	professional outreach and support.			
30/10/AP7	Report on Safeguarding Processes at MAH to be circulated for next MDAG meeting.	HSCB	Report circulated with papers for 27 Nov meeting.	Closed
30/10/AP8	Terms of reference for Leadership and Governance review to be included in papers for November MDAG meeting.	HSCB/ PHA	ToRs circulated with papers for 27 Nov meeting.	Closed
30/10/AP9	Synopsis of Ennis Ward Safeguarding Report to be shared with MDAG	Belfast Trust	Synopsis provided by Belfast Trust on 26 November.	Closed

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MDAG 01 October 2019

Ref.	Action	Responsible	Update	Open/closed
01/10/AP1	Updated dashboard to be tabled at next MDAG meeting for agreement.	DoH	Update provided and discussed under agenda item 5.	Closed
01/10/AP2	Individual Trust contingency plans and a Regional Plan for the future role of the hospital to be amalgamated and shared with all families.	DoH	Final Contingency plan not received in advance of meeting; to be provided for next MDAG.	Open
1/10/AP3	Safeguarding Process Map and Report to be circulated to MDAG members when completed.	HSCB	Draft report circulated to MDAG for 27 Nov meeting.	Closed
01/10/AP4	Fact sheet to be issued to Belfast Trust following MDAG meetings for circulation to families and staff at Muckamore.	DoH/ Belfast Trust	Fact sheet circulated with MDAG papers; the fact sheet will be produced and distributed after each MDAG meeting.	Ongoing
01/10/AP5	Update on engagement work with the Department for Communities to be tabled at next MDAG meeting.	DoH	Circulated with MDAG papers and discussed under agenda item 14.	Closed
01/10/AP6	Circulate feedback from student nurses on placement at Muckamore.	Belfast Trust	This was circulated with MDAG papers in advance of meeting.	Closed
01/10/AP7	Acute Care Review Report to be shared with families and carers.	HSCB	Report circulated with MDAG papers and discussed under agenda item 13.	Closed

01/10/AP8	Include a summary of new deprivation of liberty provisions in the MDAG factsheet.	DoH	This was included in the fact sheet which was distributed on 07 October.	Closed
01/10/AP9	Prepare Action Plan progress report for consideration by MDAG.	DoH/ HSCB/ Trusts	RAG rated action plan circulated and discussed under agenda item 7. This will remain a monthly action.	Ongoing

MDAG – 30 August 2019

Ref.	Action	Responsible	Update	Open/closed
30/8/AP1	Consult with the Patient Client Council to develop proposals for extending family and individual patients' involvement in the work of MDAG	DoH	Rodney Morton advised that following discussions with Patient Client Council, a proposal has been provided for independent advocacy to support the work of MDAG. A business case for this is being developed.	Closed
30/8/AP2	Provide an update on levels of service user/family participation in on-line engagement survey, and consider steps to facilitate family involvement at Project Board level	HSCB	The survey closed at the end of Sept with over 670 with over 1800 individuals engaged in local events. The results are currently being collated and analysed and these will inform the preparation of a high level first draft of the Service Model, which is expected to	Closed

MDAG/18/19

			be ready by the end of October.	
30/8/AP3	Copy of Belfast Trust contingency plan to be provided to DoH.	Belfast Trust	Contingency plans have from 4 of the 5 Trusts (including Belfast Trust) have been provided to DoH. Western Trust plan in development.	Closed
30/8/AP4	Review and consider options to strengthen engagement with hospital staff.	Belfast Trust	Update provided under agenda item 6.	Closed
30/8/AP5	Comments on actions and timescales in draft plan to be forwarded to DoH	HSCB/ PHA/ Trusts	Comments from HSCB and Belfast Trust provided, and draft plan amended accordingly.	Closed
30/8/AP6	Glossary of terms to be added to Action Plan	DoH	Glossary of terms has been added– this will be kept under review.	Closed
30/8/AP7	Draft Terms of Reference for the Leadership and Governance review to be tabled at next MDAG meeting	DoH	ToRs tabled at 1 October meeting	Closed
30/8/AP8	Circulate dates for future meetings and identify potential alternative meeting venues	DoH	Dates up to end of December have been circulated and venues will be confirmed.	Closed

**MEMBER OF THE MUCKAMORE DEPARTMENTAL ASSURANCE GROUP
(MDAG)**

DECLARATION OF PREVIOUS or CURRENT INVOLVEMENT AT MUCKAMORE

1. The Department of Health is committed to protecting the integrity of the work of the Muckamore Departmental Assurance Group (MDAG) and protecting those involved by ensuring that, where a conflict of interest exists, it is formally recorded.
2. Each member of the Group must read and sign the declaration below declaring, if applicable, any previous or current involvement with Muckamore which may be seen as a potential conflict of interest. The form should then be provided in hard copy or scanned and emailed to sean.scullion@health-ni.gov.uk. The signed declaration will be retained on the Department of Health's electronic document management system.

Have you or your immediate family, any business, financial, membership or other professional involvement or personal connection which might be perceived to be seen as in conflict with your role as a member of the Muckamore Departmental Assurance Group?

YES/NO

Please delete as appropriate

If you answered **yes**, please provide details below:

If I become aware of any such conflict or potential conflict of interest in respect of my role as a member of MDAG, I will disclose them immediately to the Department of Health.

Signed: _____

Printed:_____

Date: _____

The MDAG Secretariat shall maintain a record of all declarations of conflicts of interest and shall keep the MDAG co-Chairs informed of such declarations. A declaration of a conflict of interest does not necessarily mean that you cannot commence work with or continue your involvement in MDAG but in order to ensure transparency it's important that it is recorded.

If any conflict of interest should arise during the lifetime of MDAG, you are obliged to bring this to the attention of the MDAG Secretariat.

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 18 December 2019****Boardroom, Muckamore Abbey Hospital****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Chair)	Charlotte McArdle	DoH
Mark Lee	DoH	Marie Roulston	HSCB
Máire Redmond	DoH	Brenda Aaroy	Belfast Trust
Sean Scullion	DoH (Note)	Don Bradley	South Eastern Trust
Aine Morrison	DoH	Eileen McEnaney	Strengthening the Commitment collaborative
Ian McMaster	DoH	Dawn Jones	Family rep
Siobhan Rogan	DoH	Bernie Owens	Belfast Trust
Brigene McNeilly	Family representative	Barney McNeaney	Southern Trust
Margaret Kelly	Mencap	Brenda Creaney	Belfast Trust
Marie Heaney	Belfast Trust	Stephen Matthews	Cedar Foundation
Francis Rice	External Nursing expert	Rodney Morton	DoH
Karen O'Brien (by t/conference)	Western Trust	Briege Quinn	PHA
Margaret O'Kane (by t/conference)	South Eastern Trust		
Oscar Donnelly	Northern Trust		
Petra Corr	Northern Ireland British Psychological Society		
Gavin Davidson	QUB		
Lourda Geoghan	RQIA (observer)		

Agenda Item 1 - Welcome/Introductions/Apologies

1. The Chair welcomed attendees and noted apologies received for the meeting. He advised members that there was a reduced attendance at the meeting as a result of the involvement of a number of Group members in the Health and Social Care emergency planning arrangements which were operating in relation to ongoing industrial action.

Agenda Item 2 - Minutes of Previous Meeting/Update on actions

2. The minutes of the previous MDAG meeting on 27 November were agreed.
3. Seán Holland provided an update on the action points arising from the previous meeting. A summary of these is attached at **Annex A**.
4. Members welcomed the offer relatives had extended at the previous meeting to provide additional support on Christmas Day, and in support of this families had queried whether there was any scope to open the day care facilities on site on Christmas Day. The Belfast Trust representatives agreed to explore this.

AP1: Consider options to provide access for relatives to hospital facilities on Christmas Day (BHSCT)

5. Members discussed the arrangements to brief families on the contents of the historic Ennis Adult Safeguarding investigation, and agreed that briefing should be offered in the first instance to the families of the patients who were in Ennis Ward at the time of the investigation.
6. The Group noted that there had been a number of historic investigations carried out into allegations and complaints made at different times about services at the hospital, and agreed the importance of identifying any recurring themes emerging from these. Members agreed that the Leadership and Governance Review should consider how learning from any relevant historic safeguarding investigations was disseminated, and the Terms of Reference for the Review should be reviewed to ensure they fully reflect this.

Agenda item 3 - Update on meeting with families on 2 December

7. Mark Lee provided a summary of the issues that had been raised at the Friends of Muckamore Support Group meeting held on Monday 2 December. Issues raised included engagement with families on resettlement plans for their relatives, the provision of advocacy support for families and the central role of outreach services in supporting community placements.

8. The Chair reiterated his previous commitments to continue Departmental attendance at Support Group meetings for as long as families considered it helpful, and also suggested that for future meetings families might wish to consider in advance whether there were any specific issues they would find it useful to be briefed on.

Agenda Item 4 – Update on MAH staffing position

9. Francis Rice updated members on the staffing position at the hospital, and advised that the majority of services provided at the hospital had obtained a derogation from the current industrial action, which was welcomed by the Group.
10. He also updated the Group on the current vacancy position at the hospital, with 71.4 whole time equivalent vacancies, and a further 40 staff currently placed on precautionary suspension. Uptake of the initiative to attract additional nursing staff to work at the hospital had not been as successful as hoped, with four staff from other Trusts availing of this to date; a further three individuals had expressed an interest. Members discussed possible options to maximise uptake of the initiative among the potential pool of applicants, including promotion of the positive findings from the most recent RQIA inspection of the hospital.
11. In response to a query from a family representative, Francis confirmed that he expected safe staffing levels to be maintained over the Christmas and New Year holiday period.

Agenda Item 5 – Update on Regional Operational Delivery Group/Outcome of Acute Care workshop

12. The Regional Operational Delivery group met on 9 December and is progressing a number of aspects of work in support of the resettlement programme. The next meeting is scheduled for 15 January, and a fuller update will be tabled at the January meeting of MDAG.
13. Máire Redmond reminded MDAG of the context to the Acute Care workshop, which was organised to consider the next steps in implementing the findings of the

independent panel who had carried out the review of acute in-patient services for people with a learning disability. A number of members who had attended the workshop provided a readout of discussions at the event, with key messages emerging around the centrality of multi-disciplinary teams and the importance of addressing workforce issues.

14. The Chair clarified that the review carried out by the independent panel was part of the wider Transformation project to develop a new service model for Adult Learning Disability Services which is due to report next spring, and as such no final decisions have yet been taken on the potential future configuration of services. The new model is being developed on an inclusive co-produced partnership basis with input from all stakeholders and will be subject to a period of public consultation before presentation to any incoming Minister for their consideration.

Agenda Item 6 – MAH Leadership and Governance Review Update

15. Máire Redmond advised members that three appointments had now been agreed to the independent team who will be carrying out the review of Leadership and Governance arrangements at the hospital, and identified these as Marion Reynolds, Maura Devlin and David Bingham. She confirmed that regular meetings with the panel would be scheduled to oversee progress on the review.
16. The Chair requested that pen pictures of the panel members be circulated to MDAG members when the appointments are confirmed, and Máire confirmed that these would be provided along with the Terms of Reference for the review.

AP2: Terms of Reference for Leadership and Governance review and pen pictures of review team to be circulated to MDAG (DoH)

Agenda Item 7 - AOB

17. The Chair advised members that RQIA had carried out a follow-up unannounced inspection of the hospital commencing on 10th December and invited Lourda Geoghan to update the Group on the findings from this.

18. Lourda Geoghan advised members that the inspection had taken place to review progress towards addressing the issues identified in the three Failure to Comply notices issued by RQIA in August, following 2 unannounced inspections at the hospital carried out earlier in the year. Overall, the findings from the inspection were positive, with inspectors reporting that significant improvements have been made since the previous inspection in April.
19. Lourda extended thanks on behalf of the inspection team to staff on site, who she reported had been welcoming and open during the inspection. She advised that a detailed feedback session on the inspection findings had been held with hospital staff, and a full inspection report would be prepared by RQIA in due course. Of the three failure to comply notices, the staffing notice would be lifted in full with immediate effect, with the safeguarding and financial governance notices expected to be lifted in due course, subject to provision of satisfactory auditable evidence of embedded and sustained improvement in relation to a number of aspects of the notices.
20. The Group welcomed the inspection findings, and acknowledged the work that had been carried out by hospital staff to deliver the required improvements to services. The Chair extended his thanks to both RQIA and Belfast Trust staff for their contribution to delivering these. Members considered it was important that this positive development be communicated more widely, and agreed that possible options for this should be explored. Lourda Geoghan offered to deliver a presentation on the inspection findings to the Friends of Muckamore support group.

AP3: Consider options for positive media piece to communicate RQIA follow-up inspection findings (DoH)

21. Members were also given an update on the recent good practice visit by a group of Departmental and Belfast Trust staff to East London Foundation Trust, which was arranged to reciprocate the 'critical friend' visit by a team from East London to Muckamore in the summer.

22. The Group acknowledged the importance of developing learning partnerships with other providers in delivering service improvements, and agreed that the Belfast Trust and the Health and Social Care Board should work together to disseminate the learning emerging from the partnership with East London regionally across all HSC Trusts. It was also agreed that the Patient and Client Council should be asked to develop options to involve families and carers in this work.

AP4: Develop proposals to disseminate regionally good practice learning emerging from Belfast Trust's partnership with East London Foundation Trust (HSCB/BHSCT/PCC)

Agenda Item 8 - Date of next meeting

23. The Chair acknowledged the work of MDAG to date, and advised that the next meeting will be held on 23 January.

Summary of Action Points

Ref.	Action	Respon-sible	Update	Open/closed
18/12/AP1	Consider options to provide access for relatives to hospital facilities on Christmas Day.	BHSCT		
18/12/AP2	Terms of Reference for Leadership and Governance review and pen pictures of review team to be circulated to MDAG	DoH		
18/12/AP3	Consider options for positive media piece to communicate RQIA follow-up inspection findings/	DoH		

18/12/AP4	Develop proposals to disseminate regionally good practice learning emerging from Belfast Trust's partnership with East London Foundation Trust.	BHSCT/ HSCB /PCC		
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ANNEX A**Update on Action Points from 27 November**

Ref.	Action	Respon- sible	Update	Open/cl osed
27/11/AP1	Circulate communication to families/carers of in-patients advising that Belfast Trust would welcome any additional family support during the forthcoming holiday period	BHSCT	E-mail circulated to relatives by BHSCT on 27 Nov.	Closed
27/11/AP2	Action points from each MDAG meeting to be circulated to members within 24 hours.	DoH	Draft action points circulated 28 Nov.	Ongoing
27/11/AP3	Requests for information raised at MDAG meetings to be responded to in line	DoH	Will be actioned as required	Ongoing

	with relevant information management legislation.			
27/11/AP4	Briefing for relatives on Ennis Report to be arranged.	DoH	BHSCT making arrangements for briefing.	Open
27/11/AP5	Invite Vivian McConvey to join MDAG.	DoH	Invitation letter from joint MDAG Chairs issued 10 Dec.	Closed
27/11/AP6	Belfast Trust to approach PCC to seek support in organising one stop shop event.	BHSCT	BHSCT in discussions with PCC to arrange event.	Open
27/11/AP7	Trust Directors of Social Work to be advised of issues raised by families around resettlement and reminded of the principles underpinning resettlement.	DoH	Sean Holland will raise at next regional meeting of Trust Directors of Social Work scheduled for January.	Open
27/11/AP8	Belfast Trust presentation to RQIA to be circulated to MDAG	BHSCT	Presentation circulated to members on 17 Dec.	Closed
27/11/AP9	Reporting on use of restrictive practices at the hospital to be included in MDAG highlight report and meeting agendas.	DoH	Will be added to highlight report and agenda for future MDAG meetings in New Year	Ongoing
27/11/AP10	Proposals to address barriers to resettlement to be tabled for consideration by MDAG.	BHSCT / HSCB	Will be tabled at MDAG meeting in New Year.	Open
27/11/AP11	Information on numbers of re-admissions to MAH due to community placement breakdown (including those occurring at weekends) to be provided to MDAG	HSCB	Will be tabled at MDAG meeting in New Year.	Open

27/11/AP12	Leadership and Governance review Terms of Reference to be agreed and finalised.	HSCB/ PHA	ToR to be circulated to MDAG members for comments.	Open
27/11/AP13	Declaration of Interests form to be circulated to MDAG members.	DoH	Circulated to members on 13 Dec.	Closed

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Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 19 February 2020****Laburnum Suite, Dunsilly Hotel, Antrim****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Joint Chair)	Eileen McEnaney	Strengthening the Commitment collaborative
Charlotte McArdle	DoH (Joint Chair)	Brigene McNeilly	Family representative
Mark Lee	DoH	Barney McNeaney	Southern Trust
Marie Roulston	HSCB	Bernie Owens	Belfast Trust
Rodney Morton	PHA	Petra Corr	Northern Ireland British Psychological Society
Ian McMaster	DoH		
Siobhan Rogan	DoH		
Dawn Jones	Family rep	Also in attendance	Agenda item 13
Brenda Aaroy	Belfast Trust	David Bingham	Leadership and Governance Review
Máire Redmond	DoH	Katrina McMahon	Leadership and Governance Review
Sean Scullion	DoH (Note)		
Aine Morrison	DoH		
Don Bradley	South Eastern Trust		
Marie Heaney	Belfast Trust		
Brenda Creaney	Belfast Trust		
Karen O'Brien	Western Trust		
Oscar Donnelly	Northern Trust		
John McEntee	Southern Trust		
Margaret Kelly	Mencap		
Stephen Matthews	Cedar Foundation		
Francis Rice	External Nursing expert		
Briege Quinn	PHA		
Vivian McConvey	PCC		
Gavin Davidson	QUB		
Lourda Geoghan	RQIA (observer)		

Agenda Item 1 - Welcome/Introductions/Apologies

1. The joint Chairs welcomed attendees and noted apologies received for the meeting. Members were advised that Vivian McConvey had accepted the invitation to represent the Patient Client Council on the Group, and Vivian was welcomed to her first meeting as a Group member.
2. The Chairs also provided an update on the current number of staff on precautionary suspension at the hospital, including the recent removal from the site of two agency staff following concerns about practice in Erne Ward raised by contemporaneous viewing of CCTV footage.

Agenda Item 2 - Minutes of Previous Meeting

3. The joint Chairs noted that the January meeting had been postponed due to pressures associated with installation of new Minister and Executive. The minutes of the previous MDAG meeting held on 18 December were agreed (Paper MDAG/1/20).

Agenda item 3 – Update on Action Points.

4. Charlotte McArdle provided an update on the action points outstanding from the previous MDAG meetings held on 18 December and 27 November. A summary of the updates is attached at **Annex A**.
5. These included the extended availability of hospital facilities for patients' families over the holiday period, a planned reciprocal visit to Northern Ireland by the East London Foundation Trust in April, an update on arrangements for briefing families of patients involved in the Ennis Ward Adult Safeguarding Report, and feedback from communication with families on the resettlement programme. It was made clear by the Chairs that there has been no change of policy in respect

of resettlement, though the importance was recognised of giving due regard to the views and concerns of families and carers in developing suitable community placement options, which must meet the specific needs of individuals.

6. Members agreed that the Belfast Trust should review their arrangements for communicating with families, and also indicated that it would be helpful for the Group to meet with the team from East London during their planned visit in April.

AP1: Explore scope to improve and expand current communication arrangements with patients' families/carers, including social media channels (BHSCT)

AP2: East London Foundation Trust to be invited to meet with MDAG (BHSCT)

Agenda Item 4 – Update on MAH staffing position

7. Sean Holland advised members that the Minister had recently approved a three-month extension to the incentive scheme established to encourage staff to relocate to work in the hospital, and invited Francis Rice to update members on the current staffing position. Francis advised members there were currently 82 staffing vacancies, and five live applications for vacant posts. He confirmed there had been no further resignations beyond the six advised at the previous MDAG meeting, who were still working notice periods. While welcoming the Minister's decision to extend the incentive scheme, he reported that uptake of this remained disappointing. In relation to the future, he remained concerned about the long term sustainability of services at the hospital, in view of the reliance on use of agency and bank staff and also the current staff vacancy levels.
8. Members discussed options to address the workforce issue, and agreed the importance of a regional approach to this. Brenda Creaney advised members of interest expressed in opportunities at the hospital at a recent recruitment event, and noted that there are 26 Learning Disability Nursing students who are due to graduate this summer. The Group discussed potential options to engage with these students to promote working in Muckamore as a positive career choice, and Charlotte McArdle undertook to explore these further.

AP3: Engage with current cohort of undergraduate LD nurses to promote the hospital as an employer (DoH).

Agenda Item 5 – Update on engagement with families

9. Sean Holland advised members that the January meeting of the Society of Parents and Friends had been postponed due to inclement weather, and that the Permanent Secretary had attended the February meeting. He also noted that a one stop shop event had been held in Antrim Civic Centre, which had provided a useful opportunity to engage with families on resettlement issues. He reiterated the Department's commitment to engagement with families for as long as this was considered to be helpful, and advised members that the Minister had also met with families on two occasions recently. Seán stressed the need for more channels of communication with families.
10. Vivian McConvey noted that there are a number of groups and advocacy organisations working to support families, and that the PCC is trying to understand each of these groups and bring them together. She further advised that the PCC was taking forward the development of an engagement strategy.
11. Members considered it was important that patients should also be given the opportunity to contribute their views, and it was agreed that the Belfast Trust would carry out an evaluation and critical analysis of current engagement arrangements with MAH patients, and present the findings from this to MDAG.

AP4: Carry out an evaluation and critical analysis of current engagement arrangements with MAH patients, and present findings to April MDAG meeting (BHSCT).

Agenda Item 6 – Contingency Planning

12. Sean Holland reiterated to the Group the importance of this work, and also of an appropriate regional approach to delivering on this. Marie Roulston advised that work was continuing to develop a regional contingency plan.

Agenda Item 7 – Highlight Report and Dashboard

13. Mark Lee provided a summary of the current highlight report (Paper MDAG/2/20), including updates on progress with resettlement, use of seclusion, the Learning Disability Service Model Transformation project, the Acute Services Review and the Leadership and Governance review.
14. Sean Holland welcomed the report, and highlighted the importance of effective arrangements to monitor the work of MDAG.

Agenda Item 8 – Report on use of restrictive practices

15. Brenda Creaney provided the Group with an overview of the Belfast Trust report on the safety metrics at the hospital. Charlotte McArdle acknowledged the progress that has been made in reducing rates of seclusion and physical interventions. A number of contributing factors to this were noted, including enhanced staff training, increased use of reflective practice, a reduction in patient numbers, improved communication between the hospital and outside providers reinforced by outreach arrangements for hospital staff and increased use of a multi-disciplinary team approach to delivering care and treatment.
16. Stephen Matthews noted that an appropriately skilled workforce is a key factor in determining the success of community placements, and that this should be reflected accordingly in workforce planning.

Agenda Item 9 – HSC Action Plan update

17. Maire Redmond presented an update on the MAH HSC Action Plan, and sought views from members on the current reporting format. Sean Holland clarified that any proposed changes to the status or timescale of individual actions within the plan should be formally raised with the Department to facilitate presentation to MDAG for consideration. It was agreed that progress reports in respect of a number of individual actions in the plan would be commissioned.

AP5: Updates on status of individual Action Plan targets to be commissioned (DoH).

Agenda Item 10 – Update on Regional Operational Delivery Group

18. Marie Roulston advised members that the February meeting of the Operational Delivery Group had been organised as a workshop and had involved Trust Directors of Mental Health and Learning Disability. The Group had agreed to revisit existing Trust resettlement plans with a view to amalgamating these into a single regional plan. The workshop had also considered supported living facilities and barriers to resettlement.

Agenda Item 11 – Update on Acute Care Review

19. Marie Roulston advised members that a number of clinicians had been identified to progress work to implement the Review's findings, and the Terms of Reference for this was currently being developed.

Agenda Item 12 – Proposals to address barriers to resettlement

20. Marie Heaney gave a presentation to the Group on work carried out by the Belfast Trust to identify and address barriers to resettlement, and members discussed the lessons emerging from this. Issues raised included potential for regional application of the findings, guidance for front-line staff, involvement of independent providers, links to the LD Service Model project work, the role of Supporting People and also the existing structures established to oversee the resettlement programme. It was agreed that the Department and the Health and Social Care Board should jointly review the effectiveness of the regional resettlement process and structures, with a view to making recommendations for improvement.

AP6: Review effectiveness of regional resettlement process and structures and make recommendations for improvement (DoH/HSCB)**Agenda Item 13 – Briefing from the Leadership and Governance Review Independent Panel**

21. David Bingham, Chair of the Independent Panel carrying out the Leadership and Governance Review joined the meeting to brief the Group on the Panel and their planned programme of work. He provided an overview of the methodology the panel intend to use in carrying out the review, and clarified that the panel's review would include consideration of any historic safeguarding investigations which had been carried out within the time period defined in the Terms of Reference for the review. He also advised that the panel intended to engage with families and patients. It was agreed that regular progress updates on the panel's work will be provided to MDAG.

Agenda Item 14 – Any other business

22. Charlotte McArdle suggested it would be useful for MDAG to be updated on progress made by the hospital on delivering the improvements set out in the Quality Improvement Plan developed to address the findings in recent RQIA inspection reports. Lourda Geoghan agreed to update members on this at the next MDAG meeting.

AP7: Update to be provided on implementation of RQIA Improvement Plan for Muckamore. (RQIA)

23. Gavin Davidson advised members that a symposium had been arranged for 28 February on the findings of a study commissioned from QUB by RQIA on the use of CCTV in care home settings, and extended an invitation to any members who wished to attend.

AP8: Issue reminder to MDAG on an RQIA Symposium - The Effectiveness of the Use of CCTV in Care Home Settings on 28th February in QUB (DoH)

Summary of Action Points

Ref.	Action	Respon -sible	Update	Open/ closed
19/2/AP1	Explore scope to improve and expand current communication arrangements with patients' families/carers, including social media channels.	BHSCT		
19/2/AP2	East London Foundation Trust to be invited to meet with MDAG.	BHSCT		
19/2/AP3	Engage with current cohort of undergraduate LD nurses to promote the hospital as an employer.	DoH		
19/2/AP4	Carry out an evaluation and critical analysis of current engagement arrangements with MAH patients, and present findings to April MDAG meeting.	BHSCT		
19/2/AP5	Updates on status of individual Action Plan targets to be commissioned.	DoH		
19/2/AP6	Review effectiveness of regional resettlement process and structures and make recommendations for improvement.	DoH/ HSCB		
19/2/AP7	Update to be provided on implementation of RQIA	RQIA		

	Improvement Plan for Muckamore.			
19/2/AP8	Issue reminder to MDAG on an RQIA Symposium - The Effectiveness of the Use of CCTV in Care Home Settings on 28 th February in QUB	DoH		

ANNEX A**Update on Action Points from 18 December**

Ref.	Action	Respon -sible	Update	Open/ closed
18/12/AP1	Consider options to provide access for relatives to hospital facilities on Christmas Day.	BHSCT	BHSCT advised relevant facilities were open and offer extended to families	Closed
18/12/AP2	Terms of Reference for Leadership and Governance review and pen pictures of review team to be circulated to MDAG	DoH	Circulated 14 February.	Closed
18/12/AP3	Consider options for positive media piece to communicate RQIA follow-up inspection findings/	DoH	Media reports ran on 20 December.	Closed
18/12/AP4	Develop proposals to disseminate regionally good practice learning emerging from Belfast Trust's partnership with East London Foundation Trust.	BHSCT/ HSCB /PCC	Further ELFT visit being arranged for April – to include invite to meet with MDAG.	Open

Update on Action Points from 27 November

Ref.	Action	Respon -sible	Update	Open/cl osed
27/11/AP1	Circulate communication to families/carers of in-patients advising that Belfast Trust would welcome any additional family support during the forthcoming holiday period	BHSCT	E-mail circulated to relatives by BHSCT on 27 Nov.	Closed
27/11/AP2	Action points from each MDAG meeting to be circulated to members within 24 hours.	DoH	Draft action points circulated 28 Nov.	Ongoing
27/11/AP3	Requests for information raised at MDAG meetings to be responded to in line with relevant information management legislation.	DoH	Will be actioned as required	Ongoing
27/11/AP4	Briefing for relatives on Ennis Report to be arranged.	DoH	BHSCT contacting families involved – to be completed by end February	Open
27/11/AP5	Invite Vivian McConvey to join MDAG.	DoH	Invitation letter from joint MDAG Chairs issued 10 Dec.	Closed
27/11/AP6	Belfast Trust to approach PCC to seek support in organising one stop shop event.	BHSCT	BHSCT in discussions with PCC to arrange event.	Closed
27/11/AP7	Trust Directors of Social Work to be advised of issues raised by families around resettlement and	DoH	Letter from SH issued to Trust Ch Exes on 24 January and also	Closed

	reminded of the principles underpinning resettlement.		shared with families.	
27/11/AP8	Belfast Trust presentation to RQIA to be circulated to MDAG	BHSCT	Presentation circulated to members on 17 Dec.	Closed
27/11/AP9	Reporting on use of restrictive practices at the hospital to be included in MDAG highlight report and meeting agendas.	DoH	Report provided under agenda item 6 at 19 Feb meeting	Ongoing
27/11/AP10	Proposals to address barriers to resettlement to be tabled for consideration by MDAG.	BHSCT / HSCB	Presentation made to MDAG meeting on 19 Feb –agenda item 12	Closed
27/11/AP11	Information on numbers of re-admissions to MAH due to community placement breakdown (including those occurring at weekends) to be provided to MDAG	HSCB	Will be tabled at MDAG meeting in New Year.	Open
27/11/AP12	Leadership and Governance review Terms of Reference to be agreed and finalised.	HSCB/ PHA	ToR circulated to MDAG members on 14 Feb and signed off at meeting on 19 February.	Closed
27/11/AP13	Declaration of Interests form to be circulated to MDAG members.	DoH	Circulated to members on 13 Dec.	Closed

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 24 June 2020****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Joint Chair)	Mark Lee	DoH
Charlotte McArdle	DoH (Joint Chair)	Marie Roulston	HSCB
Maire Redmond	DoH	Oscar Donnelly	Northern Trust
Ian McMaster	DoH	Briege Quinn	PHA
Aine Morrison	DoH	Bernie Owens	Belfast Trust
Siobhan Rogan	DoH	Vivian McConvey	PCC
Sean Scullion	DoH (Note)	Stephen Matthews	Cedar
Valerie McConnell	HSCB		
Lorna Conn	HSCB		
Dawn Jones	Family representative		
Brigene McNeilly	Family representative		
Eileen McEnaney	Strengthening the Commitment collaborative		
Margaret O'Kane	South Eastern Trust		
Gillian Traub	Belfast Trust		
Brenda Creaney	Belfast Trust		
Karen O'Brien	Western Trust		
Pauline Cummings	Northern Trust		
Barney McNeaney	Southern Trust		
Margaret Kelly	Mencap		
Petra Corr	NI British Psychological Society		
Gavin Davidson	QUB		
Emer Hopkins	RQIA (observer)		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Sean Holland welcomed attendees and noted apologies received. He advised he would chair the first part of the meeting, and Charlotte McArdle would join the meeting to take over the Chair role for the second part. He noted that meetings of the Group had been paused since February due to the Covid-19 pandemic, and welcomed a number of new members to the Group. Members noted that the meeting was being held by video-conference in light of the

continuing Government guidance on social distancing, and this arrangement would be kept under review for future meetings.

Agenda Item 2 - Minutes of Previous Meeting

2. The minutes of the previous meeting held on 19 February meeting were agreed by members.

Agenda Item 3 – Update on Action Points.

3. The Chair updated members on the actions arising from previous meetings. These included sharing feedback from the Belfast Trust's engagement with the East London Foundation Trust and the possibility of a further visit from the East London Trust, work to encourage the current cohort of undergraduate Learning Disability nurses to consider working in the hospital, arrangements to brief families on the Ennis Report, resettlement performance and also highlighted a number of the workstreams overseen by MDAG which had been impacted by the challenges of dealing with Covid-19. A number of further action points were agreed.

AP1: Following on from 19/2/AP2, consider arrangements for reciprocal visit from East London Foundation Trust (BHSCT)

AP2: Following on from 19/2/AP6, commission review of effectiveness of regional resettlement process and structures (DoH)

AP3: Circulate copy of report on CCTV in Care Home settings to MDAG members (DoH)

Agenda Item 4 – Covid-19 impact and recovery proposals

4. The Chair outlined the impact on services of dealing with the Covid-19 pandemic, and updated members on recovery proposals for the Health and Social Care system, including the establishment of a Management Board to oversee this work. He advised that dealing with the pandemic had presented

unique and unprecedented challenges to health and social care services, and was likely to continue to place additional demands on mental and physical health services, and learning disability services. The requirement for increased infection prevention measures in the future will also likely impact on service capacity. The Chair noted however that mortality rates in Northern Ireland from Covid 19 for people with a learning disability had been significantly lower than those in other jurisdictions.

5. The Group was also updated by the HSCB representatives on the ongoing work to resume business as usual, including short break and respite services, with Trusts aiming to restart these services in July.
6. The Chair highlighted the importance of specialist service provision for adults with a learning disability who require acute mental health treatment, and the HSCB advised they were working to improve services for these patients.

Agenda Item 5 – Update on MAH staffing position

7. Members were given an update from Belfast Trust representatives on the current staffing position in the hospital. They were advised that 40% of the current nursing workforce are long term agency staff. An active recruitment campaign is continuing and the Trust were recently successful in recruiting 8 Band 5 registrants, as well as 5 newly registered staff. To date the Trust have placed 59 staff on precautionary suspension as a result of the ongoing investigations, 39 of whom are currently employed in the hospital. In addition, the Trust have placed 47 staff on supervision. 15 of these staff are no longer working in the hospital, and the Trust are liaising with the current employers of these staff to ensure they are aware of their supervisory arrangements. The Trust also recently appointed 2 senior nursing advisers who are due to take up their posts in July.
8. Family representatives expressed concerns that staff involved in incidents of alleged abuse may still be working with patients. Trust staff advised that a number of measures were in place to mitigate this, such as for example, contemporaneous viewing of CCTV footage, which it was noted had identified a

potential safeguarding incident recently. Members also noted the important contribution of effective multi-disciplinary team working in preventing safeguarding incidents.

9. Family representatives expressed their appreciation to the hospital team for how services were managed through the demands placed on services by the Covid-19, noting the low infection rate in the hospital and that the Trust had implemented their contingency plan to manage the Covid 19 outbreak declared in April when a number of patients and staff had tested positive for the virus. The outbreak was declared to be over on 12 May, and MDAG members expressed their appreciation to the hospital team for their work to successfully contain the outbreak.

Agenda Item 6 – Update on engagement with families

10. The Belfast Trust advised that work in partnership with the Patient Client Council to carry out an evaluation and critical analysis of engagement arrangements with MAH patients had been delayed due to the Covid-19 arrangements. The Chair noted this and asked that an update be brought to the next meeting of MDAG.

AP4: Findings of evaluation of engagement arrangements to be brought to September MDAG meeting (BHSCT)

Agenda Item 7 – Muckamore Abbey Hospital Regional Contingency Planning

11. The Chair reminded members that the Department had written to the Health and Social Care Board in January to commission the development of a regional contingency for the current in-patient population, and invited HSCB representatives to provide an update.
12. Valerie McConnell advised that contingency plans had been developed in response to Covid-19 and that these would be helpful in informing a regional contingency plan for the hospital. She agreed to bring forward proposals at the next MDAG meeting.

AP5: Regional contingency proposals for the hospital population to be brought to September MDAG meeting (HSCB)

Agenda Item 8 – Highlight report and dashboard

13. The Chair referred members to paper MDAG/07/20. Sean Scullion provided a summary of key points from the highlight report, including updates on the Adult Safeguarding and PSNI investigations, progress with resettlement, the hospital's Covid 19 contingency plan, the Learning Disability Service Model Transformation project, the Acute Services Review and the Leadership and Governance review. A number of workstreams have been delayed due to the Covid 19 pandemic and members were given updates on the revised timescales for these.

Agenda Item 9 – HSC Action Plan update

14. The Chair referred members to paper MDAG/08/20, and Maire Redmond updated the Group on the status of individual actions, with 11 rated red, 24 amber and 8 green. The Chair noted that the timescales for a number of targets had slipped, and emphasised that the programme of work set out in the Action Plan remained a priority. Members agreed that an analysis of the current position, including revised timescales, be brought to the next MDAG meeting for consideration.

AP6: An analysis of the current action plan, including revised timescales, to be brought to September MDAG meeting (DoH)

Agenda Item 10 – Position Updates

15. The Chair invited updates on a number of workstreams. Valerie McConnell updated members on the current position with the Learning Disability Service Model project, and also advised that the Regional Learning Disability Operational Delivery Group would reconvene shortly. Brigene McNeilly queried the level of carer/family involvement in the development of the model, and

Valerie agreed to circulate details of family and carer involvement in the project to date.

AP7: Details of carer and family involvement in the development of the Learning Disability Service Model to be circulated to MDAG members (HSCB)

16. Margaret Kelly queried whether the proposed model would be subject to public consultation once developed. The Chair advised that consideration would be given to the level of public consultation required.
17. Valerie also advised that work on the implementation of the Acute Care Review findings which had been paused as a result of Covid-19 was shortly to recommence.
18. Maire Redmond updated members on the Leadership and Governance review, and advised that the panel now expected to deliver their report by the end of July. Dawn Jones asked about the next steps when the review is complete, and the Chair advised the Minister was keen to hear the review's findings with a view to identifying any learning and required improvements to services.

Agenda Item 11 – RQIA Improvement Plan for Muckamore update

19. Emer Hopkins provided an update on the methodology employed by RQIA in developing an improvement plan for the hospital following the unannounced inspections last year, and how RQIA monitored the plan to ensure the required improvements were introduced. The Group welcomed the progress made by the hospital team in addressing the areas for improvement RQIA had identified through their inspections, and noted that the improvement notices had now been lifted.
20. The family representatives noted and welcomed the reduction in the use of seclusion as a behavioural management tool, and considered the aim should be to work towards no seclusion. The Chair agreed that use of seclusion should be minimised with a view to ending its use.

21. The family representatives also asked about plans to resume normal visiting arrangements for patients, and the Chair advised that Departmental guidance on visiting was currently under review, with the aim of updating this by the end of June.

Agenda Item 12 – Any other business

22. The Chair recorded the Group's appreciation of the contribution made to the work of MDAG on behalf of carers by Brenda Aaroy who has left her post in Belfast Trust, and members also agreed that a new carers' representative be invited to join the Group.

Agenda Item 13 – Date of next meeting

23. A proposed date of 26 August was suggested for the next meeting, though this was subsequently amended to Wednesday 2 September.

Summary of Action Points

Ref.	Action	Respon -sible	Update	Open/ closed
24/6/AP1	Following on from 19/2/AP2, consider arrangements for reciprocal visit from East London Foundation Trust	BHSCT		Open
24/6/AP2	Following on from 19/2/AP6, commission review of effectiveness of regional resettlement process and structures	DoH		Open
24/6/AP3	Circulate copy of report on CCTV in Care Home settings to MDAG members	DoH		Open
24/6/AP4	Findings of evaluation of engagement arrangements to be brought to September MDAG meeting	BHSCT		Open
24/6/AP5	Regional contingency proposals for the hospital population to be brought to September MDAG meeting	HSCB		Open
24/6/AP6	An analysis of the current action plan, including revised timescales, to be brought to September MDAG meeting	DoH		Open
24/6/AP7	Details of carer and family involvement in the development of the Learning Disability Service Model to be circulated to MDAG members	HSCB		Open

ANNEX A

Update on Action Points from 19 February

Ref.	Action	Respon -sible	Update	Open/ closed
19/2/AP1	Explore scope to improve and expand current communication arrangements with patients' families/carers, including social media channels.	BHCST	<p>The interim senior management team in MAH have already explored and expanded communication arrangements with patients' families/carers. These measures include:</p> <p>Full SMT attendance at BHCST Carer's Forum.</p> <p>Discussion at Carer's Forum about how best to expand contribution/attendance of families at the meeting.</p> <p>All families/carers written to and offered 1:1 meeting with SMT. Unfortunately no responses were received.</p> <p>Full SMT participation in</p>	Open

		<p>recent event at the Antrim Civic Centre</p> <p>Full engagement with the Patient Client Council (PCC), and all our Advocacy Organisations.</p> <p>The PCC have employed a new advocate, Ms Sharon Magorian, for a period of 4-6 months for Muckamore Abbey Hospital. The Trust will be writing out to families of our patients to introduce Sharon and to encourage families to meet with her. She will provide the SMT with feedback. PCC has indicated that they will be offering home visits to families, as part of their engagement work and they will evaluate if there are any other ways that we should be using to communicate with families.</p> <p>MDAG Highlights and other relevant information shared with families/carers via mailshot.</p> <p>SMT attended a meeting of the</p>
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			<p>Society of Parents and Friends of Muckamore</p> <p>SMT have also met with Billy Moore and Brigene McNeilly and will continue to do so regularly.</p> <p>Production of bi-monthly Muckamore Abbey Hospital Newsletter.</p> <p>Distribution of Muckamore Parents & Friends meeting invitations by post to families</p> <p>The March newsletter will be issued to families and staff week beginning March 16th</p> <p>The team will discuss the potential use of social media at the next BHSCT Carer's Forum.</p>	
19/2/AP2	East London Foundation Trust to be invited to meet with MDAG.	BHSCT	See 24/6/AP1	Closed
19/2/AP3	Engage with current cohort of undergraduate LD nurses to promote the hospital as an employer.	DoH	Work is progressing by nursing group to take this forward	Open
19/2/AP4	Carry out an evaluation and critical analysis of current engagement arrangements with MAH patients, and present	BHSCT	See 24/6/AP4	Closed

	findings to April MDAG meeting.			
19/2/AP5	Updates on status of individual Action Plan targets to be commissioned.	DoH	See 24/6/AP6	Closed
19/2/AP6	Review effectiveness of regional resettlement process and structures and make recommendations for improvement.	DoH/ HSCB	See 24/6/AP2	Closed
19/2/AP7	Update to be provided on implementation of RQIA Improvement Plan for Muckamore.	RQIA	Provided at June MDAG	Closed
19/2/AP8	Issue reminder to MDAG on an RQIA Symposium - The Effectiveness of the Use of CCTV in Care Home Settings on 28 th February in QUB	DoH	Issued 21 February	Closed

Update on Action Points from 18 December

Ref.	Action	Respon-sible	Update	Open/closed
18/12/AP1	Consider options to provide access for relatives to hospital facilities on Christmas Day.	BHSCT	BHSCT advised relevant facilities were open and offer extended to families	Closed

18/12/AP2	Terms of Reference for Leadership and Governance review and pen pictures of review team to be circulated to MDAG	DoH	Circulated 14 February.	Closed
18/12/AP3	Consider options for positive media piece to communicate RQIA follow-up inspection findings/	DoH	Media reports ran on 20 December.	Closed
18/12/AP4	Develop proposals to disseminate regionally good practice learning emerging from Belfast Trust's partnership with East London Foundation Trust.	BHSCT/ HSCB /PCC	Further ELFT visit being arranged for April – to include invite to meet with MDAG.	Closed (see 24/6/A P1)

Update on Action Points from 27 November

Ref.	Action	Respon-sible	Update	Open/cl osed
27/11/AP1	Circulate communication to families/carers of in-patients advising that Belfast Trust would welcome any additional family support during the forthcoming holiday period	BHSCT	E-mail circulated to relatives by BHSCT on 27 Nov.	Closed
27/11/AP2	Action points from each MDAG meeting to be circulated to members within 24 hours.	DoH	Draft action points circulated 28 Nov.	Ongoing
27/11/AP3	Requests for information raised at MDAG meetings to be responded to in line	DoH	Will be actioned as required	Ongoing

	with relevant information management legislation.			
27/11/AP4	Briefing for relatives on Ennis Report to be arranged.	DoH	BHSCT contacting families involved – to be completed by end February	Open
27/11/AP5	Invite Vivian McConvey to join MDAG.	DoH	Invitation letter from joint MDAG Chairs issued 10 Dec.	Closed
27/11/AP6	Belfast Trust to approach PCC to seek support in organising one stop shop event.	BHSCT	BHSCT in discussions with PCC to arrange event.	Closed
27/11/AP7	Trust Directors of Social Work to be advised of issues raised by families around resettlement and reminded of the principles underpinning resettlement.	DoH	Letter from SH issued to Trust Ch Exes on 24 January and also shared with families.	Closed
27/11/AP8	Belfast Trust presentation to RQIA to be circulated to MDAG	BHSCT	Presentation circulated to members on 17 Dec.	Closed
27/11/AP9	Reporting on use of restrictive practices at the hospital to be included in MDAG highlight report and meeting agendas.	DoH	Report provided under agenda item 6 at 19 Feb meeting	Ongoing
27/11/AP10	Proposals to address barriers to resettlement to be tabled for consideration by MDAG.	BHSCT / HSCB	Presentation made to MDAG meeting on 19 Feb –agenda item 12	Closed
27/11/AP11	Information on numbers of re-admissions to MAH due to community placement breakdown (including those occurring	HSCB	Will be tabled at MDAG meeting in New Year.	Open

	at weekends) to be provided to MDAG			
27/11/AP12	Leadership and Governance review Terms of Reference to be agreed and finalised.	HSCB/ PHA	ToR circulated to MDAG members on 14 Feb and signed off at meeting on 19 February.	Closed
27/11/AP13	Declaration of Interests form to be circulated to MDAG members.	DoH	Circulated to members on 13 Dec.	Closed

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Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 2 September 2020****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Joint Chair)	Brenda Creaney	Belfast Trust
Charlotte McArdle	DoH (Joint Chair)	Gillian Traub	Belfast Trust
Maire Redmond	DoH	Bernie Owens	Belfast Trust
Mark Lee	DoH	NI British Psychological Society representative	
Ian McMaster	DoH		
Aine Morrison	DoH		
Siobhan Rogan	DoH		
Sean Scullion	DoH (Note)		
Marie Roulston	HSCB		
Briege Quinn	PHA		
Rodney Morton	PHA		
Dawn Jones	Family representative		
Brigene McNeilly	Family representative		
Aidan McCarry	Family representative		
Margaret O'Kane	South Eastern Trust		
Tracy Kennedy	Belfast Trust		
Patricia McKinney	Belfast Trust		
Karen O'Brien	Western Trust		
Petra Corr	Northern Trust		
Barney McNeaney	Southern Trust		
Stephen Matthews	Cedar		
Vivian McConvey	PCC		
Gavin Davidson	QUB		
Tony Stevens	RQIA (observer)		
Lynn Long	RQIA (observer)		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Sean Holland welcomed attendees and noted apologies received. He advised members that the meeting was again being held by video-conference in light of

the continuing Government guidance on social distancing, and this arrangement would be kept under review for future meetings.

2. He advised members that Margaret Kelly had left the Group to take up a new post, and extended his appreciation to her for her contribution to the work of MDAG. A replacement for her on MDAG would be identified as soon as possible.
3. He also advised the Group that David Bingham, the Chair of the independent panel who carried out the Leadership and Governance review into the hospital would join the meeting to brief members on the Review's findings.

Agenda Item 2 - Minutes of Previous Meeting

4. The minutes of the previous meeting held on 24 June were agreed by members, subject to amendment of the wording on two specific points highlighted by members.
5. Sean Holland noted that the summary of the key points from the 24 June meeting which had been circulated to members following the meeting had subsequently been reported on in the media. As there is a risk that some of the information contained in MDAG minutes may have the potential to enable the identification of individual hospital in-patients with attendant implications for their confidentiality, he proposed that in future full MDAG minutes should be produced immediately following meetings and published on the Department's website once agreed by MDAG members. The Group indicated their agreement to this.

Agenda Item 3 – Update on Action Points.

6. Sean Holland provided an update on the open action points arising from previous meetings. He advised that the Belfast Trust will provide an update on their engagement with the East London Foundation Trust at the next scheduled MDAG meeting. He noted that the Department had arranged a meeting with the HSCB to agree the way forward for the resettlement programme, and advised

that members would be provided with an update on this at the next MDAG meeting.

7. He noted the report on the evidence for the effectiveness of CCTV in care homes had been circulated to members and updated members on the Belfast Trust's contact with the relatives of patients involved in the Ennis report. He asked that the Belfast Trust update the group of the listening event planned for families following publication of the Leadership and Governance Review be brought to the next MDAG meeting. He further asked that an update as to progress of the Regional Contingency Plan also be brought to the next meeting.

Agenda Item 5 - Implementation of Leadership and Governance Review recommendations

8. Seán Holland provided a summary of the recommendations from the Review report and members agreed that these are monitored through MDAG by adding to the current HSC action plan.

Agenda Item 6 – Update on MAH staffing position

9. The Chair asked for an update on this agenda item pending David Bingham joining the meeting. Patricia McKinney advised that as of 31st August 2020 there are 30.82 whole time equivalent registered Learning Disability nurses (Band 5-7 inclusive) and 100.08 whole time equivalent Nursing assistant (Band 3) substantive staff in MAH (inclusive of Maternity leave and Sick leave).
10. The Trust have secured a 12 month commitment from the agency who provides the largest number of registrants on site for 50 whole time equivalent registrants, and have worked with the Belfast Trust nurse bank to secure this commitment which will help to maintain and sustain services over the Winter and into next year.
11. Recruitment is continuing with eight band 5 registrant posts offered in recent recruitment exercises. Four staff have started and a further one will start in early September.

12. Patricia also updated members on arrangements instigated by the Nursing and Midwifery Council (NMC) to support the pandemic response which allowed nursing students to opt in to join the workforce in a paid capacity for their final 6 months, whilst still retaining their student status. The Department of Health issued guidance to employers that students who opted in to the paid arrangements should be remunerated at Band 4 (AfC). They were also supported in their learning during this time. The feedback from the students was very positive. It was also clear from feedback from the teams that these students were very valued by them. There were 7 transition students in MAH. Four of the students were subsequently offered posts in the hospital and are included in the numbers above.

Agenda Item 4 – Leadership and Governance Review briefing

13. David Bingham joined the meeting to provide members with a briefing on the report of the Leadership and Governance review. He summarised the methodology the panel used in their review and also the key findings, which were that vulnerable patients and their families were failed by the hospital which operated as a place apart out of the line of sight of the Trust, the Muckamore hospital management team was dysfunctional, the Ennis report was a missed opportunity to identify institutional abuse, Trust governance arrangements were ineffective and advocacy arrangements lacked independence.
14. Sean Holland welcomed the briefing and invited members to raise any questions.
15. Family representatives indicated they had found reading the report to be very distressing and expressed concern that senior Trust staff were not being held to account for the failings identified. They considered that the findings were further evidence that people with learning disabilities were not regarded as a priority by health and social care services. One of the family representatives asked Group members for their views on the report's findings.

16. Sean Holland advised he was ashamed to be associated with what had happened at the hospital, and stressed the need for real changes to address these issues. He noted in particular the findings in relation to shortcomings in adult safeguarding arrangements and also referenced similar findings emerging from reports on Dunmurry Manor.
17. Charlotte McArdle acknowledged the report made difficult reading, and felt the same feelings of shame, devastation and anger described by Sean Holland. Charlotte commented that with hindsight of course things could have been different and committed to learning the lessons and making necessary changes. Charlotte said as a mother and sister it was by luck that she was not standing in the relatives' shoes of people in Muckamore Abbey Hospital. She also stressed the importance of addressing perceptions that people with learning disabilities were viewed as a lower priority for HSC services.
18. Another family representative expressed frustration with difficulties in making contact with senior Trust staff which contributed to a breakdown in trust between families and hospital staff. Concerns were also expressed that incidents were continuing to occur at the hospital, and that families were not being involved in planning for the future direction of the hospital.
19. Sean Holland noted the concerns raised, and indicated he would be willing to discuss these further with family representatives in a separate meeting.

AP1: Meeting to be arranged between Sean Holland, HSCB and MDAG family representatives (Action: DoH).

20. Marie Roulston on behalf of the Health and Social Care Board expressed empathy with families on the content of the report, and advised she had shared with Trust Directors of Social Work to ensure the lessons it contained on working with vulnerable adults were disseminated across all services. She reiterated the commitment of the HSCB to work with the Department and Trusts to ensure all necessary changes were implemented.
21. Rodney Morton acknowledged the report was painful for families and that it indicated nurses had let patients down, and extended an apology for that. He

stressed the importance of independence in delivering effective advocacy, and asked whether the panel had identified any measures which might strengthen this.

22. David Bingham advised that the panel had found that advocacy arrangements in place at the hospital had been directed primarily towards facilitating resettlement, and suggested contracts between the Trust and advocacy organisations be reviewed to ensure conflicts of interest are avoided.
23. Family representatives indicated they had raised this issue repeatedly with the Trust and the HSCB without success, and suggested that each patient should have an independent advocate.
24. Tracy Kennedy advised that the report's content had been shared with all staff on site through a number of briefing sessions, and that all staff had been directed to the full report published on the Department's website. A summary had also been circulated to staff who were not at work. She expressed an apology for past failings at the hospital, and advised that the Trust were working to ensure there would be no recurrence of these across the Trust's Learning Disability services.
25. Sean Holland advised members that the Minister was considering the review's findings, and had signalled his intention to meet again with patient's families. Arrangements for this were being made.
26. The family representatives asked whether a decision had been made on a public inquiry, and Sean Holland advised that the Minister wished to consult further with families on the appropriate form of inquiry.
27. The family representatives asked about arrangements for family and carer involvement in planning decisions and advised that many families and carers had become disillusioned with arrangements to engage with them, pointing to limited family involvement on the Trust Carer's Forum as evidence of this.
28. Vivian McConvey acknowledged the difficulties, and suggested that a one-to-one approach tailored to individual's wishes might help to deliver improved

levels of engagement. She advised she would dedicate a member of the Patient Client Council staff to this work with the aim of working with families to develop a plan for effective advocacy arrangements at the hospital. The family representatives indicated they would be willing to support this approach, and Vivian advised she would implement this through contact with the MDAG family representatives initially.

AP2: Contact MDAG family representatives to agree implementation of plan to improve advocacy arrangements at the hospital (PCC)

- 29. Tracy Kennedy advised the hospital team on site were willing to engage with families and carers in whichever forum was preferred by families and carers.
- 30. Marie Roulston stressed the importance of effective engagement arrangements being in place across all Learning Disability services, including services for children with disabilities, and Siobhan Rogan made the point that any such arrangements must also make provision to facilitate input from patients.
- 31. David Bingham advised that the panel had queried whether the current ownership of Muckamore Abbey Hospital by the Belfast Trust was the optimal arrangement, and also whether the predominantly medical model of services in place at the hospital was the appropriate one in the future.
- 32. Sean Holland thanked David Bingham for his briefing and for the work carried out by the independent panel. He indicated that the remaining items on the meeting agenda would be carried forward for consideration at the next MDAG meeting, which will be held on 28th October.

Summary of Action Points

Ref.	Action	Respon-sible	Update	Open/closed
2/09/AP1	Meeting to be arranged between Sean Holland,	DoH		

	HSCB and MDAG family representatives			
2/09/AP2	Contact MDAG family representatives to agree implementation of plan to improve advocacy arrangements at the hospital	PCC		

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 28 October 2020****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Joint Chair)	Charlotte McArdle	DoH (Joint Chair)
Mark Lee	DoH	Aine Morrison	DoH
Maire Redmond	DoH	Barney McNeaney	Southern Trust
Ian McMaster	DoH	Dawn Jones	Family rep
Siobhan Rogan	DoH	Stephen Matthews	Cedar
Sean Scullion	DoH (Note)	Rodney Morton	PHA
Marie Roulston	HSCB	Brenda Creaney	Belfast Trust
David Petticrew	HSCB		
Briege Quinn	PHA		
Gillian Traub	Belfast Trust		
Brigene McNeilly	Family rep		
Aidan McCarry	Family rep		
Margaret O'Kane	South Eastern Trust		
Karen O'Brien	Western Trust		
Petra Corr	Northern Trust		
Mandy Irvine	NI British Psychological Society		
John McEntee	Southern Trust		
Vivian McConvey	PCC		
Gavin Davidson	QUB		
Lynn Long	RQIA (observer)		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Sean Holland welcomed attendees and noted the apologies received, including one on behalf of the Joint Chair. He welcomed Mandy Irvine to her first meeting of the MDAG as a representative of the NI British Psychological Society.

Agenda Item 2 - Minutes of Previous Meeting

2. The minutes of the previous meeting held on 2 September were agreed by members. Members also agreed they were content for nil responses to

circulation of the draft minutes to be interpreted as consent to publication of the minutes on the Departmental website.

Agenda Item 3 – Update on Action Points.

3. Sean Holland provided an update on the open action points arising from the June and September meetings of the Group. In relation to 02/09/AP1, he advised that he and Maire Roulston had met with the MDAG family representatives on 11th September, and discussed a number of issues, including safeguarding arrangements and communication with families. For 02/09/AP2, Vivian McConvey advised that she had also met with family representatives on the PCC's behalf on a number of occasions, and Belfast Trust representatives had also attended some of these meetings. A common theme emerging from these meetings was the complexity of ongoing work aimed at engaging with and involving families. Gillian Traub advised the Belfast Trust had agreed to develop a communications plan.
4. The Chair noted the importance of ensuring robust arrangements are in place to identify and address any emerging adult safeguarding issues. He also asked that all current ongoing engagement work be mapped and that an easy reference summary guide to this be produced.

AP1: Produce an easy reference guide summarising all strands of ongoing engagement work impacting on Muckamore Abbey Hospital (Action: PCC/Belfast Trust)

5. Referring to 24/06/AP1, the Chair noted that the Belfast Trust will deliver a presentation at the next MDAG meeting on their engagement work with the East London Foundation Trust.
6. In relation to 24/06/AP2, Mark Lee provided an update on work being taken forward by the Department and HSCB to review the effectiveness of current arrangements for resettlement of patients, including proposals to refresh the transitions group and the potential recruitment of an independent Chair. As part of this work, he also highlighted the recent letter from Sean Holland to the

Belfast Trust commissioning proposals for a model of residential care provision on the Muckamore Abbey Hospital site.

7. Sean Holland advised that proposals arising from this work would be brought to MDAG for consideration. He confirmed that the proposed residential care provision on the hospital site would cater for a range of dependency levels, and would offer an alternative option to those patients who have expressed a wish to continue to live on the current site. He indicated any proposed model would be subject to consideration by MDAG and also a wider consultation process, and would align with the wider strategy direction being developed through the Learning Disability Service model work. He also advised this was being developed to address concerns raised by families that a number of specific patients had expressed a wish to remain living on the hospital site.
8. Lynn Long advised RQIA had held some preliminary discussions with the Trust in regard to the regulatory status of the proposed new facility. Sean Holland clarified that his priority was identifying how to deliver the appropriate support for individuals to live independently. He emphasised that the Department was prepared to make any necessary decisions on commissioning or regulation arrangements to deliver an effective outcome.
9. Sean Holland advised members that updates on the remaining open action points (24/06/AP3, 24/06/AP4 and 24/06/AP5) would be covered under agenda items 6 and 10.

Agenda Item 4 – Public Inquiry update

10. Sean Holland reminded members that Minister had made a statement on a Public Inquiry on 8th September, and invited Mark Lee to update the Group on this.
11. Mark Lee advised members that work was underway in the Department to establish the sponsor function for the Inquiry which will be responsible for making the necessary support arrangements, including the recruitment of additional staff, preparing business cases, identifying premises and IT

requirements etc. To maintain impartiality, this function has been located in the Department's Corporate Management Directorate.

12. Arrangements for a process of engagement with families on the Terms of Reference for the Inquiry and the appointment of a Chair were also being taken forward in partnership with the PCC and with assistance from the Belfast Trust.
13. In response to a query from a family representative, it was clarified the involvement of the Trust in this process related solely to identifying contact details for patients who had been admitted to the hospital during the potential time period to be examined by the Inquiry.
14. Vivian McConvey outlined for members plans for the proposed engagement process and the avenues for providing input to this. She advised that the PCC will dedicate a staff member to this work.
15. The Chair advised that there would also be a public call through advertisements in the media for input to the Inquiry, and that the Inquiry would be a standing agenda item at future MDAG meetings.

AP2: Update on the Public Inquiry to be a standing agenda item for MDAG meetings (Action: DoH)

Agenda Item 5 – Update on MAH staffing position and impact of Covid

16. Gillian Traub provided an update on the current nursing staffing position at the hospital, advising that safe staffing levels were currently being maintained. The block booking contract for 50 WTE nursing staff remains in place and is working well. 13 Band 3 staff were recently recruited, and a rolling recruitment programme is ongoing. The 15% pay enhancement is due to end on 31 October, and work to manage expectations around this has been ongoing. This is not expected to have a negative impact on either the morale of existing staff or the continuing recruitment programme.

Agenda Item 6 – Engagement with families

17. Gillian Traub updated members on progress with this work, and advised that following feedback from families the focus of this had moved to an ongoing process of engagement rather than a one-off event. She advised members that planning was underway to hold a series of independently facilitated virtual engagement sessions to be held in November. The Chair asked that an update on these be provided at the next meeting of MDAG.

**AP3: Update on engagement sessions to be provided at next MDAG meeting
(Action: BHSCT)****Agenda item 7 – Future of Muckamore Abbey Hospital**

18. Sean Holland advised members that this agenda item had been included at the request of one of the family representatives.
19. Aidan McCarry clarified that this had been prompted by his concerns about the future arrangements for the care of his brother, currently an in-patient at the hospital. He considered that if any patients were to continue living on site, then it would be important that facilities were modernised appropriately to meet their needs. He confirmed he would be happy for his brother to stay if the appropriate level of support and accommodation was provided on-site.
20. Sean Holland referred to the earlier discussion on work to commission a new model of care involving the development of bespoke accommodation on the site, and stressed that any model of care provision must meet all relevant current standards and good practice guidance.
21. Gillian Traub noted that the work to agree a model of service for LD for NI is an urgent issue, which is inclusive of but not limited to, the form and function of Muckamore Abbey Hospital. There are various discussions – the role of PICU, the proposal for a supported living facility on site, the discussion around assessment and treatment pathways, the number of inpatient beds required – that need to be pulled together and a clarity reached. This is important for those

staff in Muckamore Abbey Hospital to understand what their future may hold, but also for all Trusts to understand what workforce model they should be recruiting into for the future.

22. Members agreed that any proposed new model of care on the hospital site should be in the context of the ongoing work to develop a new regional model for learning disability services, and also that families must be fully involved in decision making on this.

Agenda Item 8 – Highlight report and Dashboard

23. Mark Lee referred members to paper MDAG/13/20, and provided a summary of the key points from the highlight report. He noted that one patient was currently in active treatment, and the other 46 patients were delayed discharges. There are currently no positive Covid-19 patients in the hospital.
24. Lynn Long advised members that RQIA were currently undertaking a 2-day unannounced inspection at the hospital, which had begun on 27th October. She expected that feedback from the findings of this would be made available to the Trust, the Department and families early next week.
25. David Petticrew queried the highlighted delivery date for the Learning Disability Service Model, and Mark Lee confirmed this was the expected date for sign-off of a draft of the Model.
26. Brigene McNeilly raised concerns about the level of family involvement in the work to develop the new Service Model. The Group discussed the methodology that had been used in the development of the Model. Sean Holland advised that the draft model should be accompanied by a report detailing the family and carer involvement used in its development. He also advised that the draft model would be subject to a public consultation process, and asked that a further meeting be arranged involving the PCC and family representatives to allow them to provide feedback on the draft model.

AP4: Meeting with family representatives to be arranged to provide feedback on draft Service Model. (Action: HSCB/PCC)

Agenda Item 9 – HSC Action Plan analysis

27. Maire Redmond referred members to paper MDAG/14/20, which included a progress update on the Action Plan. She drew member's attention in particular to Appendix A which set out proposed revised timescales for those targets whose timescale had slipped, for consideration and approval by MDAG.
28. Sean Holland indicated it would be helpful for MDAG to be asked to consider measures to address those targets where timescales were expected to slip in advance of the expiry of the target date. He also advised it would be helpful to have a simpler mechanism for reporting on progress towards implementation of the Action Plan, which would enable MDAG to more effectively discharge its oversight function. He reminded members of MDAG's responsibility to challenge the system and hold it to account for any failure of delivery.
29. Members acknowledged the complexity and inter-dependencies in the various workstreams currently underway in relation to Learning Disability services, which are reflected in the Action Plan, and the difficulties this presents in monitoring overall progress.

Agenda Item 10 – Regional Contingency Plan

30. Marie Roulston updated members on work to develop a regional contingency plan for the hospital, and advised that a task and finish group chaired by the HSCB had been established to take this forward. A separate group, also chaired by the HSCB, is progressing the recommendations from the acute care review.
31. She suggested it would be helpful to discuss the inter-dependencies involved at the next Mental Health and Learning Disability Improvement Board meeting scheduled for 19 November, and consider how these could best be presented

in the HSC Action Plan. Members agreed with this approach, and asked that an update be provided at the next MDAG meeting.

AP5: HSC Action Plan to be considered at November MHL D Improvement Board, and proposals brought to next MDAG meeting. (Action: HSCB/HSC Trusts)

Agenda Item 11 – Position Updates

32. These updates were covered in discussions on previous agenda items.

Agenda Item 12 – AOB

33. There were no items of other business.

Agenda Item 13 – Date of next meeting

34. It was proposed that the next meeting be scheduled for Wednesday 16th December at 2pm. Members indicated their agreement to this.

Summary of Action Points

Ref.	Action	Respon-sible	Update	Open/closed
28/10/AP1	Produce an easy reference guide summarising all strands of ongoing engagement work impacting on Muckamore Abbey Hospital	PCC/ BHSCT		
28/10/AP2	Update on the Public Inquiry to be added as a standing agenda item for MDAG meetings	DoH		

28/10/AP3	Update on engagement sessions to be provided at next MDAG meeting.	BHSCT		
28/10/AP4	Meeting with family representatives to be arranged to provide feedback on draft Service Model.	HSCB/ PCC		
28/10/AP5	HSC Action Plan to be considered at November MHLD Improvement Board, and proposals brought to next MDAG meeting.	HSCB/ HSC Trusts		

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 16 December 2020****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Joint Chair)	Charlotte McArdle	DoH (Joint Chair)
Mark Lee	DoH	Margaret O'Kane	South Eastern Trust
Maire Redmond	DoH	Barney McNeaney	Southern Trust
Ian McMaster	DoH	Emer Hopkins	RQIA
Siobhan Rogan	DoH		
Aine Morrison	DoH		
Sean Scullion	DoH (Note)		
Marie Roulston	HSCB		
Rodney Morton	PHA		
Briege Quinn	PHA		
Gillian Traub	Belfast Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Aidan McCarry	Family rep		
Teresa McKee	South Eastern Trust		
Karen O'Brien	Western Trust		
Petra Corr	Northern Trust		
Mandy Irvine	NI British Psychological Society		
Stephen Matthews	Cedar		
Vivian McConvey	PCC		
Gavin Davidson	QUB		
Lynn Long	RQIA (observer)		
La'Verne Montgomery (in attendance for agenda item 4)	DoH		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Sean Holland welcomed attendees, and noted the apologies received from Charlotte McArdle, Emer Hopkins, Margaret O'Kane and Barney McNeaney.

Agenda Item 2 - Minutes of Previous Meeting

2. The Chair noted that the minutes of the previous meeting held on 28 October had been published on the Department's website. There were no further comments on the minutes.

Agenda Item 3 – Update on Action Points.

3. Sean Holland provided an update on the open action points arising from previous meetings of the Group. In relation to 28/10/AP1 and the production of an easy reference summary of all ongoing engagement work, he advised members that the Muckamore Abbey Hospital November newsletter included a guide to who's who at the hospital, information on how to raise a concern and how to provide feedback to the hospital team. The next edition of the MAH newsletter will include an overview of all current engagement work.
4. In relation to 28/10/AP2, he advised members that an update on the Public Inquiry had been added as a standing agenda item to the MDAG agenda.
5. For 28/10/AP3, the Chair advised members that virtual engagement sessions had been scheduled for the New Year, with independent facilitation. In addition the Belfast Trust intend to ask families/carers to complete a questionnaire in January 2021 designed to improve the Trust's understanding of families' experience of involvement.
6. The Muckamore Carer's Forum was relaunched on 9 December 2020 and was independently facilitated. Brigene McNeilly provided an update for the Group on this inaugural meeting, which considered issues relating to communication with relatives and also the hospital visiting arrangements over the Christmas holiday period. She advised that the next meeting of the Forum was scheduled for 12 January.
7. Sean Holland advised members that the Belfast Trust was also in the process of recruiting a Personal and Public Involvement Officer for Trust Learning Disability Services, with interviews for this post planned for January. He noted

that a family representative would be included on the interview panel for the post. Brigene McNeilly confirmed she was participating in the panel.

8. Dawn Jones advised that she hadn't attended the first meeting of the Forum due to the narrow range of people involved and queried the point of the Forum. She expressed frustration at a failure to take forward actions that had been previously agreed.
9. Gillian Traub clarified that the Forum aimed to offer families an opportunity to get involved and influence developments on the hospital site. She acknowledged there were challenges around widening the levels of family involvement.
10. Marie Roulston agreed that communicating effectively was fundamental to driving up levels of involvement, and advised that she had met with the Belfast Trust and the Patient Client Council to explore options for improving this. Brigene McNeilly advised that one of the Trust non-Executive Board members had agreed to be involved in the work of the Forum.
11. The Chair noted the frustration expressed by Dawn, and she asked that this be recorded in the meeting minutes.
12. The Chair provided an update on 28/10/AP4 on engagement on the Learning Disability Service Model, noting that a meeting with family representatives was held on 26 November.
13. Marie Roulston advised the Group that the family representatives had welcomed the opportunity to meet, and that the draft model had been circulated to MDAG members in advance of today's meeting, with a view to delivery of a presentation on the Model. Unfortunately pressures on Group members' time due to pandemic related priorities precluded to this being provided at today's meeting, but it was agreed that the presentation would be delivered at the next scheduled MDAG meeting.

AP1: Presentation on the draft Learning Disability Service Model to be delivered at next meeting of MDAG (Action: HSCB/PHA)

14. Family representatives noted that the draft model which runs to 143 pages had been provided to members on the morning of the MDAG meeting, which was insufficient time to consider it adequately, and queried whether hard copies of meeting papers could be provided to members in advance of meetings. They also reiterated previously expressed concerns about the extent of family and carer involvement in the development of the model.
15. Sean Holland noted the views expressed by family representatives, and agreed that papers for future meetings would be issued seven days in advance of scheduled meetings, with hard copies provided to members as required.

AP2: Issue papers (by hard copy as required) to MDAG members no later than seven days in advance of scheduled meetings. (Action: DoH)

16. In relation to 28/10/AP5, the Chair invited Marie Roulston to update members on work to review the MAH HSC Action Plan.
17. Marie Roulston advised the Group that following the Director's meeting in November, an overview report documenting all the current workstreams was being prepared and this would be tabled at the next MDAG meeting. It was intended to draw on this to consider options to streamline the current Action Plan. Sean Holland reminded members it was important that MDAG was able to track progress on the actions set out in the Action Plan.
18. Further to 24/06/AP1, the Chair noted that the Belfast Trust will deliver a presentation at the next MDAG meeting on their engagement work with the East London Foundation Trust.

Agenda Item 4 – Update on Public Inquiry

19. Sean Holland introduced La'Verne Montgomery, the Director of Corporate Management in DoH, who has been asked to sponsor the Public Inquiry to ensure independence.

20. La'Verne thanked members for the invitation to the meeting, and advised that she had had no previous involvement with any issues relating to Muckamore Abbey Hospital. She explained that she had been asked to lead on the sponsorship of the Inquiry, and would be supported in this by Fiona Marshall who was responsible for establishing the Inquiry, including appropriate governance and financial arrangements, and also by Lynne Curran who was the secretary designate for the Inquiry, responsible for supporting the Inquiry Chair in running the Inquiry.
21. She advised she had been working with the Minister to facilitate his engagement with relatives and patients to inform his decision on a Chair for the Inquiry and also the Inquiry Terms of Reference. As part of this, a number of events involving families, facilitated by the Patient Client Council (PCC) and hosted by the Minister, were held last week. She advised that a clear message emerging from families at was that the Inquiry needed to address issues of abuse as current and not to be seen as historical.
22. La'Verne advised that she was working with the PCC to address, through the appropriate channels, any issues of immediate concern raised at the events, and also to prepare a report summarising the views expressed by families and patients, which would be shared with engagement participants for accuracy checking. Engagement with patients and former patients would be progressed in the New Year, with arrangements for this to be finalised.
23. The Minister will draw on the views expressed to inform his decision on an Inquiry Chair, and he will then consult with the Chair to finalise and agree the Terms of Reference for the Inquiry.
24. La'Verne advised members that she was working on an indicative timescale of having the Inquiry established by the summer, and that work was proceeding to meet this timescale.
25. She also advised that she had met with Trust Assistant Directors of Learning Disability, who hold the contact details for families and patients, who had issued letters about the engagement events to families on the Minister's behalf.

26. Brigene McNeilly passed on her thanks to all involved in arranging the engagement event she had attended. Dawn Jones noted that some of the letters from the Minister on the events were not individually addressed, and expressed disappointment at the lack of personal communication.
27. La'Verne indicated she was conscious of this, and had discussed with Assistant Directors how this might be addressed for future communication in this regard.
28. The Chair noted the Inquiry process is likely to be a lengthy one, and thanked La'Verne for her update.

Agenda Item 5 – HSC Action Plan – Exception report

29. The Chair referred members to paper MDAG/16/2020, and invited Sean Scullion to present the update report on the Action Plan.
30. Sean Scullion summarised the content of the paper. Following discussion, the Chair acknowledged the work carried out to date, and asked that further work be taken forward with a view to streamlining the actions in the Plan and reporting arrangements to facilitate MDAG's oversight role on the progress being made towards implementation of the Plan so that members can see clearly what work has been done to implement actions.
31. Marie Roulston agreed to work with Departmental and PHA colleagues to take this work forward in the New Year.

AP3: Progress a review of actions in HSC Action Plan, and bring an update to next MDAG meeting. (Action: DoH/HSCB/PHA)

Agenda Item 6 – Staffing update including impact of Covid 19 and Christmas Cover

32. Gillian Traub updated members on the current staffing situation in the hospital, noting the workforce is currently stable although the level of agency staff

remains high. She advised members plans were in place to maintain safe staffing levels through the Christmas holiday period.

33. Sean Holland recorded the Group's gratitude for the work being done by the Trust to ensure services at the hospital remain safe and stable.
34. Gillian Traub advised that an agency staff member had recently been recruited to a permanent night co-ordinator post. She also informed members that the recent second outbreak of Covid-19 at the hospital had now been closed, and a programme of patient vaccination was due to start in the hospital today.
35. Dawn Jones asked whether there were any plans to include hospital staff in the vaccination programme.
36. The Chair advised that rollout of the vaccination programme is taken forward independently of the hospital, and access to vaccination is determined on the basis of maximum impact.
37. Rodney Morton noted that prioritisation of access to the vaccine is nationally determined, with advice provided on prioritising various staff and population groups. Sean Holland advised that there was some scope for regional variation in the context of this.
38. Rodney Morton also sought assurance that the agency staff employed at the hospital were subject to supervision arrangements in line with those in place for directly employed staff, and Gillian Traub indicated the Trust were working to implement this.

Agenda item 7 – Highlight report and Dashboard

39. Maire Redmond referred members to paper MDAG/17/20, and provided an overview of the key points in the paper. She noted that to date 70 staff were currently on precautionary suspension, and 15 staff had been arrested. Staffing at the hospital was being supplemented by agency staff, and an ongoing contract with a nursing agency was in place to support this. Two patients had

been successfully resettled in the past year, and there are plans in place to resettle a further three patients on the primary target list by March 2021, and a further seven by March 2022.

40. Dawn Jones queried the use of the primary target list terminology, which she considered suggested that the resettlement of a number of patients is being prioritised.
41. Aine Morrison advised the primary target list of patients was established some time ago as part of the Bamford review to facilitate the monitoring of progress on resettlement, and as such was no longer relevant, with no distinctions in place on resettlement priority for the current in-patient population.
42. Sean Holland confirmed to the Group that all current hospital patients are afforded an equal resettlement priority, and that MDAG will monitor progress on resettlement for all patients on this basis.
43. Brigene McNeilly noted that there had been no new admissions to the hospital since 2019, and queried where patients were being admitted.
44. Marie Roulston advised that fortnightly meetings had been convened by the HSCB to review this, and confirmed that the last new admission to the hospital was at Christmas 2019. Analysis showed that some patients had been admitted to psychiatric wards in Trusts, one had been admitted to Lakeview in the Western Trust, while others were being supported in community settings. Work was being taken forward to scope how many in-patient beds were required regionally, and a short-term plan to manage admissions was being developed as a precursor to development of a long-term model.
45. Petra Corr indicated that provision of adequate support in community settings was the ideal scenario, but acknowledged that access to appropriate acute in-patient care was also required. In the meantime other options are explored, including admission to LD in-patient facilities in other Trusts, or alternatively access to Mental Health in-patient beds, though this is not always appropriate.

46. The Chair advised that experience from other regions should be considered in developing solutions, and indicated that learning from East London Foundation Trust would be useful in this regard.

47. Brigene McNeilly noted the long term impact on patients of time spent in psychiatric settings, and Marie Roulston confirmed this had been factored into the work which was underway.

Agenda Item 8 – AOB

48. There were no items of other business.

Agenda Item 9 – Date of next meeting

49. The Chair advised members that the next meeting was scheduled for Wednesday 24 February at 2pm. He also indicated that he would be willing to facilitate separate meetings before that, should individual members consider this was necessary. Any such request should be communicated by members to Maire Redmond in the first instance.

Summary of Action Points

Ref.	Action	Respon -sible	Update	Open/ closed
16/12/AP1	Presentation on the draft Learning Disability Service Model to be delivered at next meeting of MDAG	HSCB/ PHA		
16/12/AP2	Issue papers (by hard copy as required) to MDAG members no later than seven days in advance of scheduled meetings	DoH		
16/12/AP3	Progress a review of actions in HSC Action	DoH/		

	Plan, and bring an update to next MDAG meeting.	HSCB/ PHA		
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Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 24 February 2021****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Joint Chair)	Rodney Morton	PHA
Charlotte McArdle	DoH (Joint Chair)	Brenda Creaney	Belfast Trust
Mark Lee	DoH	Margaret O'Kane	South Eastern Trust
Maire Redmond	DoH	Barney McNeaney	Southern Trust
Ian McMaster	DoH	Stephen Matthews	Cedar
Siobhan Rogan	DoH		
Aine Morrison	DoH		
Sean Scullion	DoH (Note)		
Marie Roulston	HSCB		
Lorna Conn	HSCB		
Brendan Whittle	HSCB		
Emer Hopkins	RQIA (observer)		
Briege Quinn	PHA		
Gillian Traub	Belfast Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Aidan McCarry	Family rep		
Margaret McNally	Family rep		
Lyn Preece	South Eastern Trust		
Karen O'Brien	Western Trust		
Petra Corr	Northern Trust		
John McEntee	Southern Trust		
Mandy Irvine	NI British Psychological Society		
Gavin Davidson	QUB		
Vivian McConvey	PCC		
La'Verne Montgomery (for agenda item 4)	DoH		
Martina McCafferty (for agenda item 7)	HSCB		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Sean Holland welcomed attendees, and noted the apologies received from Rodney Morton, Brenda Creaney, Margaret O'Kane, Barney McNeany and Stephen Matthews. He also welcomed Margaret McNally to her first meeting of the Group, and explained she has joined the Group in her capacity as a relative of a past patient at the hospital. He advised members that this would be Marie Roulston's final meeting and on behalf of members wished her well in her upcoming retirement. He also welcomed her successor, Brendan Whittle, to his first meeting of the Group.

Agenda Item 2 - Minutes of Previous Meeting

2. Charlotte McArdle noted that the draft minutes of the previous meeting held on 16 December were circulated to members on 22 December. No comments were received, and the minutes had therefore been published on the Department's website as an agreed record of the meeting. There were no further comments on the minutes.

Agenda Item 3 – Update on Action Points.

3. Sean Holland provided an update on the open action points arising from previous meetings of the Group. He advised that 16/12/AP1 and 16/12/AP3 would be addressed at agenda items 7 and 8 respectively. He noted that 16/12/AP2 had been actioned, with papers issued to members on 16 February and by hard copy on request. He also advised that in relation to 24/6/AP1, it was intended that a presentation from the Belfast Trust on the East London Foundation Trust visit would be included on the agenda at the next scheduled MDAG meeting in April.

Agenda Item 4 – Update on Public Inquiry

4. Charlotte McArdle welcomed La'Verne Montgomery to the meeting and invited her to update members on the work of the sponsor team taking forward the MAH Public Inquiry.

5. La'Verne expressed her appreciation for the support provided by the PCC in the engagement work that had been carried out to date. She advised the sponsor team had written to families and current and former patients of MAH asking for their e-mail addresses to facilitate future communication with them on the Inquiry, though hard copy letters will still be issued for those who do not wish to receive email communication. A newsletter is planned for issue in the next week to provide interested parties with an update on progress. A report summarising the findings of the engagement work is being prepared by the PCC. It is planned that this will be submitted to the Minister as soon as possible to inform his decision on the appointment of a Chair to the Inquiry, with the proposed timescale of March for this decision to be taken. Once the Minister has made his decision on his preferred candidate for the Inquiry Chair, he will liaise closely with the Chair to develop the Inquiry Terms of Reference.
6. Charlotte McArdle extended thanks to all the families and patients, the PCC and La'Verne's team for their work to date on establishing the Inquiry.

Agenda Item 5 – Advocacy at MAH

7. Charlotte McArdle invited Vivian McConvey to update members on the PCC's work on advocacy arrangements at MAH.
8. Vivian advised members that the PCC had appointed Eleanor Good as a new member of staff to take forward a programme of MAH related advocacy work. She detailed the activity undertaken as part of the engagement process on the Public Inquiry since Christmas, which included press advertisements inviting contributions from current and former patients and their families, 22 in-person interviews with 22 current and past patients, 17 follow-up interviews with families, and advised a report summarising the findings of the engagement work was in preparation.
9. She also advised members of Eleanor's involvement with the MAH Carer's Forum. She had provided advocacy support to the families of three former

Muckamore patients who have had ongoing concerns about a residential care provider. She also provided advocacy support to one former patient in relation to their interactions with mental health services and family intervention teams, and to the mother of a former patient regarding her concerns in relation to access to respite care. She had assisted the mother of a patient who experienced a failed resettlement with a complaint to the ombudsman, and made 5 referrals to the Client Support Service within the PCC to support some families with additional issues regarding provision of current services or to be supported to make relevant complaints. In addition 21 cases had been escalated for Adult Safeguarding investigations.

10. Charlotte McArdle asked whether this activity had been helpful to families. Brigene McNeilly and Aidan McCarry indicated that they were very appreciative of the support Eleanor had provided to families. Gillian Traub also confirmed that the input from the PCC had been helpful for the Belfast Trust, and informed the Group that in line with the recommendation in the Leadership and Governance review, the Trust is finalising a co-produced Terms of Reference for an evaluation of the current advocacy arrangements at the hospital.

Agenda Item 6 – Regional Contingency Plan

11. Sean Holland reminded members of the context for the Plan, which was linked to the ongoing staffing challenges at the hospital and the corresponding need to have contingency arrangements in place. He invited Marie Roulston to update the Group on progress with this.
12. Marie Roulston welcomed Lorna Conn to the meeting in her new role as the Regional Lead for resettlement, and invited her to update the Group on the progress made to develop a regional contingency plan.
13. Lorna advised members that a regional Task and Finish Group was taking this forward, drawing on existing Trust contingency plans, and was meeting monthly to consider solutions. Following their meeting in January, a draft paper had been shared with Trusts, and their feedback was awaited. A workshop event

had been organised for tomorrow (25 February) with clinical and social care leads to consider care pathways and next steps.

14. Petra Corr noted that an important element of the workshop will be ensuring consideration is given to models of provision for patients with a mild learning disability, and in particular the extent to which this cohort of patients can access acute mental health beds. In this context, Sean Holland reminded members that one of the core values in 'Equal Lives' was that mainstream services should be adapted to meet the needs of people with a learning disability.
15. Charlotte McArdle was supportive of this approach, and noted that appropriate provision should be in place within mainstream services to support people with learning disabilities and enhance the service provided to them.
16. Lorna Conn noted the comments, and stressed the importance of retaining a focus on the wider picture. She also noted that the importance of workforce considerations.

Agenda item 7 – Learning Disability Service Model

17. Charlotte McArdle reminded members of the concerns that had been raised by family representatives at previous MDAG meetings about the level of carer involvement in the development of 'We Matter', the Learning Disability Service Model. She noted that a meeting with family representatives on this issue had been held in November, and welcomed Martina McCafferty to the meeting to update MDAG on the draft Service Model.
18. Martina delivered a presentation to members on the Service Model project, setting out the background, details of engagement with service users and carers, a summary of the outcomes and the next steps. She advised the Group that a delivery plan had been developed for the Model, and drew members' attention to the likely funding requirement to realise this. She outlined the proposed reporting arrangements for the Model and also some of the challenges for its implementation.

19. Charlotte McArdle commended the project team for their work in developing the draft model, and welcomed the emphasis on a cross Governmental approach to delivery. She noted that effective outcome measures will be important in measuring the success of the Model, and suggested that the indicators established for the Learning Disability Service Framework may be useful in this regard.
20. Briega Quinn agreed there was an opportunity to align the Service Model delivery arrangements with existing workstreams, and Sean Holland noted that it was important that increasing levels of social well-being also be included as an outcome.
21. Emer Hopkins also welcomed the Model, and asked how the interface with the Mental Health Strategy and Action Plan would be managed. Mark Lee noted the inter connected nature of the mental health and learning disability programmes of care, and advised that the oversight structures in place, including the Mental Health and Learning Disability Improvement Board, reflected this.
22. Sean Holland advised members that the Minister was developing proposals for an Adult Safeguarding Bill which would take account of the views of people with learning disabilities. Brigene McNeilly asked about the plan to engage with families in relation to this. Vivienne McConvey advised that work was underway to engage with interested parties and that she would be happy to consider any requests to engage. She agreed to contact Brigene after the meeting to make the necessary arrangements for this.
23. Charlotte McArdle thanked Martina McCafferty for her presentation.

Agenda Item 8 – HSC Action Plan – Exception Report

24. Sean Holland referred members to paper MDAG/02/2021, and invited Sean Scullion to update the Group. Sean Scullion updated members on the work that had been undertaken with the HSCB and PHA to review the actions in the plan. He advised that the actions had been grouped by a number of proposed

themes, and the completed actions had been moved to a separate section of the plan so that progress made to date in delivery of the plan is clearer. He also provided a summary of the current RAG status of the actions in the plan, and updated members on the position with the actions rated red.

25. Dawn Jones advised she found the restructured plan much easier to interpret and was supportive of the proposed changes. Members noted and agreed the update.

Agenda Item 9 – Highlight Report and Dashboard

26. Charlotte McArdle referred members to paper MDAG/03/2021 and invited Maire Redmond to update members on the Highlight Report. Maire Redmond advised members that in line with the agreement at the December MDAG meeting, the dashboard had been extended to cover all in-patients whose discharge had been delayed, removing the distinction between PTL and other patients. She advised that there were currently 44 in-patients in MAH, one of whom was in active treatment, and there are plans in place to resettle 5 patients this year, a further 21 in 2021/22 and 12 in 2022/23.
27. Brigene McNeilly queried the accuracy of this information which suggests that all patients have a resettlement plan in place whereas her relative did not currently have a plan in place.
28. Gillian Traub acknowledged the importance of quality assuring the information provided to MDAG and indicated that the Trust had different data on the number of resettlements achieved in 2020, compared to the report tabled for the meeting. Lorna Conn advised the information provided to MDAG through the Highlight Report was based on returns from Trusts, and undertook to raise the accuracy of this with Trusts at the next meeting of the Regional Learning Disability Operational Delivery Group on Thursday 25 February.
29. Charlotte McArdle asked that correct figures be circulated to MDAG as soon as these were available, and in advance of the next meeting of the Group. Sean

Holland asked that the vaccination figures in the report also be confirmed as part of this and an update circulated to members.

AP1: Quality assure information on discharge plans and vaccination numbers in Highlight Report, and circulate updated information to MDAG members. (Action DoH/HSCB/Trusts)

30. Maire Redmond advised members there were currently 67 staff on precautionary suspension and there had been 15 arrests as part of the PSNI investigation, with no charges brought to date. A number of staff have been dismissed by the Belfast Trust following disciplinary procedures. She also advised members that Anne O'Reilly had been appointed as a Learning Disability Champion for the Belfast Trust.
31. Gillian Traub updated members on the current nursing staffing position at the hospital, and advised that the Trust were carefully monitoring this. She advised there had been a number of Covid 19 outbreaks at the hospital in the past year which had been challenging, and she noted that there was currently also a number of medical staffing vacancies.
32. Brigene McNeilly referred to the graph on page 6 of the Highlight Report and asked why there had been a recent rise in the number of seclusion events. She raised a number of concerns about the current levels of care being provided at the hospital, in particular the proportion of agency staff employed and their skill mix, which she advised was disproportionately weighted towards mental health registrant staff. She indicated she had identified a range of concerns about the treatment of her relative over the past year which she linked to care being delivered by inappropriately trained staff, and queried whether this was contributing to an increased use of seclusion. She suggested that the Department should consider reviewing the on-site care arrangements at the hospital.
33. Charlotte McArdle advised that weekly reports on nursing staffing are provided to the Department. She also advised members that the aim was to address the current reliance on the use of agency staff at the hospital though this was

proving to be challenging. Mark Lee advised that the Department was aware of a number of recent incidents, and had raised these in discussions with the Trust. Conversations with the Trust and RQIA in relation to these are ongoing, and in this context he indicated it would be helpful if the concerns raised by Brigene could be shared more widely. Brigene indicated she was willing to forward these as required, and reiterated her concern about the care being provided to her relative.

34. Charlotte McArdle agreed an urgent conversation would be initiated with the Trust on receipt of a summary of the concerns raised by Brigene. She suggested these concerns should also be raised with the Divisional Nurse at the hospital.
35. Brigene advised she had already done so, and raised some further concerns about her relative's access to benefits and personal possessions.
36. Charlotte McArdle advised the concerns raised needed to be resolved, and asked Gillian Traub to follow up the issues raised after the meeting.

AP2: Concerns raised by family representative to be followed up with Belfast Trust. (Action: Belfast Trust)

Agenda Item 10 – MDAG Declaration of Interest Register

37. Sean Holland advised members that a Declaration of Interest Register had been established for MDAG, and returns for this had been received from the majority of members. He noted that 8 members had declared a previous involvement with MAH.
38. Maire Redmond advised that the previous involvement declared was mainly in a work related capacity, and indicated that individual declarations could be shared with members of the Group, subject to agreement from the individual members involved. Dawn Jones considered this would be helpful. Maire Redmond clarified that there was no requirement for family representatives on the Group to submit declarations. Sean Holland advised that any members'

deputies who have attended meetings on an occasional basis should also be asked to complete declarations.

AP3: Issue declaration of involvement forms to MDAG deputies, and circulate copies of completed forms to MDAG members. (Action: DoH)

AOB

39. There were no items of other business.

Agenda Item 11 – Date of next meeting

40. The Chair advised members that the next meeting was scheduled for Wednesday 28 April at 2pm.

Summary of Action Points

Ref.	Action	Responsible	Update	Open/closed
24/02/AP1	Quality assure information on discharge plans and vaccination numbers in Highlight Report, and circulate updated information to MDAG members.	DoH/HSCB/Trusts		
24/02/AP2	Concerns raised by family representative to be followed up with Belfast Trust.	Belfast Trust		
24/02/AP3	Issue declaration of involvement forms to MDAG deputies, and circulate copies of completed forms to MDAG members.	DoH		

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 28 April 2021****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Joint Chair)	Rodney Morton	PHA
Charlotte McArdle	DoH (Joint Chair)	Karen O'Brien	Western Trust
Mark Lee	DoH	Stephen Matthews	Cedar
Maire Redmond	DoH	Gavin Davidson	QUB
Ian McMaster	DoH		
Siobhan Rogan	DoH		
Aine Morrison	DoH		
Sean Scullion	DoH (Note)		
Darren McCaw	DoH		
Lorna Conn	HSCB		
Brendan Whittle	HSCB		
Emer Hopkins	RQIA (observer)		
Briege Quinn	PHA		
Deirdre McNamee	PHA		
Gillian Traub	Belfast Trust		
Brenda Creaney	Belfast Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Aidan McCarry	Family rep		
Margaret McNally	Family rep		
Margaret O'Kane	South Eastern Trust		
Petra Corr	Northern Trust		
Maria O'Kane	Southern Trust		
John McEntee	Southern Trust		
Christine McLaughlin	Western Trust		
Mandy Irvine	NI British Psychological Society		
Vivian McConvey	PCC		
La'Verne Montgomery (for agenda item 4)	DoH		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Sean Holland welcomed attendees, and noted the apologies received from Rodney Morton, Stephen Matthews, Karen O'Brien, and Gavin Davidson. He advised members that Barney McNeaney had retired from the Southern Trust and would be replaced on MDAG by Dr Maria O'Kane.

Agenda Item 2 - Minutes of Previous Meeting

2. Sean Holland noted that the draft minutes of the previous meeting held on 24 February were circulated to members on 2 March. Following receipt of a number of comments from members, the draft minutes were amended and published on the Department's website as an agreed record of the meeting. There were no further comments on the minutes.

Agenda Item 3 – Update on Action Points.

3. Sean Holland provided an update on the open action points arising from previous meetings of the Group. He advised that in relation to 24/02/AP1, work had been carried out with the HSCB and the Belfast Trust to address the information quality issues raised by some members, and an updated dashboard had been circulated to members.
4. In respect of 24/02/AP2, Sean Holland asked the Belfast Trust to provide an update on the concerns raised by a family representative. Gillian Traub advised that the Trust had met with the family representatives concerned to discuss the issues they had raised on staffing and adult safeguarding. She noted that an update on staffing will be provided under agenda item 6, and advised that work was continuing to address the issues raised.
5. Sean Holland noted that 24/02/AP3 had been actioned, with copies of relevant declarations circulated to members. It was agreed that declaration of involvement forms would be circulated to any new members on joining MDAG.

**AP1: Declaration of involvement forms to be issued to new MDAG members
(Action: DoH)**

6. Sean Holland further noted that 16/12/AP1 and 16/12/AP2 had been actioned and were now closed. He also advised that the Action Plan update referred to in 16/12/AP3 was included as a separate item on the meeting agenda, and this will be a standing item for future MDAG meetings.
7. Finally, he noted that 24/6/AP1 had been outstanding for some time, and it was agreed that the Belfast Trust would deliver a presentation on the learning from the Trust's engagement with the East London Foundation Trust (ELFT) at the next scheduled MDAG meeting.

AP2: Presentation on engagement with ELFT to be delivered at June MDAG meeting (Action: BHSCT)

Agenda Item 4 – Update on Public Inquiry

8. Sean Holland welcomed La'Verne Montgomery to the meeting and invited her to update members on the work of the sponsor team taking forward the MAH Public Inquiry.
9. La'Verne advised the Group that the sponsor team intended to issue monthly newsletters on progress, with the April newsletter expected to issue shortly. The PCC report on the consultation with patients and families had been received by the Department on 12 March. She advised that the Minister intends to publish the report, and will write to families and patients to inform them before doing so. The Minister is considering the content of the PCC report, and this will inform his decisions on the Inquiry's purpose, scope, timeframe, power to make recommendations, as well as the background of the Inquiry Chair and arrangements for engagement with patients and their families.
10. La'Verne also advised that as required by the Inquiries Act, the Minister had recently written to the Secretary of State for Northern Ireland to request his

approval to potentially extend the scope of the Inquiry outside the timeframe permitted in the Act. She advised members that the Secretary of State had agreed in principle to this, though he had asked for sight of the Inquiry's Terms of Reference in advance of giving his formal approval.

11. La'Verne updated members on the feedback from families and patients which had indicated a preference for an Inquiry Chair with a legal background and from outside Northern Ireland, supported by a panel with relevant professional expertise. She also outlined the work to establish the secretariat support for the Inquiry, noting that the Chair will be consulted on these arrangements once appointed.
12. Gillian Traub asked which time periods were outwith the scope of the Inquiries Act, and it was clarified that the Secretary of State's consent was required to extend the Inquiry's remit to cover the period prior to December 1999, and also subsequent periods when devolution was not in force.
13. Sean Holland thanked La'Verne for her update.

Agenda Item 5 – MAH Regional Contingency Plan

14. Brendan Whittle referred members to paper MDAG/05/21, and summarised the work that had been carried out by the HSCB and the five Trusts to develop a contingency plan in the event of an unexpected closure of the hospital. He advised that if implementation of the contingency plan became necessary, it would be activated by the Belfast Trust within two hours of any potential closure. A risk assessment would be conducted by the Belfast Trust and the HSCB, and an incident control team would be established. There were a number of options for further action which would be determined in light of events and the nature of the issues prompting activation of the plan. He advised that the plan would be finalised for approval by the Mental Health and Learning Disability Improvement Board, with a final plan to be presented again to MDAG in due course.

15. Sean Holland noted the plan was intended for use in an emergency situation, and invited comments from members.
16. Gillian Traub noted concern about the potential impact of activating the plan, and stressed that work was being done to avoid a situation where there was no alternative but to do so. There are monitoring arrangements in place to be sensitive to staffing levels on the site, such that any deterioration would be picked up as early as possible to afford maximum time for mitigation.
17. Brigene McNeilly queried the circumstances which might lead to the activation of the plan. Sean Holland reiterated the activation of the plan would be a measure of last resort, and noted that staffing issues were likely to be the main risk to the safe operation of services at the hospital. He added that cost pressures were not anticipated to be a potential trigger point for the plan.

Agenda Item 6 – Staffing in MAH

18. Sean Holland noted that staffing at the hospital remained an ongoing concern and invited the Belfast Trust to update the Group on the current position.
19. Brenda Creaney advised members that a significant proportion of the hospital workforce were agency staff, and that families had raised concerns about the quality of care being provided. There were currently 72 agency staff employed at the hospital, made up of 50 registrants and 22 non-registrants. One of the agencies used by the hospital is currently subject to enforcement action. The Trust provide weekly updates on the nursing workforce to the Department.
20. Sean Holland queried whether there was scope to offer permanent contracts of employment to agency staff, and Brenda advised that any agency staff who expressed an interest in permanent employment would be considered, providing they were able to meet the necessary requirements of employment.
21. Brigene Mc Neilly asked whether the situation at the hospital had deteriorated recently, and Brenda advised that it was stable at present and was monitored closely.

22. Sean Holland asked whether the Trust had taken any steps to recruit from the current student nurse cohort, and Gillian Traub advised that the recruitment programme for the hospital was ongoing. She advised that 10 additional Band 3 staff had been appointed in January, and noted the importance of maintaining a balance between experienced and newly qualified staff.
23. Brenda Creaney advised members that 69 staff were on suspension and 58 staff were on training and protection plans, and that 1 further suspension was pending along with 3 further staff to be placed on supervision and training.
24. Margaret McNally noted the importance of a trained community workforce in supporting patients who had been resettled to community placements, and asked about plans to roll out training for this workforce.
25. Sean Holland advised that the new Learning Disability Service Model reflected the need to have an appropriately skilled community workforce, with access available to specialist multi-disciplinary skills where required.
26. Aine Morrison asked about the reasons behind the additional staff being placed on protection plans. Brenda Creaney advised that these decisions had been based on new information arising from viewing of historical CCTV footage, and agreed to provide further detail on these cases.

AP3: Provide update on status of additional protection plans and detail of concerns which required these (Action: BHSCT)

27. Emer Hopkins advised that RQIA were currently participating in the Adult Safeguarding governance arrangements at the hospital, and were satisfied that the Trust was managing these effectively. She noted that RQIA considered the DAPO resource should be strengthened, but wished to reassure families that RQIA continued to challenge the Trust and were satisfied with progress being made.

28. Gillian Traub acknowledged the challenges the Trust had faced in staffing the adult safeguarding service and noted that recruitment efforts were continuing. She undertook to continue reporting to MDAG on this.

Agenda item 7 – Removal of services from MAH

29. Sean Holland advised that a family representative had asked that this issue be included as an agenda item, and invited them to provide an update.
30. Brigene McNeilly noted that the Positive Behaviour Support Service had been removed from the hospital recently and updated the Group on the impact this had had on families and patients.
31. Gillian Traub advised that some MAH staff had recently been moved from the hospital to address a crisis situation which had arisen in community services. She stressed that this was a temporary solution, and there were no plans to withdraw this service permanently from the hospital. She noted there had also been some pressures on the service due to staff absences.
32. Sean Holland asked whether the service had been fully reinstated, and Gillian advised some staff absence was ongoing which the Trust was working to manage. She agreed to bring an update on the Positive Behaviour Service to the next meeting of MDAG. Petra Corr advised that Trusts aim to work collaboratively on the delivery of this service, and the Northern Trust had accordingly been providing support.

AP4: Provide update report on MAH Positive Behaviour Service (Action: Belfast Trust)

Agenda Item 8 – MAH HSC Action Plan – Exception Report

33. Sean Holland referred members to paper MDAG/06/2021, and invited Sean Scullion to update the Group on progress with delivery of the Action Plan. Sean Scullion summarised the key points from the report, including a summary of the

current RAG status of the actions in the plan, and an update on the actions rated red. He also outlined a proposal to develop an Action Plan risk register for consideration at the next MDAG meeting.

34. Sean Holland noted the report and suggested it would be helpful for the owners of the actions rated red to be invited to provide progress updates on these actions at MDAG meetings.

AP5: Arrange for updates on red rated actions to be provided by action owners at MDAG meetings (Action: DoH)

Scoping exercise for facility on site

35. Sean Holland noted that a family representative had asked for an update on this issue.
36. Brigene McNeilly reminded members that this exercise had been discussed previously at an MDAG meeting, and the Belfast Trust had subsequently advised that a scoping exercise had been carried out. She asked for an update on this, and whether this exercise had been informed by input from families.
37. Mark Lee explained the context to this exercise, which had been initiated by correspondence from the Department to the Belfast Trust in September 2020 commissioning a scoping exercise on options to develop an on-site supported living facility for the small number of patients who no longer required active treatment but who had been resident on the hospital site for a significant part of their lives.
38. He advised that the Belfast Trust had carried out some preliminary scoping work with input from the other placing Trusts with a view to engaging with patients and families to seek their views on potential options. He stressed that no decisions would be taken pending discussions with families.
39. Gillian Traub advised that initial consideration had been given to the assessed needs of those patients who might wish to be considered for an on-site option, and this would inform a process of engagement with patients and their families

to develop an options appraisal for a future model of on-site provision. She indicated that a roadmap for this process would be developed, and agreed to provide an update report for the next meeting of MDAG.

AP6: Provide an update report on progress towards a future model of on-site provision (Action: BHSCT)

Resettlement update

40. Sean Holland referred members to paper MDAG/07/21, and invited each of the three Trusts involved to summarise the resettlement status of their in-patient populations.
41. Gillian Traub advised that the Belfast Trust currently has 15 patients in MAH. Of these, 3 have firm discharge dates in the summer, 7 patients have planned moves to two new supported living facilities which are at business case stage with an anticipated resettlement date of 2023, a planned move for 1 patient to Cherry Hill is progressing and 4 patients have no identified options at present. Of these 4 patients, Gillian advised that 2 are potential candidates for the future on-site proposal and the Trust are considering bespoke procurement exercises to identify suitable options for the remaining 2 patients.
42. Petra Corr provided an update on the Northern Trust in-patients, advising that the Trust currently has 20 patients placed in the hospital. 1 patient is on trial leave, 12 have confirmed or potential community placements and are progressing towards discharge, and the Trust are working to identify suitable placements for the remaining 8 patients, involving bespoke procurement exercises and also consideration of the on-site proposal.
43. Margaret O’Kane updated members on the South Eastern Trust patients, advising that the Trust currently have 8 patients in the hospital. 1 patient is on extended home leave and 3 have planned discharge dates in September. 2 patients have planned moves to the proposed new community facilities currently at business planning stage, and the Trust is exploring options

including the on-site proposal for the remaining 2 patients, one of whom has had a number of previous failed resettlements.

44. John McEntee and Christine McLaughlin also updated the Group on the current resettlement position in their Trusts' respective facilities.
45. Sean Holland noted the current resettlement position and expressed concern at the proposed discharge timescales for a significant proportion of the current regional in-patient population. He asked that the HSCB provide a regional overview of the current resettlement programme with a particular view to scrutinising and expediting resettlement arrangements for the most complex cases.

AP7: Develop a regional overview of progress on the resettlement programme, with a particular focus on the most complex cases (Action: HSCB)

Agenda Item 9 – Highlight Report and Dashboard

46. Sean Holland referred members to paper MDAG/08/21 and invited Maire Redmond to provide an update.
47. Maire Redmond advised members that all CCTV footage had now been viewed at least once, and that the 16th arrest had recently been reported in the media. She advised that there were currently about 70 staff on precautionary suspension and that the Adult Safeguarding Strategic Governance meetings were continuing. She further advised that the Department continues to engage with both Belfast Trust and the RQIA to ensure that we understand the safeguarding process within the Trust.
48. Maire further noted the recent announcement by the Public Prosecution Service of their intention to charge 7 individuals, and that 8 further files remained under consideration.
49. Brigene McNeilly asked whether any work had been done with families in expectation of the announcement in due course of the names of the individuals

who had been charged, as this disclosure may potentially be traumatic for the families of current and previous patients in the hospital.

50. It was noted that the PSNI were reluctant for operational reasons to advise in advance of decisions on prosecutions. Members were in agreement that the announcement of decisions on prosecutions of identified individuals who had worked at the hospital had the potential to be traumatising for current and past patient and their families, and consideration should be given to establishing appropriate arrangements to provide support for patients and their families. As a first step, Gillian Traub agreed to raise this on behalf of all Trusts at the Belfast Trust's next scheduled meeting with the PSNI.

AP8: Arrangements for notifying patients and families of decisions to prosecute to be raised at next Belfast Trust meeting with PSNI (Action: Belfast Trust)

Agenda Item 10 – AOB

Admissions of LD patients

51. Sean Holland updated members on admissions to LD assessment and treatment facilities, noting that admissions to MAH had been effectively suspended for some time and that this position was unlikely to be sustainable in the longer term. He advised that the Northern and Belfast Trusts had been exploring potential options for alternative provision, and were aiming to develop these further. Further updates on developments with this work would be brought to MDAG in due course.
52. Members noted this was Briege Quinn's final MDAG meeting, and the Chair extended thanks to her for her contribution to the work of the Group and wished her well for the future.
53. Brigene McNeilly referred to the Highlight Report, and queried the reason for the apparent spike in the seclusion events in January.

54. Gillian Traub advised that a number of patients in the hospital had been unsettled at that time, and this had resulted in a temporarily higher than usual use of seclusion to manage these patients. She noted more recent data showed the level had dropped since this spike. Sean Holland acknowledged that such spikes may occur from time to time for a variety of reasons, but it was important that arrangements are in place to closely monitor, review and learn from such instances.

Agenda Item 11 – Date of next meeting

55. The Chair advised members that the next meeting was scheduled for Wednesday 30 June at 2pm.

Summary of Action Points

Ref.	Action	Respon- sible	Update	Open/ closed
28/04/AP1	Declaration of involvement forms to be issued to new MDAG members.	DoH		
28/04/AP2	Presentation on engagement with ELFT to be delivered at June MDAG meeting.	Belfast Trust		
28/04/AP3	Provide update on status of additional protection plans and detail of concerns which required these.	Belfast Trust		
28/04/AP4	Provide update report on MAH Positive Behaviour Service.	Belfast Trust		
28/04/AP5	Arrange for updates on red rated actions to be provided by action owners at MDAG meetings.	DoH		

28/04/AP6	Provide an update report on progress towards a future model of on-site provision.	Belfast Trust		
28/04/AP7	Develop a regional overview of progress on the resettlement programme, with a particular focus on the most complex cases.	HSCB		
28/04/AP8	Arrangements for notifying patients and families of decisions to prosecute to be raised at next Belfast Trust meeting with PSNI.	Belfast Trust		

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 30 June 2021****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Joint Chair)	Charlotte McArdle	DoH (Joint Chair)
Máire Redmond	DoH	Mark Lee	DoH
Siobhan Rogan	DoH	Ian McMaster	DoH
Aine Morrison	DoH	Brendan Whittle	HSCB
Sean Scullion	DoH	Emer Hopkins	RQIA (Observer)
Darren McCaw	DoH (Note)	Aidan McCarry	Family rep
Lorna Conn	HSCB	Martin Quinn	HSCB
Rodney Morton	PHA		
Deirdre McNamee	PHA		
Gillian Traub	Belfast Trust		
Brenda Creaney	Belfast Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Margaret O'Kane	South Eastern Trust		
Petra Corr	Northern Trust		
John McEntee	Southern Trust		
Karen O'Brien	Western Trust		
Mandy Irvine	NI British Psychological Society		
Vivian McConvey	PCC		
Gavin Davidson	QUB		
La'Verne Montgomery (for agenda item 4)	DoH		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Sean Holland welcomed attendees, and noted the apologies received from Charlotte McArdle, Mark Lee, Ian McMaster, Brendan Whittle, Emer Hopkins, Aidan McCorry, and Martin Quinn.

Agenda Item 2 - Minutes of Previous Meeting

2. Sean Holland noted that the draft minutes of the previous meeting held on 28 April were circulated to members on 6 May. Following receipt of a number of comments from members, the draft minutes were amended and published on the Department's website as an agreed record of the meeting. There were no further comments on the minutes.

Agenda Item 3 – Update on Action Points.

3. Sean Holland provided an update on the open action points arising from previous meetings of the Group. He advised that in relation to 28/04/AP1, a declaration of involvement form had been issued to Dr Maria O'Kane and would be shared with members once received. This action was now closed.
4. In respect of 28/04/AP2, it was noted that the ELFT presentation was on today's agenda at item 5 and as a result was now closed. Sean Holland advised that a copy of the presentation would be circulated to members by the MDAG secretariat.

AP1: ELFT presentation to be circulated to members. (Action: DoH)

5. Sean Holland noted that further to 28/04/AP3, an update from the Belfast Trust on additional safeguarding information and protection plans was included as Agenda item 8 for today's meeting.
6. Sean Holland advised that in relation to 28/04/AP4 Belfast Trust had provided an appendix 2 to the highlight report setting out the MAH psychological Therapies Support and the key aspects of each role; the action is now closed.
7. 28/04/AP5 was included on today's agenda at item 7, had been actioned and was now closed.
8. In relation to 28/04/AP6, Sean Holland asked Gillian Traub to provide an update on progress towards a future model of on-site provision. Gillian Traub advised that work was ongoing and the steering group, including the three Trusts involved and the HSCB, had now met twice to examine the feasibility of

MDAG/12/21

a facility on site. Each Trust has assessed their patients' suitability for this, and although six potential patients had initially been identified, the most likely outcome was a facility providing for four patients supported by a nursing care model. Details of these assessments have been provided to the Estates Department in the Belfast Trust to gauge if this could be provided within the existing on-site infrastructure. Further detail will then be collated to help inform the timeframe, costs and workforce model required.

9. In respect of 28/4/AP7, Sean Holland asked Lorna Conn for an update on the development of a regional overview of progress on the resettlement programme. Lorna Conn provided an outline of work currently being taken forward by the HSCB in relation to resettlement, adding she would like some additional time to consider the recent proposal received from the Department commissioning work to examine and further develop current processes. Sean Holland advised members that work was underway within the Department to look at processes around resettlements. Sean also emphasised that the status quo was not sustainable and all options available to reduce the time taken to achieve successful resettlements, however radical, would be examined, with any proposals emerging from this work to be brought to MDAG for consideration. He also confirmed that the needs of individual patients would remain the paramount consideration.
10. Brigene McNeilly welcomed this work, and noted that efforts to resettle some individuals had been ongoing for 25 years. Lorna Conn confirmed she would welcome further discussion on potential improvements to the resettlement process.
11. Further to 28/04/AP8 Gillian Traub agreed to provide an update at the next meeting of MDAG as she had not yet engaged with PSNI.
12. Sean Holland confirmed that 24/02/AP1 was now closed following validation of the data presented in the resettlement dashboard.

13. Finally, in relation to 24/02/AP2 Sean Holland requested an update from Gillian Traub. Gillian advised that work was ongoing per the update given at the April MDAG.

Agenda Item 4 – Update on Public Inquiry

14. Sean Holland welcomed La'Verne Montgomery to the meeting and invited her to update members on the work of the sponsor team taking forward the MAH Public Inquiry.
15. La'Verne advised the Group that today was a significant day for progress as the Minister had published the PCC report and announced the appointment of Tom Kark QC as Chair of the Inquiry. La'Verne confirmed that detail on the appointment of the Chair was shared in advance with those families the sponsor team and PCC hold contact details for before being formally announced by the Minister through a written statement in the Assembly at noon. La'Verne also confirmed that written detail on the appointment would be placed on the Departmental internet site.
16. La'Verne advised that the next steps would involve the Terms of Reference for the Inquiry being considered by the Chair ahead of formal approval by the Minister, and consideration by the Chair of the Panel support he will require. La'Verne confirmed that the Chair had also received a copy of the PCC report and this would be a key document in relation to his decision making. She advised it was planned to formally launch the Inquiry as soon as possible, with a proposed date of 1 September for this.
17. Dawn Jones welcomed the appointment and asked for an overview on the Chair and his qualifications and experience. La'Verne advised that the newly appointed Chair met a number of the key requirements identified by patients and families, including that he came from outside Northern Ireland, has suitable legal experience of issues likely to come up in the work of the Inquiry, is an experienced QC and part time Judge and has had extensive training in interviewing and questioning vulnerable witnesses. La'Verne provided a brief overview of Mr Kark's CV highlighting his work as Senior Counsel to the Mid-

Staff Inquiry and leading the review of the fit and proper persons test in the NHS, England. Dawn Jones expressed her satisfaction that both the medical and legal aspects were covered.

18. Brigene McNeilly asked La'Verne to convey thanks to the Minister, as he has lived up to the commitments he made to families, and the process to establish the Inquiry has been handled very well to date.
19. Sean Holland noted that the Minister has been very proactive in the establishment of the Inquiry and thanked La'Verne for her update.

Agenda Item 5 – East London Foundation Trust (ELFT) Presentation

20. Sean Holland advised members that, further to action point 28/04/AP3, it had been agreed that the Belfast Trust would provide detail to MDAG on the Trust's engagement with the East London Foundation Trust (ELFT) at today's meeting and invited Gillian Traub to provide the detail.
21. Gillian Traub delivered a presentation on the consultation between the Belfast Trust and the ELFT, setting out the background, detail of the engagement between the Trusts which covered learning disability services in both Muckamore and a number of community settings, a summary of the main findings including areas of good practice, those for development, and outcomes and recommendations.
22. Karen O'Brien advised that feedback received on the role of the Acute Liaison Nurse for Learning Disability used in the Western Trust had highlighted the positive difference this had made. Further to this, Rodney Morton advised that investment was being made in learning disability nursing in Northern Ireland with 20 new posts being created and there was potential to work with the Trusts to use one of these posts to develop a learning disability liaison nurse. Brenda Creaney confirmed the Belfast Trust would be keen to work with the other Trusts on this but highlighted the need to ensure this did not risk destabilising the Muckamore workforce.

23. Siobhan Rogan queried the figure for the population served by the ELFT quoted in the second slide. Brenda Creaney agreed to seek clarification and provide confirmation.

AP2: ELFT population served figure to be confirmed. (Action: Belfast Trust)

Agenda Item 6 – MAH HSC Action Plan – Exception Report

24. Sean Holland referred members to paper MDAG/10/2021, and invited Darren McCaw to update the Group on progress with delivery of the Action Plan. Darren McCaw summarised the key points from the report, including a summary of the current RAG status of the actions in the plan, and an update on the actions rated red including a request to approve a proposed revised completion date for A30 to September 2021.
25. Sean Holland noted the report and confirmed members' agreement to amend the completion date for A30 as outlined in the report.

AP3: Completion date for HSC Action Plan Action A30 to be updated to September 2021 (Action: DoH)

Agenda Item 7 – Progress Update – Actions Rated Red

26. Sean Holland advised that further to agreement at the April meeting there would be a focus at each meeting on a number of the actions rated red within the HSC Action Plan. This will be a rolling process to allow for consideration of all the red-rated actions. Sean confirmed that updates on four actions would be provided at today's meeting; the Belfast Trust providing updates on actions A29 and A21; and the HSCB providing updates on actions A39 and A40.
27. Sean invited Gillian Traub to provide the updates from the Belfast Trust. Brenda Creaney provided an update in relation to A29, advising that, the Trust had recently received additional investment from the HSCB for the creation of a number of new specialist nursing posts at Band 7, 8A and 8B to deliver the workforce plan for specialist nursing across learning disability services, which

would include Muckamore. She advised the Trust were seeking to extend the deadline for the delivery of this action to allow this work to develop. Rodney Morton confirmed that the Chief Nursing Officer has prioritised investment in Learning Disability nursing to develop specialist nursing roles. He advised that the posts at Band 8 level were specialist posts and regional job descriptions for these roles were being collated, however it would likely be September before the posts were filled. Brenda Creaney advised the Belfast Trust were seeking to agree the potential to bring staff in via training for these roles in order to develop their own staff and potentially attract nurses with the relevant skills back into learning disability nursing roles.

28. Sean Holland queried the proportion of Learning Disability nurses who choose to work in non-specialist roles, and indicated that the Learning Disability Service Model needs to recognise and address this disparity. Members outlined some of the factors which contribute to this, and Rodney Morton noted work to create a career framework with a view to addressing this issue.
29. In relation to A21, Gillian Traub advised that following feedback from the ELFT visit in 2019 the Trust seclusion policy has been significantly revised and is scheduled to go to the Trust Standards and Guidelines Committee meeting in August for sign off.
30. Sean Holland thanked Gillian for the updates and invited Lorna Conn to provide the HSCB updates.
31. Due to the linked nature of actions, A39 and A40, Lorna provided a combined update advising that the regional review of admissions criteria and the development of a regional bed management protocol for LD services under A39 was dependent on the appointment of the regional bed manager post outlined in A40. Due to the non-recurrent nature of the funding provided in 2019/20 and the inability to appoint to the post at that time, action A40 had not been completed.
32. Lorna further advised that given the work carried out at the time, and other related pieces of work since, it would be helpful to further consider how this

could be moved forward should funding be made available. Karen O'Brien raised the potential to combine the proposed learning disability bed management role with the already established mental health bed management network in order to achieve a better outcome. Sean Holland requested that a meeting be organised between Mark Lee, Brendan Whittle and Lorna Conn to examine potential options for funding in order to move to recruitment and requested an update be provided at the next meeting of MDAG.

AP4: Meeting to discuss funding options re A40 to be organised between the DoH and HSCB. (Action: DoH)

AP5: An update on progress in relation to A40 to be provided at the MDAG meeting in August. (Action: HSCB)

Agenda Item 8 – Highlight Report and Dashboard

33. Sean Holland referred members to paper MDAG/11/21 and invited Máire Redmond to provide an update.

34. Máire Redmond highlighted a number of new items included in the report including the recent ward re-profiling exercise that had been carried out at Muckamore Abbey Hospital in order to make use of the most modern of the wards on-site and the potential decommissioning of the Erne Ward. Máire also advised that the DoH are engaged in ongoing discussions with the Belfast Trust on the range of information provided to MDAG, through the Highlight Report, and scope to improve this. As a result of these discussions, additional information on adult safeguarding processes has now been included in the Highlight Report. Máire invited Gillian Traub to provide a presentation to members on the additional safeguarding information proposed for inclusion in the Highlight Report. She confirmed a copy of the presentation would be circulated following the meeting.

AP6: Copy of BHSCT adult safeguarding presentation to be circulated to MDAG members (Action: DoH)

Expanded information iro safeguarding

35. Gillian Traub provided a presentation to the Group setting out the additional adult safeguarding detail which is proposed for inclusion in the Highlight Report. This covered the period from 1st January 2020 to 31st May 2021 and was collated from the single Trust database used to record this information. Gillian advised work was being taken forward to ensure detail on the database was as comprehensive and accurate as possible and confirmed that for future meetings up to date data will be provided.
36. Gillian provided an overview of the ongoing work within the Trust to avoid any repetition of past safeguarding failings, and to demonstrate the priority given to patient safety. She provided information on two distinct adult safeguarding data sets; staff on patient referrals; and patient on patient referrals. Detail was provided on screening processes, investigations, outcomes and continuous learning from investigations in order to enhance these processes. Sean Holland acknowledged that the DoH was demanding in terms of the information being sought from the Trust in order to provide assurances on safeguarding processes, and Gillian advised the Trust would continue to develop the information provided with Departmental colleagues.
37. Brigene McNeilly expressed concerns that the information provided did not reflect her recent experience of adult safeguarding within Muckamore which was extremely poor. She considered that those involved in the safeguarding team appeared unsure of processes and this had increased the anxiety she and her family had around their relative's care. Dawn Jones indicated her agreement with Brigene's comments, adding that she felt safeguarding was one of the weakest parts of Muckamore and also highlighted her concerns in relation to the inexperience, competence and attitude of some staff involved in safeguarding arrangements.
38. Gillian Traub advised that, in order to remove any potential conflict with the provision of care at Muckamore, the Adult Safeguarding team were a separate team, but who remain under the management of the Belfast Trust who have a responsibility to ensure the service remains fit for purpose. Gillian said it was a

concern that the Trust was not meeting expectations in this area.

39. Aine Morrison advised members that the Department was working with the Belfast Trust and RQIA on a number of safeguarding issues which have been of concern to the Dept. These issues have included the number and nature of safeguarding referrals that have been made in the past 18 months, the adequacy of protection plans relating to staff members on site about whom there are some concerns arising from the CCTV viewing and the application of regional adult safeguarding policy. Aine informed the meeting that the Department has commissioned an external file review of Muckamore adult safeguarding referrals involving allegations about staff behaviour. The Department is concerned that there appears to be a high number of these referrals although acknowledges that benchmarking this is difficult. The Trust has explained to the Department their belief that the thresholds for referral and investigation are very low and that this accounts for the numbers. The external file review will examine thresholds for referrals and investigations as well as looking at levels of harm or potential harm being caused by the incidents that had been reported.

40. Vivian McConvey queried whether an additional forum was required to engage with families on the concerns being expressed about safeguarding arrangements at the hospital. Sean Holland advised the Department was already reviewing the adult safeguarding arrangements in Muckamore and he suggested that this work would benefit from considering feedback from those families and carers who have been engaged with the adult safeguarding team. Sean requested that the Belfast Trust consider systematically collecting data in relation to families' experience of adult safeguarding in order to fully understand the experience of adult safeguarding in addition to the data collected.

AP7: BHSCT to consider collecting feedback from all those affected by adult safeguarding investigations. (Action: Belfast Trust)

41. Sean Holland advised the family representatives that he was happy to follow up directly with them and the Belfast Trust and PCC on any issues they may have in relation to adult safeguarding.

42. The family representatives welcomed this offer, and considered that further work is needed to improve Adult Safeguarding arrangements.
43. Aine Morrison noted that ongoing protection arrangements were in place arising from the viewing of historic CCTV footage, and discussions were continuing about current activity on-site.
44. Gillian Traub noted her presentation was based on a summary of safeguarding referral data, and acknowledged that families were expressing a lack of confidence in the current arrangements, which the Trust would wish to address. Gillian noted that the Trust had previously highlighted to the Department significant challenges due to vacancies within the adult safeguarding service and difficulties with recruitment. Some recent recruitment had taken place which meant that there are very new team members who are less experienced. The complexity and demands of the work of this team also have an impact.
45. Sean Holland reiterated his offer to be involved in discussions with families as appropriate, and noted that in addition to the activity data, it was important to understand families' experience of safeguarding.
46. Sean Holland advised members that he is also Chairing a group working to place adult safeguarding arrangements onto a statutory footing in Northern Ireland, which was also reviewing policies and procedures in this area. This work will include the creation of new criminal offences that can be committed in relation to adult safeguarding for members of the public or staff. He noted that if members considered it would be helpful, a presentation on the draft legislation could be arranged for MDAG.

Agenda Item 9 – AOB

47. None raised.

Agenda Item 10 – Date of next meeting

48. The next meeting is scheduled for Wednesday 25 August at 2pm.

Summary of Action Points

Ref.	Action	Responsible	Update	Open/closed
30/06/AP1	ELFT presentation to be circulated to members.	DoH	Circulated 8 July 2021	Closed
30/06/AP2	ELFT population served figure to be confirmed.	Belfast Trust	Belfast Trust confirmed as 1.3m from ELFT website. This is broken down as follows: East London population served: 750,000 Bedfordshire and Luton population served: 630,000	Closed
30/06/AP3	Completion date for HSC Action Plan Action A30 to be updated to September 2021.	DoH	Date updated	Closed
30/06/AP4	Meeting to discuss funding options re A40 to be organised between DoH and HSCB	DoH	Meeting arranged for 2 August 2021	Closed
30/06/AP5	An update on progress in relation to A40 to be provided at the MDAG meeting in August.	HSCB		
30/06/AP6	Copy of Belfast Trust adult safeguarding presentation to be circulated to members.	DoH	Circulated to members 15 July 2021	Closed
30/06/AP7	BHSCT to consider collecting feedback from all those affected by	Belfast Trust		

MDAG/12/21

Ref.	Action	Respon- sible	Update	Open/ closed
	adult safeguarding investigations.			

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 25 August 2021****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Sean Holland	DoH (Joint Chair)	Charlotte McArdle	DoH (Joint Chair)
Mark Lee	DoH	Rodney Morton	PHA
Máire Redmond	DoH	Vivian McConvey	PCC
Siobhan Rogan	DoH	Margaret O'Kane	SEHSCT
Aine Morrison	DoH	Maria O'Kane	SHSCT
Ian McMaster	DoH	John McEntee	SHSCT
Darren McCaw	DoH	Brendan Whittle	HSCB
Teri Gourley	DoH (Note)		
Lorna Conn	HSCB		
Maurice Leeson	HSCB		
Gillian Traub	Belfast Trust		
Moira Kearney	Belfast Trust		
Brenda Creaney	Belfast Trust		
Carol Diffin	Belfast Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Lyn Preece	South Eastern Trust		
Petra Corr	Northern Trust		
Karen O'Brien	Western Trust		
Deirdre McGrenaghan	PCC		
Emer Hopkins	RQIA (Observer)		
La'Verne Montgomery (for agenda item 4)	DoH		
Mandy Irvine	NI British Psychological Society		
Gavin Davison	QUB		
Grainne Close	Mencap		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Sean Holland welcomed attendees, and noted the apologies received. He highlighted the lack of a representative from the Southern Trust and asked that

a letter be drafted to the Chief Executive of the Trust. He advised members that this would be Gillian Traub's and Mark Lee's final meeting as they were moving on to new roles. He thanked them for their contribution to date and wished them well. He welcomed Moira Kearney to her first meeting, who would be replacing Gillian Traub.

AP1: Letter to be drafted and sent to Chief Executive of Southern Trust re lack of representative at MDAG meetings. (Action: DoH)

Agenda Item 2 - Minutes of Previous Meeting

2. Sean Holland noted that the draft minutes of the previous meeting held on 30 June were circulated to members on 8 August. Following receipt of a number of comments from members, the draft minutes were amended and published on the Department's website as an agreed record of the meeting. There were no further comments on the minutes.

Agenda Item 3 - Update on Action Points – S Holland

3. Sean Holland provided an update on the open action points arising from previous meetings of the Group. He advised that in relation to 30/06/AP1, the ELFT presentation had been circulated to the members of MDAG. **This action is now closed.**
4. In respect of 30/06/AP2, the Belfast Trust had confirmed the ELFT population in East London. This information was provided in the minutes of the previous meeting. **This action is now closed.**
5. Sean Holland advised that in relation to 30/06/AP3, a completion date for HSC Action Plan, Action 30 had now been updated and **this action is now closed.**
6. Sean Holland noted that work had been ongoing in regards to 30/06/AP4, and asked Lorna Conn for an update on this. She was pleased to note that a meeting between DoH and HSCB had taken place, the job description for the regional bed manager had been reviewed to include both learning disability and

mental health and the HSCB are now in a position to recruit for this position.

This action is now closed.

7. Sean Holland provided an update on 30/06/AP6, stating that the safeguarding presentation had been circulated to members and **this action was now closed.**
8. Sean Holland asked the Belfast Trust for an update in regards to 30/06/AP7. Gillian confirmed that this had not progressed and committed to giving an update at the next meeting.
9. Sean Holland advised that in relation to 28/04/AP3, an update was provided at the June MDAG meeting and that safeguarding would be a standing agenda item going forward. **This action is now closed.**
10. In relation to 28/04/AP4, an update report on MAH positive behaviour support has been provided and **this action is now closed.**
11. Sean Holland noted that in relation to 28/04/AP5, this has now been added as a standing agenda item and was on the agenda at agenda item 8. **This action is now closed.**
12. In respect of 28/04/AP6, Sean Holland advised that there were ongoing meetings with the BHSC, looking at a potential future facility and design options. A meeting is being arranged between the Department, Board and Trusts and an update will be provided at the next meeting. Gillian Traub confirmed a Steering Group had been established and meetings are planned with families.
13. Sean advised that Petra Corr will provide an update on 28/04/AP7 at Agenda Item 9 in relation to delays in some current planned resettlements and added that the Department and Board have been examining the processes around resettlement to determine how timescales could be reduced. A meeting is due to take place at the end of the week in relation to this.

14. Sean asked Belfast Trust for an update in relation to 28/04/AP8. Carol Diffin advised that she had contacted the PSNI about this issue but has not yet received a complete answer. She agreed to provide an update at the next meeting.

Agenda Item 4 – Update on Public Inquiry

15. Sean Holland welcomed La'Verne Montgomery to the meeting and invited her to update members on the work of the sponsor team taking forward the MAH Public Inquiry.
16. La'Verne advised the Group that the Chair Tom Kark QC is currently considering the PCC report along with other information to help inform the Terms of Reference (ToR) for the Inquiry. Once the ToR is drafted it will be shared with Minister Swann for consideration/approval.
17. La'Verne advised that July and August had been busy months appointing the Senior Team for the Inquiry. She advised that Sean Dorran QC had been appointed as Senior Counsel, Joan MacElhatton as Solicitor to the Inquiry and Jaclyn Richardson as Secretary to the Inquiry. Jaclyn will be taking up her post from 6 September 2021.
18. La'Verne informed members that the Chair is completing prior commitments and will be fully committed to the Inquiry from 1 October. The ToR for the Inquiry and discussions with the Secretary of State on agreement on the timeframes to be covered by the Inquiry should be complete prior to this in order to facilitate this start date. The ToR will be published prior to formal launch.
19. Brigene McNeilly questioned what support would be offered, not only to those families and patients directly involved with the Inquiry, but also for those families who are on the periphery of the Inquiry. La'Verne advised that the Department will continue to work with the PCC in their role to establish what further support will be required by those affected by the Inquiry.

20. Brigene asked for clarity on what was meant by 'further support' and La'Verne confirmed this was support outside of what was currently in place. La'Verne assured that this support will be offered to all families that they hold contact details for and they would also reach out to others, for example through support groups, the media, etc.
21. Sean Holland went on to stress that it is understandable that some families will have issues with trusting the support systems currently in place and that a facility to access support that is free and independent, in addition to those formal services, will be made available. La'Verne advised that whatever support networks were designed, they would be brought back to MDAG as a touch-point in order to ensure it would meet the needs of all.
22. Mandy Irvine advised that it should not be assumed that all families want only independent support, but for those who have had a previous positive experience, they could continue to make use of their familiar support.
23. Sean Holland advised that there will be a menu of support available to families and thanked La'Verne for her update.

Agenda Item 5 – Safeguarding Audit at MAH update

24. Sean Holland advised members that the DoH commissioned a safeguarding audit file review last month. The review is complete, however there is no formal report as yet. Sean invited Aine Morrison to give an update on this.
25. Aine noted that she is still waiting on a formal written report. A summary was given by the auditors and further discussions have taken place on the need to have a formal report prepared.
26. Dawn Jones raised that she still does not have a social worker in Muckamore Abbey Hospital and Sean Holland assured her that he would look into this and come back to her on this matter.

AP2: The provision of a Social Worker at MAH for Dawn Jones to be confirmed. (Action: DoH)

27. Aine provided an overview on the background to commissioning the safeguarding audit, which arose from concerns over the number and nature of safeguarding referrals in relation to staff on patient incidents. Aine advised that discussions had been held with both the Trust and the RQIA who felt the numbers of cases could be explained by low thresholds and an over reporting of incidents due to the level of scrutiny staff are under.

28. Aine advised that:

- The audit had been performed by an independent team of four auditors. Three of the auditors were from a social work background and the fourth had a background in learning disability nursing.
- A sample of 60 staff on patient referrals was selected by the team; of the 60, 40 had been screened in by the Trust and 20 screened out meaning that the reported issue was not deemed to meet an adult protection threshold although it may have required some other action.
- Safeguarding forms not user friendly and do not support the process or the recording of the process well.
- Quality of recording poor in many instances, particularly re the rationale for decision-making.
- A lack of follow up recording, particularly where incidents were waiting for PSNI input with no evidence of protection plans being reviewed regularly during this waiting period.
- A lot of incidents linked to a small number of patients but a lack of evidence that these were being considered in the round, seemed to be largely dealt with as entirely separate incidents.
- Inappropriately low thresholds for referrals in a significant number of referrals but screening thresholds were appropriate.
- Some suggestion that safeguarding processes are being engaged to protect staff rather than the necessary or right thing for patients.

- A lack of evidence that wider protection issues had been considered when agency staff were no longer being employed in the hospital such as consideration of regulator referral or follow up re other employment.
- Good practice evident in speedy and thorough initial responses, communication with families and referrals to PSNI.
- Variability in DAPO response. Some DAPOs very thorough and comprehensive in their recording which showed good professional decision making. Others much less comprehensive in their recording.
- Agency staff appear disproportionately involved in incidents of concern.
- Of the screened in referrals, whilst acknowledging that some investigations were inconclusive and that some were ongoing, overall the team felt that there was likely to be substance to a significant proportion of them whilst acknowledging it was very difficult to firmly evidence a lot of them.
- Some of the staff behaviours in the screened in referrals were for responses to patients that should have been very obviously inappropriate. This led the reviewers to have concerns about the knowledge, skills and experience of these staff.

29. As a result of the audit, the Belfast Trust were asked to immediately follow up in three areas;

- Review any cases where there had been some actions taken in relation to an agency member staff because there were concerns about their behaviour towards patients. This could include agency staff who stopped working in MAH of their own accord or where a decision had been made to stop using a particular staff member. The purpose of the review is to ensure that all necessary protective actions were taken in respect of these staff including referrals to professional regulatory bodies as appropriate.
- Immediately review all cases where there has been more than two adult safeguarding referrals involving the same patient. This is to ensure that incidents have not been considered in isolation.
- Review the referrals to identify what had been the outcome of each investigation adult safeguarding documentation in response to the auditors'

comments that the records lacked any conclusion in a large number of cases.

30. Sean thanked Aine for her update and added that it was clear that a number of safeguarding issues have been identified in this review but also to be noted that some of the issues were system issues which we know need improved and would be addressed through a process of reform of adult safeguarding systems.
31. Brenda Creaney raised a query with Aine in relation to the holding of regulatory actions and information about nursing staff, advising that detail wouldn't normally be held in patient files, but would be held by the Bank Office. Aine acknowledged that regulatory referral may well sit elsewhere to be actioned but that as the consideration of wider protection issues sits with the DAPO, she would have expected it to be referenced in the safeguarding records.
32. Brigene McNeilly advised that from her recent experience there is a lack of accurate recording. Auditors can only work with what information they have and this may not be a true reflection of how safeguarding is in Muckamore. She asked if there is some way staff can be provided with more training that will help them to record more accurately.
33. Sean stressed that staff not recording information correctly could also be caused by the forms not being fit for purpose and these will need reviewed.
34. Re any PSNI delays, Carol advised that regular meetings with the PSNI take place and that processes take time to allow them to gather the information that is required.
35. Dawn Jones highlighted her concern over the safeguarding forms and asked why it took until now to realise they weren't fit for purpose and why actions were not taken sooner. Sean noted that the issue had emerged during a number of safeguarding review processes and that it would form part of the ongoing reform of adult protection services.

Agenda Item 6 – Unannounced Inspection

36. Sean Holland invited Emer Hopkins to provide an update on the RQIA unannounced inspection that recently took place at Muckamore Abbey Hospital. Emer advised that this was quite a drawn out inspection process, with a number of follow-ups and engagements with families. She further advised that RQIA are working with the Belfast Trust to incorporate findings from the Safeguarding Audit into an Improvement Plan.
37. Emer outlined that the inspection was carried out between 30 July and 10 August and went on to note that six inspectors were assigned to different wards and had an onsite presence for over 5 days and that a lot of time was spent with patients and staff. She advised that the findings concluded that there are good systems in place and timely referrals are being made. She also advised that the inspectors highlighted that staff at the hospital appear to be hyper vigilant and are being extra cautious by reporting themselves and others; this they felt was due to staff feeling they under constant scrutiny.
38. Emer also acknowledged the outcome of the adult safeguarding file audit.
39. Emer stressed that it was evident that there are some gaps in skills and experience, especially in relation to agency staff. There are also a growing number of staff who are the subject of protection plans because of concerns about their behaviour and improvements are needed by way of broader support. She added that work is needed to re-engage both adult safeguarding teams and ward staff in order to improve relationships between them.
40. Emer also advised that the inspection team had spoken to a number of families and patients in the community and broadly the feedback was that staff are compassionate to patients needs and have a good experience of care. Emer commented that the Trust are being proactive, trying to make the best use of the site, the staff skills set and also reorganising patients to provide them with a better ward environment. She also noted that there is some quality leadership on site. Emer did however voice concerns over the sustainability of the site and

the significant staff shortages, especially with a growing number of staff on protection plans and a number absent due to COVID. She further noted that it is important to re-energise resettlement plans.

41. Emer advised that their report is well advanced and will be shared with the Trust. The improvement plan will also be published and she is happy to meet with families following this. She highlighted that learning can be shared with other services and the same themes and practice issues are evident from other inspections.

42. Dawn Jones noted the vast improvement in her experience with the RQIA Inspection experience this time. She thought it was remarkable that the RQIA contacted her. Emer stressed that she hoped for a better inspection experience going forward and thanked Dawn for her participation

Agenda Item 7 - MAH HSC Action Plan – Exception Report

43. Sean Holland referred members to paper MDAG/13/21, and invited Darren McCaw to update the group on progress with delivery of the Action Plan. Darren summarised the key points from the report, including a summary of the current RAG status of the actions in the plan, and an update on the actions rated red. He provided an update on a number of actions that were reported as completed and have been moved to Section A of the Action Plan.

Agenda Item 8 - Progress update - Actions rated red

44. Sean Holland confirmed that updates on three actions would be provided at today's meeting; the HSCB would be providing updates on actions A12, A13 and A14; Sean Holland invited Maurice Leeson to provide a progress update for these.

45. Maurice provided an update in relation to A12, advising that an Assistant Directors' meeting had been set up and had produced a Disability Framework that included a number of strands including Early Intervention and Transitions. In terms of transition from Child and Adult Mental Health Services (CAMHS)

to Adult Mental Health Services (AMHS) at age 18, there was transition work still to be finalised and a separate paper was being produced for this. An additional member of staff will be recruited in October to focus on transitions.

46. In relation to A13, Maurice advised that costings for an implementation plan for the new regional framework for reform of children's autism, ADHD and emotional wellbeing services, including consideration of the services required to support them into adulthood had been completed by the Department and HSCB and submitted. Work was to include additional support for those transitioning between services.

47. Maurice advised that in relation to A14, a working group has been set up in terms of Iveagh and the HSCB and Trust are working their way through reviewing exit plans. An operational policy is also being developed for the Centre.

Agenda Item 9 - Highlight Report and Dashboard

48. Sean Holland referred members to paper MDAG/14/21 and invited Maire Redmond to provide an update.

49. Máire noted that there was a delay in issuing the resettlement dashboard due to a member of staff in the HSCB who was unexpectedly unavailable.

50. Maire Redmond advised members that there are currently 41 patients with a delayed resettlement in Muckamore, the last resettlement taking place in May. Máire advised that a planning meeting in relation to resettlement was being organised and this would address how to drive the resettlement of patients' in Muckamore forward.

51. Máire noted that a number of resettlements to the Mallusk facility planned to take place by the end of August have now been pushed back as Inspire have advised that they have been unable to recruit all the staff required to allow

these transitions to take place. Máire asked Petra Corr to provide any further details on this.

52. Petra Corr advised that due to the complexity of the patient needs those patients due to transition to the Mallusk facility were on a phased resettlement plan over a period of 18 months. The start date for a number of these resettlements has been delayed because of challenges for Inspire with recruiting staff. However the facility is open and a patient from SEHSCT has moved into their new home. Progress is being made on the resettlement of an individual from MAH who is due to move in October subject to safe staffing levels being in place. Petra noted that there are significant staff pressures regionally with nurses and social care staff; a number of the placements require 2:1 care at all times and a high level of staffing is required.
53. Petra also pointed out that a NHSCT resettlement to Positive Futures took place in July. Máire noted that the July resettlement is not reflected in the current dashboard, but should be updated in the next report.
54. Máire asked members to recall that a briefing paper in relation to the psychology service supporting Muckamore was provided to the last MDAG and the Trust have advised that efforts to recruit into the psychology team are ongoing.
55. Máire stressed that while we are aware that current nurse staffing levels, with the combination of substantive, long-term agency and bank nursing staff are considered to provide a safe level of care; staffing levels remain a fundamental vulnerability. The Trust have asked for a meeting with the Department, RQIA and HSCB to discuss this further; this has been arranged for 08th September.
56. Máire noted that Belfast Trust has highlighted the proposed opening of three in-patient beds in Holywell Hospital and noted that there have been no inpatients admitted to Muckamore since December 2019. Máire asked Petra for an update on the proposed ward in Holywell Hospital. Petra advised that they are working to get the beds open as soon as possible. One bed has been

opened on a temporary basis due to a crisis. The plan is to close this again and reopen it when all works were completed and staffing in place to enable the safe opening and running of the ward. She further advised that the Trust was progressing with recruitment of staff for the new ward and admissions would focus on a South Eastern and Northern Trust partnership.

57. Brigene McNeilly asked if there were currently any beds available in Cherryhill. Gillian Traub advised that the facility is currently in use. There is a plan to move two patients of Muckamore Abbey Hospital into the two remaining places in Cherryhill once staffing and CCTV issues have been resolved. Gillian was not sure of the exact number of patients in Cherryhill currently, but agreed to find out and share with members.

AP3: Gillian Traub to share exact number of current patients currently in Cherryhill and the number the facility will house. (Action: Belfast Trust)

Agenda Item 10 – AOB

58. Máire Redmond advised that following the June MDAG the Belfast Trust circulated minutes of the meeting to the relatives of current in-patients. It had been queried why the minutes are not circulated to relatives of all current and former patients. Máire noted that not all relatives inform the Trust when their contact details such as home address or e-mail address change and as such this would not be possible. She advised that a previous exercise to contact all relatives of current and former patients to ask them to engage with the public inquiry had resulted in a large volume of letters being returned 'not known' at this address. Máire advised that minutes from meetings are published on the Department of Health's website.

59. Gillian Traub noted that an open, honest and transparent approach is best and that experience has also shown that some families do not wish to be provided with information. She suggested that the Trust write to all current and former families where contact details are held on their database advising that the MDAG meetings take place and minutes from these are published. A link to

these would be provided that would allow families to access them. Information from the meetings would be provided to current families going forward.

60. Sean added that the Inquiry would also give ongoing open channels of communication with families.

AP4: Belfast Trust to contact families of former and current in-patients to advise them that minutes of MDAG meetings are published on the Department's website and also to provide a link to these. (Action: Belfast Trust)

61. Máire advised that it was noted at the MDAG meeting in April that the Department would develop a risk register that would be brought to a future meeting. Maire confirmed that work is ongoing with professional colleagues and Internal Audit in the Department and a draft will be shared with the Trust in advance of being brought to MDAG to consider.

AP5: Department to share draft Risk Register with Belfast Trust, in advance of bringing to MDAG. (Action: DoH)

Agenda Item 11 – Date of next meeting

62. The next meeting is scheduled for Wednesday 27th October at 2pm.

Summary of Action Points

Ref.	Action	Responsible	Update	Open/ closed
25/08/AP1	Letter to be drafted and sent to Chief Executive of Southern Trust re lack of representative at MDAG meetings.	DoH		
25/08/AP2	The provision of a Social Worker at MAH for Dawn Jones to be confirmed.	DoH		
25/08/AP3	Gillian Traub to share exact number of current	Belfast Trust		

MDAG/XX/21

Ref.	Action	Responsible	Update	Open/ closed
	patients currently in Cherryhill.			
25/08/AP4	Belfast Trust to contact previous and current families to provide them with information on MDAG meetings and provide link to published minutes on Department's website.	Belfast Trust		
25/08/AP5	Department to share draft Risk Register with Belfast Trust, in advance of bringing to MDAG.	DoH		

eMuckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 22 December 2021****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Seán Holland	DoH (Chair)	Karen O'Brien	Western Trust
Linda Kelly	DoH	Rodney Morton	PHA
Mark McGuicken	DoH	Deirdre McNamee	PHA
Máire Redmond	DoH	Gavin Davidson	QUB
Siobhan Rogan	DoH	Mandy Irvine	NI British Psychological Society
Aine Morrison	DoH	Aidan McCarry	Family rep
Ian McMaster	DoH	Vivian McConvey	PCC
Darren McCaw	DoH		
Teri Gourley	DoH (Note)		
Brendan Whittle	HSCB		
Lorna Conn	HSCB		
Moirá Kearney	Belfast Trust		
Brenda Creaney	Belfast Trust		
Carol Diffin	Belfast Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Margaret McNally	Family rep		
Margaret O'Kane	South Eastern Trust		
Petra Corr	Northern Trust		
Carina Boyle	Western Trust		
Dr Maria O'Kane	Southern Trust		
Emer Hopkins	RQIA		
Lynn Long	RQIA		
Grainne Close	Mencap		
Meadhbha Monaghan	PCC		
Bria Mongan (for agenda item 4)			
Ian Sutherland (for agenda item 4)			

Agenda Item 1 - Welcome/Introductions/Apologies

1. Seán Holland welcomed attendees, and highlighted that the meeting for October 2021 was cancelled due to a number of apologies. The Department tried to reschedule this meeting but it was not possible to get a suitable date.

2. Seán Holland introduced Mark McGuicken who has taken over the role of Mark Lee, as Director of Disability and Older People in the Department and Linda Kelly, interim Chief Nursing Officer (CNO) to the group. He advised that normally the CNO would co-chair the meeting, but as this was Linda Kelly's first meeting, this would not be the case.
3. Seán Holland noted apologies received.

Agenda Item 2 – Minute of Previous Meeting

4. Seán Holland noted that the draft minutes of the previous meeting held on 25 August were circulated to members on 2 September. Following receipt of a number of comments from members, the draft minutes were amended and published on the Department's website as an agreed record of the meeting. There were no further comments on the minutes.

Agenda Item 3 - Update on Action Points – S Holland

5. Seán Holland provided an update on the open action points arising from previous meetings of the Group. He advised 25/08/AP1 had been actioned, the letter to the Southern Trust had been sent and this action was now closed.
6. In relation to 25/08/AP2, this had been raised with the Belfast Trust and given workforce pressures within social work there is not an individual social worker assigned to all wards. If a patient requires a social worker, cover is available across site. Seán Holland advised Dawn Jones if she would like to pursue this further, he was happy to do so offline.
7. He went on to note that 25/08/AP3 had been actioned and is now closed. The number of patients currently in Cherryhill had been provided by Moira Kearney, with an occupancy of six and two further planned resettlements to the site.
8. Seán Holland invited Moira Kearney to provide an update in relation to 25/08/AP4 and she advised that the Belfast Trust had written to families in late summer to share a link with them on how to access the minutes to MDAG meetings. If anyone faced any difficulties with this, the Trust would be happy to

provide a hard copy. She had asked for requests by 6 December and had received no further correspondence. Action now closed.

9. In relation to 25/08/AP5, Seán Holland advised that work has been continuing on the development of an MDAG risk register. Following engagement with Departmental professional colleagues and Internal Audit, a revised template was shared with the HSCB and BHSCT in late October for their consideration and any comments. Responses have now been received and are currently being considered by the Department. It is hoped to circulate a draft Risk Register to Members for the next meeting.
10. Seán Holland asked Moira Kearney to provide an update on 30/06/AP7. Moira Kearney noted that questionnaires are issued to families by the Belfast Trust to provide feedback on those who have been affected by safeguarding at Muckamore Abbey Hospital (MAH). They are currently investigating ways to refine their approach and further work on this is due to commence in January 2022.
11. Seán Holland provided an update on 28/04/AP6 and advised that a meeting to discuss the future onsite service model, was held with the Belfast Trust on 11 November. He advised that there was further work to be done, including further engagement with the Belfast Trust and he would provide an update at the next meeting.
12. Seán Holland advised in relation to 28/04/AP7, that Bria Mongan and Ian Sutherland were attending the meeting today to provide an overview of their work on resettlement.

Agenda Item 4 – Resettlement

13. Seán Holland welcomed Bria Mongan and Ian Sutherland to the meeting and asked them to provide a verbal update to the group on their work to date.
14. Bria Mongan gave an overview of both her and Ian Sutherland's backgrounds and noted their lengthy experience in Learning Disability. She advised that both she and Ian had been commissioned to complete a review on resettlement and

referred members to the Terms of Reference (ToR) for the review which had been included with the papers circulated for this meeting.

15. She highlighted that this first phase of work was primarily fact finding and advised that meetings had taken place with patients and staff at MAH, the senior teams of all 5 Trusts and the Northern Ireland Housing Executive (NIHE). Further meetings are due to take place with 3rd sector, independent and voluntary organisations in the New Year.
16. Bria Mongan provided an overview to members on a number of schemes that are currently in progress and discussed a number of resettlements that are due to take place over the next number of months. She also provided information on a number of at risk schemes, where there are no concrete plans for these going forward and highlighted that there were no resettlement plans for four individuals.
17. Bria Mongan advised that the second part of resettlement work that she and Ian will undertake will be to analyse the information they have received and provide a number of recommendations. She went on to highlight enthusiasm displayed by the Trusts and their teams but acknowledged that there was also signs of inertia and drift. She emphasised the moral and strategic imperative to push resettlement forward. Seán Holland also highlighted the legal imperative to expedite resettlement as recent judicial reviews had found the delays unacceptable.
18. Ian Sutherland stressed the importance for a whole system approach across Trusts to expedite the resettlement process as whilst he is hearing about collaboration from the Trusts he is not seeing sufficient evidence of this in practice.
19. He stressed that whilst the resettlement process has been slow over the past year as reflected in the dashboard, there will be movement in the next 12 months, with up to a quarter of patients due to be resettled. Going forward Bria Mongan and Ian Sutherland plan to engage with families in coming months.

20. Ian Sutherland highlighted the issues across the social care workforce and the risk this poses for the programme. He stressed that there needs to be improvement in the capacity and capability of the workforce.
21. Seán Holland noted that the long delays in resettlement are unacceptable and the Department are keen to collaborate with the Trusts and see actions being delivered regionally. He added that there needs to be a whole system approach both in resettlement and in bed management for in-patient acute beds. Where there are no resettlement plans for patients, the Department will seek to raise this with Trust Chief Executives, as this should be at the front and centre of every Trust.
22. Siobhan Rogan advised that there is currently an Extra Contractual Referral (ECR) being considered for a patient ready to be discharged and asked if there was any update on the situation, as more localised solutions are preferred. Seán Holland noted that he was keen not to discuss individual cases. Brigene McNeilly asked for clarity on what an ECR was and Seán Holland advised that it is when there is a lack of service within Northern Ireland and the needs of a patient cannot be met, therefore a service is purchased outside of the country. He stressed that this is never a good option for the patient or family.
23. Carina Boyle noted that the Western Trust are also facing challenges with resettlement and agreed that collaboration has to be real and it is an interagency responsibility and asked how the Trusts would fix the situation. Ian Sutherland advised that resettlement needs to take place on regional basis, and noted the good practice he has seen in South England, where authorities have collaborated. He did emphasise that there is evidence of good provision in Northern Ireland, however there are gaps for those with very complex needs. Brigene McNeilly stressed the importance of keeping patients close to their families. Seán Holland reassured her that this approach was for emergency situations only. Margaret McNally reiterated what Brigene McNeilly said, and highlighted the importance of getting the balance right in relation to the distance families have to travel.

24. Bria Mongan highlighted the helpful discussions they had held with the Housing Executive, but added that there had been a lot of change in Senior Management roles within the trusts and therefore it would be helpful for refreshment in the arrangements of progression with housing partners. There are plans for a workshop to provide providers with this information in the New Year.
25. Seán Holland advised that the Department are keen to move to a regional approach for learning disability services to include resettlement and acute bed management arrangements to align with mental health bed management. Brendan Whittle highlighted the significant progress in mental health bed management and that he was also keen to work towards a whole system approach for learning disability.
26. Seán Holland thanked Bria Mongan and Ian Sutherland for their overview and noted that he looked forward to early sightings of their recommendations.

Agenda Item 5 – Public Inquiry Update

27. Seán Holland advised that La'Verne Montgomery usually made herself available to provide an update on the Public Inquiry; however she was not available for the meeting today. He invited Máire Redmond to provide an update.
28. Máire Redmond advised that the Inquiry has made significant progress since it was officially set up on 11 October 2021 and it will be moving into premises in the Corn Exchange in the Cathedral Quarter of Belfast January 2022. She noted that in response to the drive to encourage people with experiences of MAH to contact the Inquiry team, it has now received around 80 contact forms.
29. She further advised that the first phase of the Inquiry will focus upon evidence from those with experience relating to the care of patients within Muckamore Abbey Hospital from the perspective of the patients and that this is likely to be provided by patients, ex-patients, their relatives and carers. The second phase of the Inquiry will focus upon a smaller group of people either with experience of caring for those within the hospital or with knowledge of how the hospital

worked but not necessarily with direct experience themselves. This might include, nurses and other staff working at Muckamore Abbey Hospital as well as those with responsibilities for resettlement or the transportation of patients to and from Muckamore Abbey Hospital. The Panel expects to begin hearing witnesses from phases one and two in spring of 2022.

30. Máire Redmond also advised that the Inquiry has issued voluntary document requests to twenty-one potential document providers, including the Department. This initial request has been a scoping exercise to establish whether those contacted have material relevant to the ToR and the categories of such material, as well as the volume of it. The Inquiry team is currently reviewing the correspondence to follow up with more specific document requests. She highlighted that Seán Holland had issued a number of letters to the Department to ask officials not to destroy or delete any records that may be of relevance.

31. Seán Holland thanked Máire Redmond and noted we will aim to routinely have an update on the Inquiry at each meeting.

Agenda item 6 – Safeguarding at MAH

Unannounced Inspection at Muckamore feedback – Emer Hopkins

32. Seán Holland invited Emer Hopkins to provide an update on the RQIA inspection. Emer Hopkins noted that the report of the RQIA Inspection that took place from 28 July – 19 August 2021 was published on the RQIA website in December and advised that the Inspection team have met with family members, including the carers group to discuss the report.

33. She advised that the Inspection focused on a number of areas including safeguarding and a number of recommendations have been made including the Trust being recommended to improve interactions with family members and improved communication between the Adult Safeguarding Group (ASG) and other staff on site. Emer Hopkins highlighted the persistent challenges

with the staffing levels, stability and experience of the ASG team and that the team are trying to address this. She also advised that the Inspection highlighted a picture at a point in time and that the picture may have changed.

34. Emer Hopkins also emphasised that the RQIA are happy to discuss and engage with anyone over the Inspection findings. The Belfast Trust agreed to provide a paper copy of the report to individuals who wished to read it in this format.

AP1: Belfast Trust to provide a paper copy of the RQIA Inspection report to those family members that request this (Belfast Trust)

35. Emer Hopkins also provided an overview on the role of RQIA and highlighted the role they have in the Safeguarding Governance Group. She advised that the RQIA not only fulfil their role through Inspections but also on an ongoing basis, for example the RQIA plan to meet with Belfast Trust in the New Year and are keen to be open to address challenges.

Update on actions arising from DOH commissioned audit – BHSC

36. Seán Holland invited Carol Diffin to provide an update on the actions arising from the DoH commissioned independent adult safeguarding audit. She advised that some actions from the audit were completed and others were ongoing.
37. Carol Diffin provided an overview of the safeguarding challenges and advised that she has had follow up conversations with Aine Morrison to discuss thresholds. She advised that there needs to be consistency with safeguarding reporting and that she is currently working with the DAPOs to address this. In addition she advised that there is ongoing work and training with line management and staff, including the ASG team to ensure a clearer understanding of roles and responsibilities.
38. Aine Morrison agreed that some progress had been made and that useful conversations on safeguarding had taken place; in particular around practice and procedures, structures and the role of the DAPO. She also noted that 2 out

of 3 urgent actions from the DOH commissioned safeguarding audit had not been completed. She outlined a number of actions that need addressed, including the quality of the DAPOs response to the safeguarding referral, inappropriate behaviours of some staff and the lack of relevant experience, skills and value base of some members of the ASG team. Aine Morrison advised that the Department is keen to work with the Trust on these issues and highlighted the need for the Belfast Trust to develop an action plan to address all the recommendations in the DOH commissioned audit.

AP2 DOH to write to Belfast Trust seeking an action plan to address the recommendations from the independent safeguarding audit. (DoH)

39. Carol Diffin advised that when there has been more than one referral per patient, the safeguarding paperwork did not lend itself to this. The DAPO takes account of this situation in their practice; however it is not noted in the paperwork.

40. Aine Morrison noted that the Department had sought further information on the action points arising from the safeguarding audit. Brenda Creaney advised that she had not seen these queries and asked for them to be sent to her. Brendan Whittle asked for himself and Lorna Conn to be copied into this correspondence.

AP3: Department to follow up in writing to Belfast Trust with queries arising from update on safeguarding audit action points. HSCB to be copied into correspondence. (DoH/Belfast Trust)

Agenda Item 7 – MAH HSC Action Plan – Exception Report (MDAG 19/21)

41. Seán Holland invited Darren McCaw to update the group on progress with delivery of the Action Plan. Darren McCaw provided an update on the paper circulated in advance of the cancelled October meeting and advised that there had been no change to the number of completed actions, these remained at

25. He noted that two actions had moved beyond their target date and as a result moved from amber to red, there are now 18 red rated actions.

42. Darren McCaw also provided an update on the Action Plan for December and advised that there had been no changes reported by action owners on any of the ratings contained within the Action Plan. He advised that there are 18 actions rated as red, 11 actions rated amber and 25 green actions.

Agenda Item 8– MAH Action Plan - Progress update – Actions rated red

43. Seán Holland confirmed that updates on three actions would be provided at today's meeting and invited Siobhan Rogan to provide an update on A30.

44. Siobhan Rogan advised members that whilst some stakeholder engagement had taken place, engagement with individuals with a Learning Disability had not been able to take place as desired due to the Covid pandemic. The team are currently analysing the information they have received to date to theme the responses and, in due course will produce a report with recommendations.

45. Darren McCaw was invited to provide an update on A37 and A46. He advised that A37 was now rated as red as the target date of September 2021 had not been met. He noted that the Learning Disability Multi-Disciplinary Team Workforce Review would ideally have been considered as part of the outworkings of the Learning Disability Service Model but as this has not yet been agreed it was felt that phase 1 of this work i.e. to establish a current baseline of the workforce could commence. He advised that Pauline Cummings, who has recently retired from her post as Learning Disability Assistant Director in the Northern Trust was appointed as Project Co-ordinator for the Review on 18 October 2021.

46. Darren McCaw further advised that a bid for future funding to enable the Review to continue through the 2022/23 financial year has been made by the Department.

47. Darren McCaw informed members that the draft ToR had been updated and will be considered at the first meeting of the project group planned for January 2022. This will be chaired by Director of Disability and Older People's Directorate, Mark McGuicken. The Department are also arranging a meeting with the PCC for the New Year to explore the possible assistance of the PCC on engagement with service users/families/carers to provide their experience and input into the work of the Group.

48. In respect of A46; a plan for the future configuration of services to be delivered on the Muckamore Abbey Hospital site; Darren McCaw noted that Belfast Trust were asked in September 2020 to explore options for the development of a resettlement option on the Muckamore Abbey Hospital Site. A meeting to discuss next steps for this took place between the Department and the Belfast Trust on 11 November. At this meeting Seán Holland advised that he would be open to considering any options that were brought forward and committed to providing additional clarity on what is expected in relation to this proposed development. This was initially due to be discussed further at a meeting with the Trust in December which unfortunately had to be cancelled; a further meeting will be arranged for early in the New Year. Darren McCaw advised that the Department continue to engage with the Health and Social Care Board and Trusts on ways to enhance current resettlement processes, including the work Bria Mongan and Ian Sutherland are taking forward.

Agenda item 9 – Highlight Report and Dashboard (MDAG 20/21)

49. Máire Redmond highlighted that there has been one resettlement of a patient from MAH since the June MDAG meeting. She emphasised the difficulties with the planned resettlements and the ongoing issues with recruitment of staff.

50. Máire Redmond advised that she would not go into great detail on the highlight report, as this was circulated in advance of the meeting. She referenced paragraph 4.3 of the report which highlights that funding has been secured to support the opening of 3 Learning Disability in-patient beds in

Holywell. She asked Petra Corr for an update as to the planned opening of this unit.

51. Petra Corr advised that there had been preliminary plans for this unit to open earlier in the year however after discussions with RQIA they advised that the vacant ward in Holywell that was identified for this purpose did not meet the standards for an inpatient LD service and that capital work was required on the site. The process is currently in the design phase and work on the unit is due to begin in January 2022.

52. Petra Corr also provided an overview on the current position for the recruitment of staff for the unit; she advised that this is an ongoing process with further interviews due to take place in December and the New Year. She also noted that while timescales are dependent on a number of factors it is hoped that the unit will open in June 2022.

53. Máire Redmond highlighted the concerns previously raised by Belfast Trust of the new unit attracting staff from MAH, and stressed the already fragile staffing situation in MAH. Brenda Creaney advised that conversations about staffing would need to take place between the Belfast Trust and Northern Trust outside of the meeting.

AP4 Belfast and Northern Trust to discuss potential negotiations on notice period for staff transferring between Trust Hospitals (Belfast/Northern Trust)

54. Máire Redmond highlighted that from 30 September there had been three new admissions to MAH, with one patient successfully discharged. She stressed the challenging situation that the hospital is facing and noted that the Trust has advised that there can be no further admissions to the hospital, unless there are further discharges. She added that the Belfast Trust are managing the situation and are keeping the Department informed of the fluid situation.

55. Brigene McNeilly raised concerns over the current staffing situation in MAH, and asked for an update on the current COVID outbreak within one of the

wards and for reassurance that the hospital was providing a safe staffing level.

56. Moira Kearney advised that the Belfast Trust share the same concerns on staffing. She informed the Group that Senior Management meet with staff twice a day to monitor the staffing levels. She further advised that the Trust are reviewing the potential to redeploy appropriately trained staff into the wards, staff being asked to cover additional shifts and seeking additional staff from bank and agency staff and calling out to retired staff. She also advised of the significant vulnerabilities in the community services that is adding to the complexity of this problem.

57. Brigene McNeilly also expressed her concern over injuries being sustained by patients, due to behaviours escalating, because they are being asked to isolate due to the current Covid outbreak. Moira Kearney advised that the Trust are following PHA guidelines on infection and control of COVID, and assured the Group that they are monitoring the situation hour by hour.

58. Seán Holland noted that it is an upsetting situation and highlighted that the Belfast Trust have been keeping the Department well informed of the situation and are looking at other Trusts for support. He emphasised that this is a situation that is being replicated across a number of services and will continue to do so over the next number of weeks, but they will maintain the best service they can.

Agenda Item 10 – AOB

59. None raised.

Date of Next Meeting

60. The next meeting is scheduled for Wednesday 23 February at 2pm.

MDAG/21/21

Summary of Action Points

Ref.	Action	Responsible	Update	Open/ closed
22/12/AP1	Provide a paper copy of the RQIA Inspection report to those family members that request this.	Belfast Trust		
22/12/AP2	DoH to write to Belfast Trust seeking an action plan to address the recommendations from the independent safeguarding audit.	DoH		
22/12/AP3	Department to follow up in writing to Belfast Trust with queries arising from update on safeguarding audit action points. HSCB to be copied into correspondence.	DoH/Belfast Trust		
22/12/AP4	Belfast and Northern Trust to discuss potential negotiations on notice period for staff transferring between Trust Hospitals.	Belfast/Northern Trust		

**MEMBER OF THE MUCKAMORE DEPARTMENTAL ASSURANCE GROUP
(MDAG)**

DECLARATION OF PREVIOUS or CURRENT INVOLVEMENT AT MUCKAMORE

1. The Department of Health is committed to protecting the integrity of the work of the Muckamore Departmental Assurance Group (MDAG) and protecting those involved by ensuring that, where a conflict of interest exists, it is formally recorded.
2. Each member of the Group must read and sign the declaration below declaring, if applicable, any previous or current involvement with Muckamore which may be seen as a potential conflict of interest. The form should then be provided in hard copy or scanned and emailed to darren.mccaw@health-ni.gov.uk. The signed declaration will be retained on the Department of Health's electronic document management system.

Have you or your immediate family, any business, financial, membership or other professional involvement or personal connection which might be perceived to be seen as in conflict with your role as a member of the Muckamore Departmental Assurance Group?

YES/NO

Please delete as appropriate

If you answered **yes**, please provide details below:

If I become aware of any such conflict or potential conflict of interest in respect of my role as a member of MDAG, I will disclose them immediately to the Department of Health.

Signed:  _____

Printed: Mark McGuicken

Date: 1/2/22

The MDAG Secretariat shall maintain a record of all declarations of conflicts of interest and shall keep the MDAG co-Chairs informed of such declarations. A declaration of a conflict of interest does not necessarily mean that you cannot commence work with or continue your involvement in MDAG but in order to ensure transparency it's important that it is recorded.

If any conflict of interest should arise during the lifetime of MDAG, you are obliged to bring this to the attention of the MDAG Secretariat.

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 23 February 2022****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Seán Holland	DoH (Chair)	Mark McGuicken	DoH
Linda Kelly	DoH	Rodney Morton	PHA
Máire Redmond	DoH	Gavin Davidson	QUB
Siobhan Rogan	DoH	Aidan McCarry	Family rep
Aine Morrison	DoH	Margaret McNally	Family rep
Ian McMaster	DoH	Grainne Close	Mencap
Darren McCaw	DoH	Darren Strawbridge	DoH
Teri Gourley	DoH (Note)	Brenda Creaney	BHSCT
Brendan Whittle	HSCB		
Lorna Conn	HSCB		
Catherine Cassidy	HSCB		
Deirdre McNamee	PHA		
Moira Kearney	Belfast Trust		
Paula Forrest	Belfast Trust		
Carol Diffin	Belfast Trust		
Margaret O'Kane	South Eastern Trust		
Petra Corr	Northern Trust		
Karen O'Brien	Western Trust		
Heather Trouton	Southern Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Emer Hopkins	RQIA		
Vivian McConvey	PCC		
Mandy Irvine	NI British Psychological Society		
Kerry Loveland-Morrison (for agenda item 4)	DoH		
Bria Mongan (for agenda item 5)	HSCB		
Ian Sutherland (for agenda item 5)	HSCB		
Gillian Seeds (for agenda item 6)	DoH		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Seán Holland welcomed attendees and introduced Heather Trouton to her first MDAG meeting in her role as the new interim Director of Mental Health and Learning Disability in the Southern Trust.
2. Seán Holland noted apologies received from Mark McGuicken, Rodney Morton, Gavin Davidson, Aidan McCarry, Margaret McNally, Grainne Close, Darren Strawbridge and Brenda Creaney.

Agenda Item 2 – Minute of Previous Meeting

3. Seán Holland noted that the draft minutes of the previous meeting held on 22 December were circulated to members on 7 January. Following receipt of one suggested amendment, the draft minutes were published on the Department's website on 20 January as an agreed record of the meeting. There were no further comments on the minutes.

Agenda Item 3 - Update on Action Points – S Holland

4. Seán Holland provided an update on the open action points arising from previous meetings of the Group. In relation to 22/12/AP1, the Belfast Trust advised that there were no requests for a paper copy of the report as of last week, however an opportunity for carers to request a copy of the report was also provided through the December carers forum.
5. Seán Holland advised that in relation to 22/12/AP2, he wrote to Cathy Jack on 13 January, and on 16 February he received an action plan from the Belfast Trust that is under consideration by his colleagues in the Department. He advised that a further safeguarding action, 30/06/AP7, was still ongoing and the Department have been liaising with the Belfast Trust in relation to this matter. He advised that an update on 22/12/AP3 would be provided under the Safeguarding agenda item by Aine Morrison.
6. It was noted that 22/12/AP4 was still ongoing, the timeline for the Northern Trust unit has been pushed back, however the Belfast and Northern Trusts are in discussion on how staff transfers will be managed.

7. Seán Holland advised that, in relation to 25/08/AP5, the Department are still working on the draft risk register and hope to circulate for the next meeting.
8. Seán Holland outlined that there has been extensive engagement between the Department, HSCB and Belfast Trust to progress 28/04/AP6. The Belfast Trust are currently carrying out a feasibility study of the on-site proposal which is now due to complete at the end of March 2022.
9. Moira Kearney provided an update for 30/6/AP7. Work on this has been delayed due to staff pressures and an update on this will be provided at the next meeting.
10. Seán Holland noted that an update in relation to 28/04/AP7 would be provided by Ian Sutherland and Bria Mongan at agenda item 5.

Agenda Item 6 – Public Inquiry Update

11. Seán Holland advised Members that he was going to take agenda item 6 out of sequence to enable Gillian Seeds to provide her update on the Public Inquiry and welcomed Gillian to the meeting.
12. Gillian noted that her update was timely as the Chair of the Inquiry just released an update statement. She agreed to send the Inquiry update to the Muckamore Abbey Review Team following the meeting that it could then be circulated to MDAG members.

AP1: Public Inquiry update statement to be circulated to members. (DoH)

13. Gillian advised that the Inquiry team have now moved into their offices at Corn Exchange and have leased two floors. One floor will provide office space for the Inquiry team and another floor will provide suitable space for a hearing room, as well as additional seating to any members of the public and press who wish to watch the proceedings over a live feed. There are a number of further smaller rooms to accommodate Core Participants, however it is

unlikely that all Core Participants can be provided with a private room on every hearing day. Arrangements for the use of such rooms will be circulated in due course.

14. Gillian provided an overview of the Inquiry team and highlighted that the solicitor to the Inquiry had now changed. Lorraine Keown from Cleaver Fulton Rankin has now taken on this role, replacing Joan MacElhatton.
15. Gillian also provided information in relation to the Document Management System; 'Box' and outlined how this would work. She advised that Core Participants would be given advance access to relevant material including statements as they become available. The system incorporates a number of features to ensure that confidentiality is respected and preserved.
16. She went on to advise that over ninety-five individuals have now contacted the Inquiry to offer Witness Statements. Introductory letters have been sent out to all those who have contacted the Inquiry to provide information and the process of taking statements from the first phase of witnesses will be commencing shortly. All of the statement takers have been provided with vulnerable witness training from Professor Penny Cooper. Counsel will also receive training specific to their role with witnesses. The Inquiry has also engaged a number of intermediaries who will be available to assist in the taking of statements where necessary, and it has also engaged a number of counsellors who are available to provide assistance to anyone affected by the work of the Inquiry, whether through the process of the taking of statements, or later in the proceedings during hearings.
17. Gillian provided information in respect of Core Participants and outlined that a number of individuals who are either affiliated to Action for Muckamore or to The Society of Parents and Friends of Muckamore have been designated as Core Participants. She also advised that organisations including the Department of Health, RQIA and Belfast Trust have also been designated as Core Participants and there was potential for others to be added further to the agreement of the Chair.

18. Gillian also provided information on document providers and outlined that fifty-eight letters have now been issued to identify those who may hold documents relevant to the Terms of Reference. A number of orders under Section 21 of the Inquiries Act have also been issued requiring the production of documentation to the Inquiry. The Inquiry team is engaging with a number of document providers to discuss the production of the relevant material to the Inquiry.
19. It was also noted that a further virtual engagement session is to be held on 9 March 2022 at 5pm and the Inquiry secretary can be contacted for the details or addition to the session.
20. Gillian also provided an outline of the indicative dates for the sitting of the Inquiry, as contained within the Inquiry Chair's statement, for information.
21. She further advised that the Inquiry are offering appropriate psychological support to individuals involved in the Inquiry. An offer from the Secretary to the Inquiry to attend a future meeting of MDAG to provide detail on the operation of the Inquiry if felt useful was also raised.
22. Brigene McNeilly asked if there are facilities available for carers who want to view and listen to proceedings online from home. Gillian advised that she would go back to the Secretary of the Inquiry to find out if this was part of the contract that has been put in place.

AP2: Public Inquiry Sponsorship team to contact Public Inquiry team to find out if facilities will be put in place to allow proceedings to be viewed online. (DoH)

23. Aine Morrison provided information on the support that will be provided for people with a learning disability and their carers advising that engagement is ongoing with the trusts and HSCB to discuss the systems and processes that need to be put in place

24. She noted that all trusts have been asked for a representative to help take forward this piece of work and asked trusts to make this a priority. Mandy Irvine added that any longer term support would need to be discussed in relation to what each trust can provide and that they have been in touch with the Inquiry secretariat in relation to provisions and requirements. Aine Morrison noted that it would be advantageous for all trusts to use a common protocol.
25. Seán Holland added that meetings with HSCB and the trusts are key, however it is important that carers are consulted to capture their views on what support is needed. Brigene McNeilly agreed and emphasised the importance of ensuring inclusion of those carers who are on the periphery of the Inquiry who may then also need support as details become available throughout the course of the Inquiry. Sean noted the point and highlighted that it was important the system responded to that need.
26. Siobhan Rogan queried whether the communication strategy for the Inquiry would provide detail in Easy Read format etc. to aid understanding. Gillian Seeds agreed to raise with the Inquiry Secretary to get assurance that the strategy would cover this. She also advised that key easy to read documents are available on the Inquiry website.

AP3: Follow up with Inquiry Secretary to get assurance that their communication strategy for the Inquiry would provide detail in Easy Read format (DoH)

Agenda Item 4 – Adult Safeguarding Bill

27. Seán Holland welcomed Kerry Loveland-Morrison to provide an overview on the work she is taking forward on the Adult Safeguarding Bill. Kerry delivered a presentation to members on this work and provided information on the consultation process, service user input and outcomes of the consultation. She went on to outline the next steps for the Bill and advised that work was

continuing on the drafting of the Bill with the aim of introducing the Bill early in the next Assembly mandate.

28. She also advised that there will be a second consultation carried out for the Statutory Guidance and the Department will continue to engage with key stakeholders.

29. Ian Sutherland asked if the PSNI have been engaged in the process given the key role that they have in the execution of the outlined functions. Kerry Loveland-Morrison advised that the PSNI are very engaged through the Transformation Board and are involved at a policy development level, particularly in the financial and powers of entry processes.

30. Seán Holland advised that Kerry Loveland-Morrison would provide a further update at a future meeting, when, subject to the views of the new Health Minister, the Bill would be going through the Assembly.

AP4: Adult Protection Bill presentation to be shared with group members (DoH)

Agenda Item 5 – Resettlement

31. Seán Holland welcomed Bria Mongan and Ian Sutherland to the meeting and asked them to provide a verbal update to the group on their work to date.

32. Bria provided information on the three stages of their work. She advised that Phase 1 had been completed and they were currently in Phase 2, which involves engagement with a number of providers including RQIA, PCC, NISCC and ARC and others.

33. She also provided an overview of planned discharges and noted that by the end of the year the number of delayed discharge patients in Muckamore should be reduced to 16. An update was also provided on progress in relation to the three schemes being led by Belfast Trust, Minnowburn, onsite provision and a forensic site. She expressed concern at the degree of focus for a new build for the onsite proposal and noted that the refurbishment of a current building on

the Muckamore site would help to expedite the process. She went on to further advise that there have been three sites identified by a housing provider as potentially suitable for the forensic site.

34. Bria also advised that the Directors from the Belfast, Northern and South-Eastern Trusts held a workshop to discuss resettlement plans and she was due to meet with them on 25 February to discuss the outcome of this and an update would be provided for the next meeting.

35. She further advised that work was now moving to the third stage, to analyse the findings and complete a report including recommendations. Work is also continuing with trusts to review the tracker tool, moving it from performance monitoring to a performance management tool.

36. Brigene McNeilly asked if there were any plans to meet with carers and Bria emphasised the importance of families and carers within this work and advised that they planned to meet with them, including where resettlements had been successful, and were taking guidance from PCC and ARC on this.

37. Ian Sutherland advised that he was concerned that bigger projects were not delivering quickly enough and noted the importance of supply maps and using information on the composition of care that is already there to help inform decision making.

38. He provided a summary of findings on the composition of care in specialist learning disability nursing homes, residential care homes and Supporting People schemes.

39. He noted that although workforce is an issue for some providers, this is variable and tends not to be an issue for local, well established providers. He also noted that trusts continue to be major providers, providing about a third of registered care home places. He advised that the trusts are currently delivering and commissioning care and added that if the trusts were to exit the delivery model, then this might potentially help provide more resilience to the system. Ian

advised that many of these issues have scope to be addressed through a more collaborative model or framework.

40. The need to have regional data on vacancy rates within the system to help aid resettlements was discussed and Ian Sutherland outlined rates in Supporting People schemes as an example, where there is an estimated 10% void rate.
41. Seán Holland noted that the delays in resettlement are unacceptable and that the Department was keen for performance management to be carried out by trusts to ensure any issues or areas of good practice are identified.
42. Brigene McNeilly highlighted that the delays experienced by her family were a stain on the system. Brigene further added that although many providers have a number of places available, the cohort of patients remaining in Muckamore have extremely complex needs and unless these places are suitable for that level of need then they would not be suitable given the more specific requirements needed. Ian Sutherland agreed that places need to be suitable and appropriate, however he suggested that, where trusts are providing support to providers for placements, there may be the potential to clarify with the providers if they would have further scope to provide bespoke placements as required.
43. Sean Holland highlighted the need to look at how commissioning was being carried out if it was repeatedly not delivering what was needed.
44. Petra Corr noted that the engagement and support from Ian Sutherland and Bria Mongan is very well received from the Trusts. She advised that the Belfast, Northern and South Eastern Trusts are in the process of developing a collaborative approach to create solutions to expedite resettlement. Petra agreed to share more detail on this at the next meeting.

AP5: Belfast, Northern and South Eastern Trusts to provide information on their collaborative work to expedite resettlement. (BHSCT, NHSCT, SEHSCT)

45. Karen O'Brien advised that the issues being faced are common across the region, including an issue with the training of staff. She advised the Western Trust are also working with providers to get to a position of bespoke provision being provided in relation to both the placement and staffing. This also includes expansion to cover the wider workforce to ensure they are trained to manage those with complex needs in order to help sustain long term placements. She advised this work needs to take place with providers to ensure this happens and is a focus for them.
46. Bria Mongan advised that part of the resettlement work will involve looking at procurement and commissioning going forward regionally. Seán Holland agreed with the need for a regional approach.
47. Dawn Jones outlined her agreement with Karen O'Brien's comments and further expressed concerns around her engagement with staff in Muckamore Abbey Hospital and in particular improvements required with the resettlement social work team. Dawn advised that the sense of trust has been lost. Seán Holland offered to engage with Dawn Jones separately on these issues.
48. Seán thanked Ian and Bria for their update adding that the focus on data and analysis of that data was long overdue and he looked forward to updates on this work.

Agenda item 7 – Safeguarding at MAH

49. Seán Holland invited Aine Morrison to provide an overview on Safeguarding at MAH.
50. Aine advised that the Department had written to the Belfast Trust in January in relation to a number of issues including delays in putting protection arrangements in place and safeguarding processes. She advised that a response from the Belfast Trust to the issues raised has recently been received and the Department are considering this.

51. Aine further advised that the Department has also had a number of recent meetings with the Belfast Trust in relation to safeguarding policy and procedures and the work has included the mapping of Trust safeguarding practice against policy. She also noted that there has been significant improvement in the involvement of the DAPO, however further changes are needed to ensure the DAPO is leading on safeguarding. Further meetings are planned to continue this work.
52. Carol Diffin agreed that recent meetings have been constructive and confirmed that they have focussed on historical investigation processes, which are evolving and being guided by the PSNI. Carol Diffin confirmed that current investigations do follow prescribed policy and procedures.
53. Dawn Jones noted that whilst the historical safeguarding issues are important there are also issues with current safeguarding arrangements in Muckamore Abbey Hospital. Dawn emphasised the importance of ensuring linkages are made between historic and current investigations. Carol Diffin agreed and advised that they are being managed under two separate processes, whilst trying to make sure they both link up. Brigene McNeilly expressed concerns with the ongoing investigation process, citing her own experience, adding it feels like no answers are being provided and the ongoing delay has been horrendous. Dawn voiced her concerns after a staff member from the Belfast Trust told her that her standards were too high for her son and that he was more difficult to manage than most patients. It was agreed that Moira Kearney and Carol Diffin would follow up with both Dawn and Brigene in relation to these issues.

AP6: Belfast Trust to liaise with family reps in relation to ongoing concerns in Muckamore Abbey Hospital. (BHSCT)

Agenda Item 8 - BHSCT Advocacy Review

54. Moira Kearney provided an overview of the work of the Advocacy Review to date. She advised that the Terms of Reference (ToR) for this had been drafted and a meeting with parents and carers was due to take place this week. Belfast

Trust are continuing to work with ARC and TILI and will be working to establish focus groups.

55. Vivian McConvey advised Moira that she had not received a copy of the ToR and asked if it could be sent to the PCC. Moira assured her that this had been sent to PCC but that she would follow up and send the ToR directly to her.

Agenda Item 9 – MAH HSC Action Plan – Exception Report (MDAG 03/22)

56. Seán Holland invited Teri Gourley to update the group in relation to progress with delivery of the Action Plan. Teri Gourley provided an update on the paper circulated in advance of the meeting and advised that updates on open actions had been provided by their owners and are detailed in the updated Action Plan. Teri advised that the Departmental Internal Audit unit had recommended that Responsible Officers should be assigned to each action within the Action Plan, and that those actions rated as red should be examined and updated with a new realistic timescale. Revised timescales are still required from the Department, Belfast Trust and HSCB and assigned Responsible Officers for actions are still outstanding from the Belfast Trust. It is planned to have this completed by the next meeting.

57. Teri advised that verbal updates on three actions would be provided today on A5, A26 and A40.

58. Teri noted that one action, A32, had moved beyond its target date and as a result had moved from amber to red. Another action, A13, had moved from red to green as work on this was now complete. She summarised by noting that there are now 18 red, 10 amber and 26 green actions.

Agenda Item 10 – MAH Action Plan - Progress update – Actions rated red

59. Máire Redmond was invited to provide an update on A5. She outlined that this action relates to the Learning Disability Service Model that is currently with the Department, after being submitted by the Board in July last year and a presentation by the HSCB to the Department in October. She advised that work on this had been on hold due to a lack of resources, however additional

resources have been found and work is now progressing. This should be completed by end of March 2022.

60. Moira Kearney was invited to provide an update on A26. She advised that an information paper in the form of a newsletter had been circulated to families and staff. This newsletter provides information on the services within Muckamore. It is planned that this would be issued on a quarterly basis. Moira was happy for it be circulated to members also.

AP7: Muckamore Abbey Hospital Newsletter to be issued to Group members after the meeting. (DoH)

61. Lorna Conn provided an update in relation to A40 relating to the appointment of a Regional Learning Disability Bed Manager. She advised that there had been a problem with their HRPTS system that prevented the advertised post from being visible on the system, however after a software fix this has been fixed. The advert went live on 11 February and is due to close on 25 February.

62. Lorna further advised that in relation to the updated timescales and Responsible Owners for the red actions in Annex A, the HSCB are happy to engage in the process. She noted that this is not a straightforward process as some actions have a series of owners and therefore it will take time to ensure this is completed correctly.

Agenda item 11 – Highlight Report and Dashboard (MDAG 20/21)

63. Máire Redmond advised that the highlight report and dashboard were circulated in advance of the meeting and highlighted that as per the update provided by Bria and Ian under agenda item 5 that a number of discharges are due by the end of the year to Mallusk and Braefields. It is therefore expected that the number of patients remaining in Muckamore will reduce to 16 at the end of 2022.

64. Máire also noted the ongoing issues with the staffing situation in the hospital and advised that this is being monitored daily by Belfast Trust. She highlighted that the planned discharges should help improve the workforce and staffing issues. She highlighted the ongoing discussions between the Department, HSCB, RQIA, Belfast, Northern and South Eastern Trusts to identify measures to support Belfast Trust due to the fragile staffing situation and expedite some discharges from the hospital without damaging the risk of placement success.

65. Máire referred to page 2 of the highlight report which advised that PSNI and ASG teams are still viewing the CCTV footage and that the level of CCTV footage to be viewed can fluctuate. She invited Heather Trouton to provide information in respect of the recent pilot of bodycams by staff in the Southern Trust.

66. Heather Trouton advised that the pilot is being rolled out on the mental health side, in Bluestone hospital. She noted that incidents of abuse had fallen by half since the pilot started. She advised that the pilot was due to end in March 2022, however it will more than likely be rolled out further across other areas in the Trust.

67. Seán Holland asked Heather to keep the Department updated on the outcomes on the pilot.

AP8: Provide update to Department on the outcomes of the pilot bodycam scheme. (SHSCT)

68. Dawn Jones added that she felt the body cams would be useful and should include use in bedrooms. Brigene McNeilly agreed with Dawn and added that although the body cams will not prevent abuse, it will provide evidence for use in any investigations. It would be a safeguard for those that are vulnerable and would provide safeguards for staff that are doing their job well. Brigene McNeilly referenced previous research in relation to the use of CCTV footage which was inconclusive as to whether or not the use of CCTV prevented

abuse. She highlighted how key it had been in highlighting the abuse in Muckamore.

69. Seán Holland added that in relation to use of CCTV, it would be useful to see any and all data in relation to outcomes of any trials or studies, and that it was important to remain open to all views and findings. Data to be shared with the Group once received.

70. Dawn Jones also added that she was upset to hear about the recent death of a patient in Muckamore and gave her condolences to the family. Dawn Jones raised the lack of communication from the Belfast Trust to families in relation to this, adding she had read about it in a newspaper. Seán Holland suggested that the Belfast Trust will likely reflect on Dawn Jones' comment.

Agenda Item 12 – AOB

71. None raised.

Date of Next Meeting

72. The next meeting is scheduled for Wednesday 27 April at 2pm.

Summary of Action Points

Ref.	Action	Responsible	Update	Open/ closed
23/02/AP1	Public Inquiry update statement to be circulated to members.	DoH	Circulated to Members 23 February 2022	Closed
23/02/AP2	Public Inquiry Sponsorship team to contact Public Inquiry team to find out if	DoH		

Ref.	Action	Responsible	Update	Open/ closed
	facilities will be put in place to allow proceedings to be viewed online. (DoH)			
23/02/AP3	Follow up with Inquiry Secretary to get assurance that their communication strategy for the Inquiry would provide detail in Easy Read format.	DoH		
23/02/AP4	Adult protection Bill presentation to be shared with group members	DoH	Circulated to Members 23 February 2022	Closed
23/02/AP5	Belfast, Northern and South Eastern Trusts to provide information on their collaborative work to expedite resettlement.	Belfast Trust, Northern Trust, South Eastern Trust		
23/02/AP6	Belfast Trust to liaise with family reps on ongoing concerns in Muckamore Abbey Hospital.	Belfast Trust		
23/02/AP7	Muckamore Abbey Hospital newsletter to be issued to Group members after the meeting.	DoH	Circulated to Members 23 February 2022	Closed

MDAG/04/22

Ref.	Action	Responsible	Update	Open/ closed
23/02/AP8	Provide update to Department on the outcomes of the pilot bodycam scheme.	Southern Trust		

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 27 April 2022****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Seán Holland	DoH (Chair)	Moira Kearney	BHSCT
Lynn Woolsey	DoH (Chair)	Margaret McNally	Family Rep
Maria McIlgorm	DoH	Ian Sutherland	DoH
Mark McGuicken	DoH	Rodney Morton	PHA
Sean Scullion	DoH	Aidan McCarry	Family rep
Siobhan Rogan	DoH		
Ian McMaster	DoH		
Darren Strawbridge	DoH		
Darren McCaw	DoH (Note)		
Brendan Whittle	DoH (SPPG)		
Lorna Conn	DoH (SPPG)		
Catherine Cassidy	DoH (SPPG)		
Mary Emerson	PHA		
Carol Diffin	Belfast Trust		
Brenda Creaney	Belfast Trust		
Margaret O'Kane	South Eastern Trust		
Petra Corr	Northern Trust		
Karen O'Brien	Western Trust		
Jan McGall	Southern Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Lynn Long	RQIA		
Vivian McConvey	PCC		
Mandy Irvine	NI British Psychological Society		
Elaine Armstrong	Cedar Foundation		
Gavin Davidson	QUB		
Grainne Close	Mencap		
Bria Mongan	DoH		
Gillian Seeds (for agenda item 4)	DoH		
Jaclyn Richardson (for agenda item 4)	MAHI		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Seán Holland welcomed attendees and introduced Lynn Woolsey, Deputy Chief Nursing Officer, to her first MDAG meeting as co-Chair. It was agreed

that Sean would chair this meeting to enable Lynn to observe and familiarise herself with the agenda items and attendees. Seán also welcomed back Sean Scullion who had replaced Máire Redmond as head of the Muckamore Abbey Review Team.

2. Apologies were noted from Moira Kearney, Margaret McNally, Ian Sutherland, Rodney Morton and Aidan McCarry.
3. Seán advised members that since the last meeting the HSCB had been dissolved on 31 March 2022 with the transfer of functions into the Strategic Planning and Performance Group (SPPG) within the Department of Health.

Agenda Item 2 – Minute of Previous Meeting

4. Seán Holland noted that the draft minutes of the previous meeting held on 23 February were circulated to members on 3 March. Following receipt of amendments, the draft minutes were published on the Department's website on 25 March as an agreed record of the meeting. There were no further comments on the minutes.

Agenda Item 3 - Update on Action Points

5. Seán Holland provided an update on the open action points arising from previous meetings of the Group. In relation to 23/02/AP1, it was confirmed that a copy of the statement had been circulated to members on 23 February; in regards of 23/02/AP2, whilst the procurement process was ongoing, members were advised that a link would be provided to enable virtual viewing; and on 23/02/AP4, a copy of the presentation had also been circulated to members on 23 February. As a result of these updates, these actions were now closed.
6. Seán Holland advised that in relation to 23/02/AP3, there was an Easy Read section on the Inquiry's website which provided an Easy Read version of the Terms of Reference and work was ongoing on producing easy Read versions of the Chair's statements. Members were advised that the Inquiry Secretary would provide an update on this action under agenda item 4.

7. It was noted that 23/02/AP5 was still ongoing, with the Belfast, Northern and South Eastern Trusts producing a proposal paper which has been submitted to the SPPG and is currently under consideration.
8. In relation to 23/02/AP6, concerning an issue raised by a family representative, Seán Holland apologised for the inaccurate update he had been provided with for today's meeting and it was agreed that the Belfast Trust would follow up and contact the family representative member involved to address their concern.
9. Jan McGall provided an update in relation to 23/02/AP8. Jan advised that, following the small scale pilot study of bodycams in a mental health setting within the Southern Trust, whilst it was too early to draw definitive conclusions the early data was suggesting a correlation between the wearing of bodycams and the reduction in incidents of violence and aggression when compared with figures from the previous year. Jan further advised that the evaluation was ongoing and more detailed data should be available in around four weeks' time. Seán requested that detail from the study be shared in order to aid considerations of the work of the Adult Safeguarding Bill Team around CCTV and bodycams. Gavin Davidson also highlighted a recently published systemic review on body worn cameras in public services and agreed to share a link to the report for circulation to members.

AP1: Link to review on body worn cameras to be shared with MDAG secretariat for circulation to members. (Action: Gavin Davidson/DoH)

10. Seán Holland advised that engagement was ongoing with the Belfast Trust in relation to 22/12/AP3 and that an update would be provided under agenda item 7 today.
11. Members were advised that in work was continuing on 22/12/AP4 with the Belfast and Northern Trust discussions continuing to manage the process for the transfer of staff and avoid any destabilisation at Muckamore.

12. In relation to 25/08/AP5, Seán outlined that work on the draft Risk Register is continuing, however it has currently been delayed due to pressures on the team and prioritisation of requests from the Inquiry. It is hoped to be ready for the June meeting.
13. For 28/04/AP6 (an update on progress towards a future model of on-site provision at Muckamore), and 28/04/AP7 (develop a regional overview on resettlement), members were advised that updates on both would be provided under agenda item 6.

Agenda Item 4 – Public Inquiry Update

14. Seán Holland welcomed Gillian Seeds and Jaclyn Richardson, Inquiry Secretary, to the meeting to provide an update on the Public Inquiry.
15. Jaclyn Richardson advised that whilst work was ongoing in preparation for the commencement of the Inquiry hearings, there would be a short delay to the start of these as the statement taking process was moving slightly slower than anticipated. It was anticipated that live evidence would start to be heard in June. Once started, hearings would run from 10am to 4:30pm, with usual breaks included. It was confirmed that hearings would not take place on Fridays or on Bank or other holidays.
16. Members were advised that the Inquiry Chair had released a statement this morning which outlined the Core Participants to the Inquiry. The statement has been published on the Inquiry website and it was agreed a link would be provided for sharing to members of MDAG. Current Core Participants include a number of individuals who are either affiliated to Action for Muckamore or to The Society of Parents and Friends of Muckamore, the Department of Health, RQIA, Belfast Trust and the Police Service of Northern Ireland (PSNI).

AP2: Link to MAHI Chair's statement of 27 April 2022 to be circulated MDAG by secretariat. (Action: DoH)

17. Jaclyn confirmed that the Inquiry had received a large number of documents to date and were in the process of analysing these, in addition, 109 potential witnesses have come forward so far. She advised that Cleaver Fulton Rankin are taking statements on behalf of the Inquiry, and are currently taking Phase 1 statements in relation to evidence around the treatment of patients at Muckamore, and providing these to the Inquiry team once complete.
18. In relation to the continuing criminal investigation, members were advised that a memorandum of understanding (MOU) has now been agreed between the Inquiry, PSNI and Public Prosecution Service (PPS) to ensure clear lines of communication and understanding. A copy of the MOU is published on the Inquiry website and Jaclyn offered to provide copies to MDAG members if required.
19. Jaclyn advised that work on the Inquiry premises at Corn Exchange in Belfast is ongoing and arrangements for audio visual and stenography provision are currently being put in place. Live streaming of proceedings will be made available via a link on the Inquiry website and transcription services will also be available if required. Jaclyn further advised that witnesses will have the option to give evidence remotely if preferred and that systems will be in place to enable witnesses to provide their evidence anonymously.
20. Further to the work on the building outlined, Jaclyn advised that the building will be available to the public and Core Participants in week commencing 23 May to enable them to see the premises and familiarise themselves with the building and rooms in advance of use later. Jaclyn also extended an invitation to MDAG members to visit the Inquiry building during week commencing 9 May if desired. It was agreed that this would be arranged by MDAG secretariat following today's meeting.

AP3: E-mail to issue to MDAG members seeking expressions of interest and dates/times available in week of 9 May to visit MAHI premises and include contact details for Jaclyn Richardson. (Action: DoH)

21. Jaclyn advised that the Chair would be making his opening statement in week commencing 6 June and would introduce the Inquiry Panel and Senior Counsel to provide an opening address. There would also be the option for Core Participants to provide an opening statement that week, with these limited to one hour in length.
22. Jaclyn provided an overview of the Inquiry's anticipated schedule, which included closed viewing of CCTV material for the panel and a number of oral evidence sessions ahead of a recess at the end of week of 4 July until recommencement in September which would continue until December. The Hearings dates for next year will be released in due course. Jaclyn also confirmed that support services would be available on hearing days, videos would be added to the Inquiry website to explain the witness process and further material in Easy Read format would be added to the Inquiry website.
23. Jaclyn further added that registered intermediaries are available to support witnesses. Jaclyn explained that registered intermediaries are recruited by the Department of Justice and help with the work of the Courts by providing assistance to anyone with a learning difficulty or requires assistance to understand legal questions in a form that can be more easily understood. Where possible, individuals will have the same registered intermediary throughout.
24. In response to a query from Brigene McNeilly, Jaclyn also confirmed that wider support will be available for those families outside the immediate support network provided they have come forward and are assisting the Inquiry. This additional support can be accessed through Jaclyn. Further to a suggestion by Seán Holland, Jaclyn also agreed to the addition of a support section on the Inquiry website to help make more accessible.
25. Gillian Seeds provided an update on the work of the Inquiries Sponsorship team within the Department advising that they were ensuring adequate funding and resources was available to the Inquiry team and that they were also engaging with Departmental colleagues, to ensure any resource or

finance requirements for the Department were considered and in place.

26. Dawn Jones queried who were the Departmental colleagues referred to, and Seán Holland clarified that Gillian's team were not involved in the substantive work of identifying and providing Departmental material to the Inquiry, but were instead responsible for ensuring the Department is adequately resourced to ensure requests from the Inquiry are met. They would have no role in the substantive work of the Inquiry, which is independent of the Department.

27. Jaclyn advised that she would be happy to attend MDAG in the future to provide detail on the work of the Inquiry as required. Seán Holland thanked both Jaclyn and Gillian for their updates.

Jaclyn Richardson and Gillian Seeds left the meeting.

Agenda Item 5 – MAH Leadership Roles Update

28. Seán Holland advised attendees that the Belfast Trust had made a number of recent changes to their Collect Leadership Team (CLT), covering services at both community and Muckamore Abbey Hospital and invited Brenda Creaney to provide an update. Brenda advised that following the recent changes the Clinical Director is Dr Ken Yeow, the interim Co-Director for Learning Disability is Natalie Magee, the Divisional nurse is Billie Hughes, and the Divisional Social Worker is Tracy Reid.

Agenda Item 6 – Resettlement

29. Seán Holland outlined the significance of the resettlement issue given the small proportion of current MAH patients requiring assessment and treatment and welcomed Bria Mongan to provide an update on the Resettlement Project. Bria advised that completion of the report has been delayed due to the fact that the arrangements to meet with families took longer than anticipated and included individual home visits as well as events in the Northern Trust, Belfast Trust and South Eastern Trust areas. In addition, Bria advised that Ian Sutherland was temporarily unable to assist with the work of the review due to unexpected

absence for medical reasons but is due to resume work imminently. Bria advised that she is hopeful that the report will be completed by mid-May 2022.

30. In relation to an update on the work of the resettlement project since the last meeting, Bria advised that work has been continuing with Phase 3 of the project. A number of engagements had been held with family members of Muckamore patients; both those whose family members have been successfully resettled and also those still resident in Muckamore, the latter group including both Dawn Jones and Brigene McNeilly who are family representatives on MDAG.
31. Feedback from the engagement with families was outlined, including the significant emotional toll felt by those families where placements had broken down and also where there were unmet expectations and trust had been lost. Bria raised the need to consider the provision of trauma informed support to both families and staff in these cases.
32. The importance of being able to visit their loved ones in Muckamore unannounced was also highlighted as an important area of assurance for families, as planned visits were not felt able to provide this level of assurance and families need to feel they can access the wards with more flexibility going forward.
33. Families had also put forward the view that the same level of opportunities to access daily living activities and level of engagement was not available at present compared to before Covid.
34. Families also felt that they were stronger together and more effort should be made to link up families whose loved ones are being considered for similar placements. Families didn't feel consistently valued or utilised.
35. Bria also advised that a small number of families strongly felt that Muckamore continued to provide the best option for their family members.

36. Bria finished her update on the outcomes of the Phase 3 engagements by advising that there was a mixed view on engagement, with some of the families evidencing consultation fatigue and keen to see clear outcomes from engagement.

37. Bria also provided a brief summary of the outcomes of the work of Phase 1 and 2 highlighting:

- There was no single pathway that mapped out process across all stakeholders;
- The need for a regional supply map;
- The need for integrated work streams, and the migration of the HSCB into the Department was cited as an opportunity to look at this;
- The need for a Regional Procurement Board to help shape the market;
- The need for enhanced collaboration; and
- Changes needed to contracting/monitoring of services.

38. In summarising the key findings of the final report, Bria advised that many of its recommendations would reflect recommendations from previous reports. There was however a need to reset and refresh the overall approach to resettlement, and this should be taken forward by a one team regional approach and performance and progress managed by a regional Partnership Board. The urgent need for completion of the Learning Disability Service Model was also flagged as key to provide the necessary strategic direction for services in the region.

39. In response to the point raised on visiting arrangements, Brenda Creaney recognised the difficulty that current arrangements were causing families and advised that revised guidance from the Trust around visiting at Muckamore had issued yesterday. Brenda encouraged families to liaise with Billie Hughes or to contact her directly to see what could be done to facilitate visits. Seán Holland emphasised the point that access to the hospital was key to assuring families about the safety of their relatives. Brenda confirmed her team were cognisant of that and would work with families to address any issues.

40. In response to the point raised on the provision of meaningful activities, Mary Emerson queried whether access to AHP services was available. Bria added the feedback received indicated less organised activity since Covid and there was a perception that this was a reflection of current staffing and competencies of ward staff. Brenda Creaney advised that OT and Speech and Language therapy was still available on the site, but agreed that activities had reduced over the past period. Brenda added that the Trust were looking into this and she would seek an update. Seán Holland acknowledged the challenges Covid had presented, but reminded members that if there is a lack of access to AHP services this would have a potential impact on the timescales for resettlement. He reiterated that the current delays on resettlement constituted a system disgrace, and must be an absolute priority for all involved in this work. It was agreed that the Belfast Trust would provide an update on AHP activity and support being provided, with a specific focus on how this was preparing people for resettlement and identifying any current deficits.

AP4: Belfast Trust to provide an update on AHP activity and support in preparing people for resettlement and highlighting any deficits. (Action: Belfast Trust)

41. Brendan Whittle referred to the slow progress on those placements that are in hand and the need for concurrent planning for alternative placements in the interim, and advised that a proposal has been received on concurrent planning in recent weeks. He indicated this will need to be discussed with the RQIA and policy colleagues in the Department to see if it can be expedited. Brendan also raised concerns that recent CLT changes in the Belfast Trust may lead to delay in progressing these resettlements. Bria Mongan offered to collate the number of resettlements that it is believed could be expedited and to discuss potential to progress these with the SPPG and Trusts.

AP5: Detail on resettlements that can be progressed now to be collated and discussed with SPPG and Trusts to take forward. (Action: Bria Mongan)

42. Dawn Jones advised it had been a pleasure to meet Bria and Ian Sutherland and to talk to someone who appeared to care, had an interest in what was being said and showed compassion. Brigene McNeilly reiterated and agreed with Dawn's comments, and added that whilst recent management changes may be concerning, as a carer, in some circumstances it has been a relief.
43. Seán took the opportunity to thank the family members who had shared their experiences with Bria and Ian, particularly given the personal cost to families of doing so.
44. Brigene also queried if the resettlement project report would be published or shared and if feedback would be sought. Seán confirmed he would have no issue with the report being shared or circulated to those who wanted to see it.
45. Brigene highlighted the need to ensure that any actions from the final report of the resettlement review would be taken forward and not allowed to drift. Seán Holland agreed with Brigene, adding that the expectation of the Minister would be that the implementation of any recommendations would be robustly performance managed.
46. Dawn Jones noted the importance of compassion and empathy being displayed by staff responsible for providing care to their relatives, and the role this played in building levels of trust among families. Seán Holland reaffirmed the need to ensure that any trust placed in the system is not misplaced and the necessary actions are taken forward to implement the recommendations from the review.

Agenda item 7 – Safeguarding Audit Update

47. Seán Holland invited Carol Diffin to provide an update on the recent Safeguarding Audit at MAH. Carol Diffin advised that the Trust were working on the recommendations from the Adult Safeguarding audit and recent changes to the CLT in the Trust were in support of this. The Trust were also streamlining a number of recommendations from the audit and from RQIA inspections into one action plan.

48. Carol provided an update on the Adult Safeguarding audit actions that had been completed, highlighting the outcome of one investigation had been changed following a review. She also advised induction training had been completed for agency staff working in Muckamore.
49. In terms of ongoing actions, Carol advised that any safeguarding issues involving agency or bank staff were being followed up with their employers. Carol also advised that where any new incidents arose, a process has now been put in place to take account of any previous issues and this work is ongoing. The Trust are also actively trying to recruit more DAPO's to reduce pressure on those currently in post and to help improve the quality of detail in Adult Safeguarding records. On the issue of reporting thresholds, Carol outlined the need for a piece of work on the current thresholds and this would need to be completed before any changes would be made. Carol further added that the Trust had appointed a new manager of the Adult Safeguarding team, Jacintah McCaffrey, who would help with stabilisation of the team.
50. Lynn Woolsey queried if the outcomes of work by the Belfast Trust on the different action plans were reported to MDAG. Seán Holland confirmed that the role of MDAG was to receive assurance on work being taken forward in relation to Muckamore and resettlement. Carol confirmed she was happy to bring an update on the action plan to the next MDAG meeting.

AP6: An update to be provided on the streamlined action plan on ASG audit and RQIA recommendations for the June MDAG. (Action: Belfast Trust)

51. Lynn Woolsey also queried if there was a revised timeframe for the completion of the resettlement review being carried out by Bria Mongan and Ian Sutherland. Bria advised she was due to meet with Ian Sutherland on 29 April and would have a better idea after that meeting, however the initial date for completion of the end of April would now likely be the middle of May, dependant on Ian's availability. Bria added that she expected the report would be ready in advance of the next MDAG meeting and would be provided to SPPG, who commissioned the review, once complete. Brendan Whittle confirmed that the

recommendations from the final report would be brought to the next MDAG meeting.

AP7: Actions from completed Independent Review of Resettlement to be brought to June MDAG. (Action: DoH)

Agenda Item 8 – RQIA Inspection Findings

52. Lynn Long provided an overview of the recent unannounced inspection at Muckamore which took place on 2 March. Lynn advised that verbal feedback had been provided to the Trust and there had also been engagement with Dawn Jones since the inspection clarifying the work of the RQIA in Muckamore including their engagement with the Belfast Trust, and the Patient Client Council (PCC). The inspection looked at a number of areas including how resettlement was being taken forward, the meeting of physical healthcare needs, staffing, and the leadership and governance of the hospital. The report was currently at final draft stage and a draft would be shared with the Belfast Trust for factual accuracy checks in the next couple of weeks.
53. Lynn outlined the initial findings, advising that there was more of a focus on resettlement, however they agreed that more work was needed in this area and in-reach and out-reach had recently recommenced. Lynn confirmed that all frontline staff engaged were aware of resettlement plans for patients, where patients had plans in place. It was also confirmed that physical healthcare needs were being met.
54. The need for further improvement in relation to safeguarding was highlighted and the new CLT in place within the Trust should take forward work in relation to this. Lynn also highlighted that the new social work model on site was not yet as it should be and there was engagement with the Trust on this. In relation to staffing, there continued to be concerns on the current levels, particularly around the ratio of substantive Trust staff. On leadership and governance, this area was linked to findings on staffing and Adult Safeguarding, however it was noted that Trust staff were also picking up on issues and taking steps to address.

Agenda Item 9 – MAH HSC Action Plan – Exception Report (MDAG 03/22)

55. Darren McCaw provided an update on the paper circulated in advance of the meeting and advised that updates on open actions had been provided by their owners and are detailed in the updated Action Plan. Darren advised that work on meeting the Departmental Internal Audit unit recommendations that Responsible Officers should be assigned to each action within the Action Plan, and that those actions rated as red should be examined and updated with a new realistic timescale was ongoing, and would need to take account of the new structures following the dissolution of the HSCB on 31 March 2022.

56. Darren advised that due to the busy agenda for today's meeting there would be no verbal progress updates on specific red rated actions for this meeting, but these would resume for the June meeting.

57. Darren noted that since the last update a further action, A53, had been reported as complete and four further actions A6, A38, A41, and A44 had now moved beyond their target completion date and therefore were now rated red. Darren summarised by noting that there are now 22 red, 5 amber and 27 green actions within the plan.

58. Given the level of red actions now within the Plan, Seán Holland suggested that a discussion be held offline on how to manage the completion of these actions and ensure action owners were held to account.

AP8: Develop proposals for the management of red rated actions within the HSC Action Plan to completion. (Action: DoH)**Agenda Item 10 – Highlight Report and Dashboard (MDAG 04/22)**

59. Sean Scullion advised that the highlight report and dashboard were circulated in advance of the meeting and highlighted that there were currently 38 patients in Muckamore Abbey Hospital, with four on trial resettlement and that a breakdown, by Trust, was provided in table 1.1 within the report. Sean also

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confirmed that one resettlement had taken place in February with a further number of planned resettlements to take place in the coming months.

60. Members were also advised that CCTV viewing was ongoing, as detailed in Table 3 within the report. The update on staffing within the hospital, including ongoing efforts to recruit additional staff within Section 3 of the report was also highlighted as was the update on the advocacy review within Section 5 of the report.

Agenda Item 11 – AOB

61. None raised.

Date of Next Meeting

62. The next meeting is scheduled for Wednesday 29 June at 2pm.

Summary of Action Points – MDAG 27 April 2022

Ref.	Action	Responsible	Update	Open/ closed
27/04/AP1	Link to review on body worn cameras to be shared with MDAG secretariat for circulation to members.	Gavin Davidson/DoH	Circulated to members 30 May 2022	Closed
27/04/AP2	Link to MAHI Chair's statement of 27 April 2022 to be circulated MDAG by secretariat.	DoH	Circulated to members 27 April 2022	Closed
27/04/AP3	E-mail to issue to MDAG members seeking expressions of interest and dates/times available in week of 9 May to visit MAHI premises and include contact details for Jaclyn Richardson.	DoH	E-mail issued to members 27 April 2022	Closed
27/04/AP4	Belfast Trust to provide an update on AHP activity and support in preparing people for resettlement and highlighting any deficits.	Belfast Trust		
27/04/AP5	Detail on resettlements that can be progressed now to be collated and discussed with SPPG	Bria Mongan		

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Ref.	Action	Responsible	Update	Open/ closed
	and Trusts to take forward.			
27/04/A6	An update to be provided on the streamlined action plan on ASG audit and RQIA recommendations for the June MDAG.	Belfast Trust		
27/04/AP7	Actions from completed Independent Review of Resettlement to be brought to June MDAG.	DoH		
27/04/AP8	Develop proposals for the management of red rated actions within the HSC Action Plan to completion.	DoH		

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 31 August 2022****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Seán Holland	DoH (Chair)	Lynn Woolsey	DoH
Maria McIlgorm	DoH (Chair)	Aine Morrison	DoH
Mark McGuicken	DoH	Margaret McNally	Family Rep
Sean Scullion	DoH	Aidan McCarry	Family rep
Siobhan Rogan	DoH		
Ian McMaster	DoH		
Darren McCaw	DoH (Note)		
Brendan Whittle	DoH (SPPG)		
Lorna Conn	DoH (SPPG)		
David Petticrew	DoH (SPPG)		
Moirá Kearney	Belfast Trust		
Brenda Creaney	Belfast Trust		
Tracy Reid	Belfast Trust		
Margaret O'Kane	South Eastern Trust		
Petra Corr	Northern Trust		
Jan McGall	Southern Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Lynn Long	RQIA		
Vivian McConvey	PCC		
Mandy Irvine	NI British Psychological Society		
Elaine Armstrong	Cedar Foundation		
Gavin Davidson	QUB		
Grainne Close	Mencap		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Seán Holland welcomed attendees and informed members of the recent retirement of Carol Diffin, and confirmed Tracy Reid as her replacement on MDAG. Sean paid tribute to Carol's contribution to the work of MDAG and extended his best wishes for her retirement. Apologies were noted from Lynn Woolsey and Aine Morrison.
2. Sean advised members of a change to the agenda for today's meeting, with the update on the final report of the Independent Review of Resettlement from Bria

Mongan and Ian Sutherland deferred to a subsequent meeting. This was to allow time for all families and the Minister to be fully briefed on the findings of the Review. A high level summary of the Report would instead be provided for today's meeting.

Agenda Item 2 – Minute of Previous Meeting

3. Seán Holland noted that the draft minutes of the previous meeting held on 27 April were circulated to members on 4 May for consideration. Following receipt of a number of amendments, the draft minutes were published on the Department's website on 30 May as an agreed record of the meeting. There were no further comments on the minutes.
4. Sean noted that the meeting scheduled for June had been cancelled, however the MDAG co-Chairs had met on 4 July with family members.

Agenda Item 3 - Update on Action Points

5. Seán Holland provided an update on the open action points arising from previous meetings of the Group. Actions 27/04/AP1, 27/04/AP2 and 27/04/AP3 had been actioned, and were confirmed as closed.
6. In relation to 27/04/AP4 concerning an update from the Belfast Trust on AHP support to prepare people for resettlement, Moira Kearney requested this be deferred to the October meeting where a full update would be provided. This was to allow time for the completion of work being taken forward with Dr Patricia Donnelly, Bernie Owens and Dr Peter Sloan to review resettlement.
7. Séan advised that updates in relation to actions 27/04/AP5, 27/04/AP6 and 27/04/AP8 would be covered under agenda items 4, 6 and 9 respectively. Attendees were also reminded that an update on 27/04/AP7 had been provided in the Chair's opening remarks, with the deferral of the update on the final Report from the Independent Review on Resettlement to the October meeting.
8. Regarding action point 30/06/AP7, Tracy Reid provided an update on the process the Belfast Trust had established to collect feedback from anyone

affected by adult safeguarding investigations, and also work by the Trust to bring additional resource to Muckamore. Attendees were advised that the Trust were working with all new staff to ensure the process was being followed, and there had been engagement with carers' representatives to also provide an avenue for feedback to be collected independent of the DAPO. She confirmed that an opportunity to provide direct feedback was offered to relatives following the conclusion of investigations, although recognising that not everyone was comfortable with this, a questionnaire had been introduced so that feedback can also be provided in writing. Following a query from Séan Holland, Tracy agreed the Trust would provide an update on collated feedback at the next MDAG meeting.

9. Vivian McConvey highlighted an issue that had been raised with the Patient and Client Counsel by families who had been through this process, querying if there was any opportunity for families to provide independent comment during the investigative process in order to help inform this. Dawn Jones agreed this would be helpful and asked about the current format. Tracy advised that the questionnaire is completed with the families during a conversation, however if this was not suitable, she confirmed the Trust would be happy to review this. Tracy also offered to follow up offline directly with Dawn. Dawn advised that she had received no feedback or paperwork during previous engagement with the safeguarding process and had contacted Moira Kearney about this. Moira Kearney advised that Dawn's query was being investigated and she would provide a response to Dawn. Moira also added that the Trust was planning to develop an action plan for this. Dawn also queried the training provided for DAPOs.
10. Brigene McNeilly agreed with the points raised by Vivian and Dawn and suggested that any potential anxiety caused by the face to face completion of the questionnaire could be addressed by posting out the questionnaire for completion and return.

AP1: Belfast Trust to engage with the PCC and families on potential design changes to the ASG feedback process. (Action: Belfast Trust)

11. Séan Holland noted that all staff undertaking a DAPO role are required to undergo appropriate training, and advised that the forthcoming Adult Safeguarding Bill will place this requirement on a statutory footing, with a recognised qualification accredited by the NI Social Care Council.

Agenda Item 4 – Resettlement Project Report

12. As referred to in his opening remarks, Séan Holland advised attendees that a full update on the final Report would be provided at a future MDAG meeting by the Review team, Bria Mongan and Ian Sutherland, once all families and the Minister had been briefed. Pending this, he invited Brendan Whittle to provide members with a brief high level summary of the Review's findings.

13. Brendan Whittle confirmed that the final report from the Review had been received by the Department on 9th August and shared with the Department's senior management team. A submission was being prepared for the Minister providing advice on the next steps following the Review. He advised that the Review Team wished to meet with families to brief them on the Review's findings, and arrangements for this were being made.

14. Brendan went on to highlight a number of high level findings from the Review, including:

- The pace of resettling individuals from Muckamore has been too slow;
- The focus on safe staffing in Muckamore has possibly distracted from progressing the resettlement programme;
- Governance arrangements around resettlement should be strengthened,
- Noted families concerns about the safety of Muckamore, and an over-reliance on agency staff; and
- The importance of a clear strategy for the future of Muckamore and Learning Disability services more generally.

15. Brendan noted that the Minister has agreed that Dr Patricia Donnelly will take forward work in regard to Governance arrangements around resettlement and

added that the conclusions and findings from the Review would be provided to the Minister, together with proposals for implementation. Following this, Ian and Bria will meet with families to provide a detailed briefing on their findings and recommendations.

16. Dawn asked how long this will take, and Brendan confirmed that he expected this to happen over the next number of weeks and advised he was meeting with the Review Team later this week to agree a timetable for this.

17. Séan acknowledged the Review's finding that resettlement for some patients has not progressed at the pace we would like. He added that Trusts have been overly optimistic in their projections on the pace of resettlement, and drift on this issue needs to be addressed. Mark McGuicken advised that a submission on the Review findings was being prepared for the Minister.

18. Dawn asked whether there is a resettlement team in Muckamore to oversee this work. Séan advised that there are resettlement teams in each of the Trusts, and it is important that their work is properly co-ordinated. Moira Kearney confirmed that the Belfast Trust have staff members who liaises with the other Trusts who have placed patients in Muckamore. Moira added that, following on from the work with Dr Donnelly, weekly meetings and clinics have been held over recent weeks to build up a live information picture, and this will be shared with families in the coming weeks.

**AP2: Belfast Trust to share up to date information on resettlement with families.
(Action: Belfast Trust)**

19. Séan also highlighted the importance of involvement of Allied Health Professionals and Multi-Disciplinary Team (MDT) input to achieving successful resettlements and stressed the need for this support to be strengthened. Brigene McNeilly acknowledged the support her family receive from the MDT involved in her relative's care, with regular planning meetings held. Dawn advised that while she had had this support in the past, she felt this was lacking at present. Moira advised that the support described by Brigene is what the

Trust expect to deliver to families, and agreed that the Trust would pick this issue up directly with Dawn to try and resolve.

AP3: Belfast Trust to discuss level of MDT support provided to Dawn Jones to resolve any issues. (Action: Belfast Trust)

20. Mark McGuicken advised members that the membership of the Regional Resettlement Oversight Board to be led by Dr Donnelly will also include senior Departmental colleagues. The overarching aim of the Oversight Board will be to ensure a consistent approach is taken to resettlement across the system. Séan Holland confirmed that the urgency around completing the resettlement programme has been communicated to Trust Chief Executives by the Permanent Secretary of the Department, and if Dr Donnelly identifies any barriers to this in the course of her work, these will be referred to Chief Executives as necessary.

21. Séan Holland introduced Maria McIlgorm, the new Chief Nursing Officer for the Department, who had joined the meeting. Maria introduced herself to the Group, and provided a brief summary of her background, including her experience of managing a LD service in Edinburgh. Maria outlined that she has been working closely with the Belfast Trust on setting a range of performance measures in order to help provide assurance, and was keen to progress work on a new strategic direction for wider LD services.

Agenda Item 5 – Update on Staffing Position

22. Moira Kearney provided an update on the staffing position at Muckamore, which continues to be challenging, highlighting an increasing reliance on Agency cover. She advised that the Trust were working to identify and address any skills gaps that may exist.

23. Moira confirmed that recruitment efforts were ongoing by the Trust, but that a number of gaps still remained, particularly at Band 6 Nurse Leader level on wards. In light of these gaps, the Trust had taken a decision to employ a further Lead Nurse, meaning that there would now be two of these posts on site. In

addition, the Trust also have a Nurse Consultant in place who spends 50% of their time on the wards with staff. The Trust will also have a number of new nurse registrants joining in September, although it was noted these staff are required to undertake a six month preceptorship programme to provide them with support and assess their skills.

24. She also updated members on a number of recent appointments, including Dr Peter Sloan who has taken up the role of LD Head of Division, Dr Paul Devine who is providing peer support, and Ciara Rooney who joined as Interim Service Manager at the start of August. Additional DAPO's had also been moved onto site by the Trust, and increased regional support for the service was also being put in place by the Trust. MDAG members were advised that although the nurse staffing levels remained challenging, the Social Work staffing cohort had been strengthened, and a small number of vacancies still existed in other elements of the team at Muckamore, such as AHPs and Psychological support.

25. Members were advised that, following their recent visit, the East London Foundation Trust (ELFT) had also offered peer support to the Trust.

26. Brenda Creaney added that the Trust was struggling to recruit in a number of areas, and she was working on a reporting dashboard with Maria McIlgorm. Brenda outlined the fragile position the Trust was in with the increasing reliance on Agency staff who could potentially leave with minimal notice, although a number of these staff had been working at Muckamore for some time.

27. Dawn Jones welcomed the update from the Trust and referred to a staffing crisis in Muckamore. She queried how the training and backgrounds of Agency staff were checked. Brenda confirmed that background checks were a requirement in law and were carried out by the Nursing and Midwifery bank in the Trust. In addition the Trust had set requirements and levels of training needed for any Agency staff working on site, and added that additional safeguarding and MAPA training were also provided. Staff were also subject to an ongoing review process, and where any performance issues were identified additional training was provided. Occasionally, where there was an

incompatibility with the work, staff would be let go. Brenda also highlighted the importance of feedback from families as part of the oversight process. Dawn advised she had raised issues on staffing with Tracy Reid. Brenda advised Dawn that her team were responsible for the checks on staff, and members of the team, including Brenda, can be contacted directly if any issues arise.

28. Brigene queried whether training was given to staff on interaction with patients, as in her experience she had not witnessed much patient interaction from staff. Dawn echoed this view adding this was something she had raised recently, with any interaction witnessed being provided by those coming onto the wards, such as AHP staff, rather than ward staff. Brenda Creaney confirmed that training was provided to staff, but if families' experience was that there was insufficient interaction, then that should be escalated to senior Trust staff to investigate. Moira Kearney advised that on that point, an activity log was being introduced into each individual patient's care plan so that activity provision can be monitored. Brigene thanked Moira for the update and confirmed that was something that would be of interest.

29. Dawn asked if any planning had been done in case Muckamore had to close suddenly. Séan Holland confirmed that this was an acknowledged risk, and work had been done with Trusts to mitigate this. Such a scenario would likely mean introducing temporary emergency arrangements, such as for example the use of nursing homes placements, without time for normal resettlement processes to be completed. Séan added that reducing the risk of an unplanned closure was one of the factors driving the focus on well planned resettlements taking place at pace. Brendan Whittle advised attendees of engagement with Trusts on this, and that efforts to reduce this risk had focussed on moving additional staff into Muckamore, rather than moving patients out of Muckamore.

Agenda Item 6 – Safeguarding Audit Update

30. Seán Holland referred members to the update at the April MDAG meeting from the Belfast Trust on work to streamline the outcomes from the safeguarding audit and RQIA inspections into one plan, and invited Tracy Reid to provide an update. Tracy confirmed that the Trust continued to engage with the

Department on the outcomes of the audit for clarification in order to address the recommendations effectively. Tracy advised that the ASG Action Plan had been completed and the Trust had allocated additional resource to implement this. The Action Plan will be shared with the Department and RQIA for consideration and comments.

31. The Trust were working to improve their ability to respond to and screen allegations quickly and also deal with historic cases. Staffing resource was a key focus, with the recent appointment of Ciara Rooney and continuing work to add additional staff to the team. However as previously referenced, there are significant challenges with recruitment and retention at present, with Muckamore providing its own challenges in this regard.

Agenda item 7 – RQIA Inspection Findings

32. Seán Holland advised members that there had been a recent unannounced RQIA inspection at Muckamore during July, adding that the final report was being collated and families would then be briefed on the outcome of the inspection. Séan invited Lynn Long to provide an update on the inspection. Lynn provided a high level overview confirming that it was a comprehensive inspection carried out over different time periods and across all wards, and had identified concerns about staffing levels, and adult safeguarding.
33. Feedback had been provided to the Trust on 29 July and a further meeting was held with the Trust on 4 August. As a result of this, and ongoing meetings with the Trust, the RQIA have decided not to take enforcement action at this time against the Trust. Lynn advised that the Trust are providing updates on a fortnightly basis to the RQIA, and the RQIA are also planning to carry out a follow-up inspection.
34. Lynn confirmed that the RQIA had also met with the Department to set out their findings, and advised attendees that a key element to ensure improvement would be the alignment of all Trust actions plans following recent audits and inspections. Progressing resettlement would also help to address some of the

current staffing challenges at Muckamore. Lynn advised that the Trust was planning engagement with the families on the outcome of the inspection and the RQIA intended to issue the draft report to the Trust in the coming weeks for factual accuracy checking. Moira Kearney confirmed the Trust welcomed the feedback and would be in touch with families once the draft report had been received.

35. Séan Holland acknowledged the difficulty in striking an appropriate balance between managing the current staffing difficulties while maintaining compliance with standards, and the challenges this presented for Trust staff. Work to improve services is an ongoing process, and involves a partnership approach between the Trust, RQIA and the Department. In this context, he referred to work being taken forward with the Chief Nursing Officer to develop dashboard indicators as a key element to help inform improvement updates.

Agenda Item 8 – Update on East London Foundation Trust Visit

36. Sean Holland reminded MDAG that the Belfast Trust have been engaging with the East London Foundation Trust (ELFT) for some time as a critical friend, and invited Moira Kearney to provide an update from the latest visit. Moira advised that staff from the ELFT had visited the Belfast Trust on 1st and 2nd August and had met with Trust colleagues, and also Dr Donnelly, who was able to join on the 2nd August. Items discussed included the current staffing issues, delays in resettlement and the current unavailability of Muckamore for new admissions. The ELFT team shared their experience of similar change and are continuing to work with the Trust to provide support, including further visits and offers of individual peer support to the Trust.
37. Séan Holland outlined the ongoing nature of the support, and queried whether there might be an opportunity for relatives to also directly engage with the ELFT to share their experiences. Moira confirmed the Trust were happy to facilitate this.

AP4: Belfast Trust to make arrangements for relatives and carers to directly engage with the ELFT. (Action: Belfast Trust)

Agenda Item 9 – MAH HSC Action Plan – Exception Report (MDAG 12/22)

38. Darren McCaw provided an update on the paper circulated in advance of the meeting and advised that updates on open actions had been provided by their owners and are detailed in the updated Action Plan. Darren noted that since the last update a further action, A26, had been reported as complete meaning that all actions under the Governance theme had now been completed. Attendees were also advised that an action reported as complete in the June update, A53, had been returned to amber as the action continued to be ongoing. Darren summarised by noting that there are now 21 red, 6 amber and 27 green actions within the plan
39. Darren advised that further to the action point from the April meeting to develop proposals for the management of red rated actions within the HSC Action Plan to completion (27/04/AP8), the Department had carried out a review of the incomplete actions. The review considered the application of the RAG rating included in the Action Plan, reported progress on each action, and detail from an initial synopsis of the recommendations from the Independent Review of Resettlement that had been provided to the Department during the final drafting process. Members were advised that the draft outcome of the review was then shared with Action Owners for consideration in parallel with the normal process to provide updates on the Plan for circulation ahead of today's meeting.
40. The review proposed changes to the rating of a number of those actions which, since the drafting of the HSC Action Plan, are either being progressed as business as usual or were outside the responsibility of the Department. Changes were also proposed to the rating of a number of actions whose red rating reflected that although the initial completion date had passed, work in support of the action was either on track for completion, or awaiting the outcome of other work or decisions being taken.
41. He advised that if MDAG members were content to agree the proposed changes, this would mean the updated Action Plan would then contain 34 green rated actions, 17 amber rated actions and 3 red rated actions. Members were

also advised that the Action Plan will likely need to be further reviewed to take account of the recommendations in the final report of the Independent Review of Resettlement.

42. Darren further advised that, in light of the proposed changes to the Action Plan, it was now proposed to table the draft Risk Register for the October meeting to allow the scoring of the risks contained within the draft to be updated to reflect MDAGs consideration of the findings of the review of the HSC Action Plan.

43. Dawn Jones queried the inclusion of A53 within the HSC Action Plan as it related to a specific complaint, given that other complaints are not included. Sean Scullion confirmed that it had been included in the HSC Action Plan as a one of the recommendations from the Leadership and Governance Review Report, which were incorporated within the HSC Action Plan to monitor their implementation. Séan Holland accepted that it was not appropriate to include a specific complaint for monitoring as part of the Action Plan. Mark McGuicken confirmed that the Action Plan would be further reviewed in light of the final report from the Independent Review of Resettlement, and would take this into account.

AP5: HSC Action Plan to be updated to reflect proposed changes brought to August 2022 MDAG. (Action: DoH)

Agenda Item 10 – Progress on Red Rated Actions

44. Séan Holland advised attendees that verbal updates would be provided in relation to A29 by the Belfast Trust and A39 and A40 by SPPG.

45. Moira Kearney provided an update on A29, outlining a number of recent specialist appointments made by the Trust and confirming that the Trust would continue to progress the workforce plan.

46. Lorna Conn provided updates on A39 and A40 advising that, in respect of A39, two regional workshops had been held to date with a follow up workshop planned in advance of monthly workshops to consider the Mental Health

workforce plan. Lorna also confirmed that, with regards to A40, an appointment had been made to work across both Mental Health and Learning Disability services to manage capacity.

Agenda Item 11 - Highlight Report and Dashboard (MDAG 13/22)

47. Sean Scullion advised that the highlight report and dashboard were circulated in advance of the meeting and outlined that there were currently 37 patients in Muckamore Abbey Hospital, with three on trial resettlement and that a breakdown by Trust was provided in paragraph 1.1 within the report. Sean highlighted the detail on resettlement provided in the report in the graph contained in paragraph 1.2, and confirmed that one further resettlement had taken place in June with a further number of planned resettlements to take place in the coming months.
48. Sean also advised that CCTV viewing was ongoing, as outlined in the tables on page 2 of the report, and was now over 90% complete. The update on staffing within the hospital, including ongoing efforts to recruit additional staff detailed within Section 3 of the report was also highlighted, as was the update on the summary of the latest findings from the work of the real time feedback team within Section 6 of the report.
49. Brendan Whittle asked that for factual accuracy purposes, the reference to SPPG on page three in the highlight report should be amended to reflect the recent establishment of SPPG as part of the Department.
50. Petra Corr queried the detail included in the Highlight Report in relation to progress with resettlements, advising that the Northern Trust had more resettlements in the final stages of completion than were outlined in the tables included. Moira Kearney confirmed that the figures included in the report reflected those that had formally left the Trust on resettlement. Mark McGuicken added that the format of future updates to MDAG may be revised to provide clearer detail and clarity on detail.

51. Maria McIlgorm also advised that, once the detail had been confirmed for inclusion on the Dashboard, updates could be provided from Nursing colleagues within the Department for future Highlight Report updates.

Agenda Item 12 – AOB

52. No substantive items were raised under AOB.

53. Séan Holland advised MDAG that today's meeting would be his final meeting as co-chair of the Group as, after 20 years in the Department of Health, he was taking up a new post in the coming weeks. Séan thanked colleagues, and particularly the family representatives, for all their support and work to try make things better within the system.

54. Dawn Jones thanked Séan for all he had done to try and make things better for families, including her own, adding that it was appreciated by all the families.

55. Brigene McNeilly agreed with the sentiments from Dawn, adding her hope that Séan's legacy would be a better life for all their relatives.

Date of Next Meeting

56. The next meeting is scheduled for Wednesday 26 October at 2pm.

Summary of Action Points – MDAG 31 August 2022

Ref.	Action	Responsible	Update	Open/ closed
31/08/AP1	Belfast Trust to engage with the PCC and families on potential design changes to the ASG feedback process.	Belfast Trust		
31/08/AP2	Belfast Trust to share up to date information on resettlement with families.	Belfast Trust		
31/08/AP3	Belfast Trust to discuss level of MDT support provided to Dawn Jones to resolve any issues.	Belfast Trust		
31/08/AP4	Belfast Trust to make arrangements for relatives and carers to directly engage with the ELFT.	Belfast Trust		
31/08/AP5	HSC Action Plan to be updated to reflect proposed changes brought to August 2022 MDAG.	DoH		

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 26 October 2022****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Mark McGuicken	DoH (Chair)	Peter Toogood	DoH
Lynn Woolsey	DoH (Chair)	Maria McIlgorm	DoH
Sean Scullion	DoH	Karen O'Brien	Western Trust
Aine Morrison	DoH	Jan McGall	Southern Trust
Darren Strawbridge	DoH	Margaret O'Kane	South Eastern Trust
Darren McCaw	DoH (Note)	Petra Corr	Northern Trust
Brendan Whittle	DoH (SPPG)	Moira Kearney	Belfast Trust
David Petticrew	DoH (SPPG)	Mandy Irvine	NI British Psychological Society
Lorna Conn	DoH (SPPG)	Siobhan Rogan	DoH
Brenda Creaney	Belfast Trust	Aidan McCarry	Family rep
Tracy Reid	Belfast Trust	Margaret McNally	Family Rep
Billie Hughes	Belfast Trust		
Teresa McKee	South Eastern Trust		
Christine McLaughlin	Western Trust		
Roisin O'Hare	Southern Trust		
Gareth Farmer	Northern Trust		
Bria Mongan			
Ian Sutherland			
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Lynn Long	RQIA		
Vivian McConvey	PCC		
Elaine Armstrong	Cedar Foundation		
Gavin Davidson	QUB		
Grainne Close	Mencap		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Mark McGuicken welcomed attendees and informed members that following Séan Holland's move, Peter Toogood, the interim Head of the Social Services Policy Group, will take over the role of MDAG co-Chair with Maria McIlgorm, the Chief Nursing Officer. However, as neither Peter nor Maria were available for today's meeting, Mark and Lynn Woolsey, the Deputy Chief Nursing Officer,

would chair the meeting. Mark noted apologies from Karen O'Brien, Jan McGall, Margaret O'Kane, and Petra Corr, who had all nominated deputies for today's meeting. Apologies were also noted from Moira Kearney, Mandy Irvine, and Siobhan Rogan.

Agenda Item 2 – Minute of Previous Meeting

2. Mark McGuicken noted that the draft minutes of the previous meeting held on 31 August were circulated to members on 21 September for consideration. Further to this, the draft minutes were published on the Department's website on 12 October as an agreed record of the meeting. There were no further comments on the minutes.

Agenda Item 3 - Update on Action Points

3. Mark McGuicken provided an update on the open action points arising from previous meetings of the Group.
4. In relation to the actions from the August meeting, 31/08/AP1 was confirmed as closed as the Belfast Trust were continuing to collect data on the adult safeguarding process through the questionnaire and were also engaging with the PCC and families on the effectiveness of the feedback process. In relation to 31/08/AP2, Mark advised that resettlement information had been shared by the Trust and this action point could therefore be closed. In response to a further query from Dawn Jones about the Belfast Trust staff team who attended the family engagement event on the public consultation launch on 24 October, it was agreed that the Belfast Trust will provide families with an update on the make-up of the senior team at Muckamore. Brigene McNeilly commented that in her view the Trust's arrangements for communicating with families had deteriorated recently, and Tracy Reid undertook to consider how processes might be improved.

AP1: Details of the current senior team at Muckamore to be provided to families. (Action: Belfast Trust)

5. In relation to action 31/08/AP3, Dawn Jones confirmed that a meeting with the Trust had taken place and this action is therefore closed. For action 31/08/AP4, Tracy Reid asked that this be carried forward to the December meeting and with regard to 31/08/AP5, Mark noted that an update on proposed MDAG reporting arrangements would be provided under agenda item 8 and on that basis this action point could be closed.
6. Updates on outstanding actions carried forward from previous meetings were also provided. Tracy Reid advised that in relation to 30/06/AP7, the Belfast Trust were reviewing their process for collecting feedback information. A summary report on feedback provided to date had been provided by the Trust for today's meeting and this was included as an Annex to the circulated Highlight report.
7. Billie Hughes advised that the Belfast Trust were still working to collate information on levels of AHP activity to address 27/04/AP4, and requested that the update on this be deferred to the December meeting. Mark McGuicken agreed to this, and asked that an update of AHP availability on site be provided at that meeting.
8. Dawn Jones advised members of issues she had experienced with the level of AHP support provided for her son.
9. The Chair noted her concerns, and asked that Belfast Trust representatives consider how these might be addressed in advance of the next meeting of MDAG.
10. Actions 27/04/AP5 and 27/04/AP7 were both confirmed as closed as work was progressing on resettlements, and an update on actions from the final report of the Independent Review of Resettlement was on the agenda for today's meeting. It was agreed that action 27/04/AP6 should remain open, pending further discussions between the Department and Belfast Trust on the report provided by the Trust.

Agenda Item 4 – Resettlement Project Report

11. Mark McGuicken reminded members that a briefing for MDAG on the final report of the Independent Review of Resettlement had been deferred from the August meeting until today to allow the review panel time to brief the families, Trusts, and Minister on the findings of the review. He advised that Ian Sutherland and Bria Mongan who carried out the review met with families and Trusts on 28 September. In his subsequent announcement on 29 September, the Minister had welcomed the findings of the review and accepted all the recommendations.
12. In endorsing the review, the Minister also announced he was considering options for the future provision of services at Muckamore and that he intended to make a further statement on this in the coming weeks. Mark advised attendees that following an engagement event with the families of current patients and senior Departmental and Trust officials, the Minister had announced on 24 October the launch of a public consultation on the proposed closure of Muckamore Abbey Hospital.
13. Mark invited Ian and Bria to present an overview of the review and the recommendations contained in their final report. Ian Sutherland began by extending thanks on behalf of himself and Bria Mongan to all those who had so generously engaged with the review and candidly shared their experiences. Ian added that they were delighted that the Minister had accepted the report and endorsed the recommendations, and that the report had broadly been received positively.
14. Ian and Bria gave a presentation outlining the work of the review and highlighted a number of areas in particular, including:
- the duration of the review and range of groups they had engaged with;
 - the development of a resettlement tracker tool;
 - progress made in reducing the number of delayed discharge patients regionally over the timescale of the review;
 - learning drawn from legislation in other jurisdictions;

- the need for improvements in leadership and governance arrangements for oversight of the resettlement programme, with a particular focus on reducing instability in teams and the need to ensure better communication with, and involvement of, families;
- the need for improved data to help inform both strategic commissioning and operational delivery arrangements;
- the need for a shared workforce strategy, as the review had found some evidence of a mis-match between qualifications of staff and complexity of patients; and
- although not formally included within the scope of the review, safeguarding arrangements had also been considered and a number of issues had been raised around the notification of families and the length of time taken to progress investigations.

15. Members were advised that the final report contained 25 recommendations, a number of which echo and reiterate recommendations from other reviews. In order to ensure progress in implementing the recommendations, the panel proposed the development of a thematic reporting approach to assist in delivering a consistent system response.

16. An overview of the recommendations was provided and a number of areas were highlighted, including:

- the Regional Resettlement Oversight Board has already been established and has begun its work;
- the tracker tool introduced through the review should be further developed to facilitate oversight of progress;
- further work should be taken forward through the Social Care Procurement Board to identify need and develop a separate contract for specialist learning disability nursing and residential care;
- the need for a joint strategic needs assessment to be taken forward with the NIHE;
- a database should be developed of individuals displaying behaviours that may contribute to placement breakdown, to enable proactive interventions to prevent breakdowns;

- the importance of regional adoption of a Positive Behaviour Support (PBS) approach;
- clarity on advocacy arrangements for families, including facilitating arrangements for family support groups where their relatives were being resettled to the same location;
- the need for individualised solutions for patients;
- the need for wider engagement with provider organisations to ensure all potential resettlement options are considered;
- further work required on the use of CCTV;
- the need to ensure effective adult safeguarding capacity in Trusts, and that contracts or service specifications also include provision for adult safeguarding; and
- the importance placed by families on facilitation of unannounced visits to their relatives as an important source of assurance about safeguarding arrangements.

17. Mark thanked Bria and Ian for their work on the review, and the comprehensive report they had produced. Mark advised members that a revised thematic reporting approach was being developed for MDAG, which was designed to facilitate the Group in its oversight role. Mark further confirmed that a significant amount of work was ongoing in relation to resettlement, driven by the Oversight Board with a focus on delivering successful resettlements.

18. Dawn Jones thanked Ian and Bria for their work on the review, a sentiment supported by Brigene McNeilly, and asked whether MDAG members had had an opportunity to read the final report. Dawn also echoed the view that PBS training should be more widely available for staff.

19. In relation to the public consultation on the proposed closure of Muckamore, Dawn asked if there are plans to hold any engagement events in addition to the online response process to ensure that respondents are given the opportunity to provide responses that fully reflect their views. Brigene McNeilly agreed that

such events would be useful adding that some respondents may prefer a face-to-face conversation rather than completing an online form.

20. Vivian McConvey suggested an engagement session would allow families and patients the opportunity to fully share their experiences and views on the consultation questions. Mark McGuicken advised that the consultation was on a specific policy question around the future of Muckamore Abbey Hospital, and was being asked in the wider context of ongoing work to finalise the Learning Disability Service Model (LDSM), which would in turn may be subject to a separate public consultation in due course. Mark added that the work on the LDSM may not be complete before the closure of the Muckamore consultation however, he appreciated that both issues were interrelated. After discussion, members agreed that a further face to face engagement session with families on the proposed closure of the hospital would be arranged with the support of the PCC during the consultation period.

**AP2: Further face to face engagement session with families and residents to be arranged as part of the public consultation, with support from the PCC.
(Action: DoH/PCC)**

21. Dawn Jones queried whether senior Departmental staff would provide comment on the content of the report. Mark noted that senior staff in the Department had provided advice to the Minister on the report and that its recommendations should be accepted.

Agenda Item 5 – Update on Staffing Position

22. Further to discussion earlier in the meeting under agenda item 3, the Chair clarified that the names of the recently appointed psychiatry leads at Muckamore had been provided to members at the August MDAG meeting and were duly recorded in the minutes from that meeting. Mark apologised to BHSCT staff for the previous oversight and Tracy Reid thanked Mark for providing this clarification.

23. Brenda Creaney and Tracy Reid provided an update to members on the current staffing position at the hospital. It was confirmed that efforts to recruit additional staff continued, but despite this the staffing situation remains fragile. Tracy Reid advised members that Ciara Rooney had recently taken up appointment as DAPO and would act as the single point of referral for ASG cases.
24. Aine Morrison asked about the backlog of ASG referrals, and Tracy Reid advised that 36% of these were currently closed.
25. Mark McGuicken confirmed that the enhanced remuneration arrangements being offered as part of the Muckamore Abbey Workforce appeal had been extended until December, but noted that these arrangements were unlikely to continue beyond this point.
26. Dawn Jones asked whether the Belfast Trust had a contingency plan in place should agency staff wish to return home over the Christmas period. Brenda Creaney confirmed that the Trust were currently engaging with the agencies to encourage their staff to work in the hospital over the Christmas period and were working on negotiating a financial incentive in relation to this. Dawn added that in her experience, Muckamore was short staffed every weekend and this had prompted her query around the Christmas break. Brenda advised that the hospital was currently operating with 85 – 90% agency staff at present, and whilst this was not where they wanted to be at this time, it was hoped that this position would improve as new staff bedded in. Brenda offered to ask Billie Hughes to follow up with Dawn in relation to the staffing position, and also to ask the newly appointed senior nurses at Muckamore to meet with Dawn. Dawn also requested that staff acknowledge and respond to her e-mails in a timely manner. Brenda confirmed that she would ask Billie Hughes to follow up on this as well.

AP3: Billie Hughes to follow up with Dawn Jones on the staffing position and responses to e-mails. (Action: Belfast Trust)

AP4: Meeting to be arranged between Dawn Jones and the newly appointed senior nurses at Muckamore. (Action: Belfast Trust)

Agenda Item 6 – Safeguarding Audit Update

27. Mark McGuicken confirmed that the Department had received the requested report on safeguarding. To allow Departmental professional staff to consider the report, he advised this agenda item would be deferred to the next meeting to enable a fuller discussion to take place.

Agenda item 7 – RQIA Inspection Findings

28. Mark McGuicken reminded attendees that the RQIA had carried out an unannounced inspection at Muckamore in July, and a high-level overview of the findings had been provided at the August meeting in advance of engagement with families. Members were advised that the final report had now been published, and Mark invited Lynn Long to provide an update on the inspection.

29. Lynn advised that the majority of the update on the inspection had been provided at the August meeting and confirmed that the RQIA are continuing to work with the Belfast Trust to address the issues highlighted in the inspection. Lynn noted the interrelation between RQIA's improvement activity and the ongoing work led by Aine Morrison with Belfast Trust to strengthen safeguarding arrangements.

30. Lynn emphasised that RQIA was continuing to monitor the Trust's progress to address the inspection findings, and advised members that she was happy to provide copies of the report to MDAG members. Mark McGuicken confirmed that the Department would arrange for the report to be circulated to MDAG members.

AP5: RQIA Muckamore Abbey Hospital unannounced inspection report to be issued to MDAG members. (Action: DoH)

Agenda Item 8 – MAH HSC Action Plan – Revised Reporting Arrangements (MDAG 15/22)

31. Darren McCaw referred members to the paper circulated in advance of the meeting. He advised that, further to members' agreement to the changes proposed at the August meeting, an updated version of the HSC Action Plan had been circulated for information. As a result of the agreed changes, the Action Plan now contained 3 red, 15 amber and 35 green rated actions.
32. Darren also advised that, further to discussion at the August MDAG, arrangements for reporting to MDAG on the HSC Action Plan were also being reviewed in light of the recommendations from the recent Independent Review of Resettlement, and also to ensure MDAG members had proper oversight of all actions relevant to the MDAG terms of reference. This was in the context of a larger piece of work being taken forward to develop a new governance structure, which is intended to have oversight of the implementation and delivery of all relevant Action Plans and recommendations relating to Learning Disability services.
33. As a result, a new thematic reporting format for MDAG purposes is being proposed, which will focus primarily on those actions and updates relating to Muckamore and MDAG's terms of reference, with the areas proposed for inclusion outlined in the circulated paper. Members were advised that as this was a work in progress, a draft of the new report format had not been circulated for today's meeting but will be tabled instead for consideration at the December meeting.
34. Brendan Whittle welcomed the proposed direction of travel to reporting on a thematic basis, which should improve the effectiveness of MDAG's oversight role for Muckamore, and added he looked forward to seeing the detail for agreement.
35. Dawn Jones agreed that the move to thematic reporting seemed a very good idea, although she felt the gap between updates was long, given MDAG was a bi-monthly meeting. Mark McGuicken advised that holding meetings bi-monthly

reflected the amount of work that was taking place between each meeting, and confirmed that a more detailed update would be provided at the next meeting.

Agenda Item 9 – Highlight Report (MDAG 16/22)

36. Sean Scullion provided an update on the Highlight report circulated in advance of the meeting, noting that most of the detail within the report had already been covered during the meeting. Sean highlighted that four staff had been redirected to support the Muckamore adult safeguarding team to help address outstanding cases. Members were also advised that CCTV viewing was now over 90% complete, with viewing completed for two ward areas.

37. Sean confirmed that the overall number of patients in Muckamore was now 35, with one patient discharged since the last meeting in August. It was also confirmed that the Regional Oversight Board had now met on two occasions so far, with the resettlement tracker tool being used to aid the work on resettlements.

38. Sean also drew members attention to the range of reporting tables in relation to adult safeguarding and patient safety set out within the paper. The current nursing situation at Muckamore was summarised and Sean advised that 73 staff had responded to date to the current Muckamore Abbey Workforce Appeal. Finally, Sean highlighted the inclusion of a Muckamore adult safeguarding closure feedback engagement survey as an annex to the paper for information.

Agenda Item 12 – AOB

39. No substantive items were raised under AOB.

Date of Next Meeting

40. Attendees were advised the next meeting is currently scheduled for Wednesday 21 December at 2pm. However, given the proximity of this date to the Christmas holidays, the potential to bring the meeting forward one week would be examined by the Secretariat.

AP6: Members' availability for week commencing 12 December to be checked for potential rearrangement of December meeting (DoH)

Summary of Action Points – MDAG 26 October 2022

Ref.	Action	Responsible	Update	Open/ closed
26/10/AP1	Names and contact details of the senior team at Muckamore to be provided to families.	Belfast Trust		
26/10/AP2	Further face to face engagement session with families and residents to be arranged as part of the public consultation, with support from the PCC.	DoH/PCC		
26/10/AP3	Billie Hughes to follow up with Dawn Jones on the staffing position and responses to e-mails.	Belfast Trust		
26/10/AP4	A meeting to be arranged between Dawn Jones and the newly appointed senior nurses at Muckamore.	Belfast Trust		
26/10/AP5	RQIA Muckamore Abbey Hospital unannounced inspection report to be issued to MDAG members.	DoH	Circulated to MDAG members 28 October 2022	Closed
26/10/AP6	Members availability for week commencing 12 December to be checked for potential	DoH	Meeting rearranged to 12pm on 13	Closed

Ref.	Action	Responsible	Update	Open/ closed
	rearrangement of December meeting.		December 2022	

Muckamore Departmental Assurance Group (MDAG)

12pm, Tuesday 13 December 2022

By video-conference

Minutes of Meeting

Attendees:		Apologies:	
Peter Toogood	DoH (Chair)	Moira Kearney	Belfast Trust
Lynn Woolsey	DoH (Chair)	Jan McGall	Southern Trust
Mark McGuicken	DoH	Aidan McCarry	Family rep
Maria McIlgorm	DoH (items 7 – 11)	Margaret McNally	Family Rep
Sean Scullion	DoH		
Aine Morrison	DoH		
Darren Strawbridge	DoH		
Siobhan Rogan	DoH		
Darren McCaw	DoH (Note)		
Brendan Whittle	DoH (SPPG)		
David Petticrew	DoH (SPPG)		
Lorna Conn	DoH (SPPG)		
Tracy Reid	Belfast Trust		
Peter Sloan	Belfast Trust		
Margaret O’Kane	South Eastern Trust		
Lisa Brady	Western Trust		
Roisin O’Hare	Southern Trust		
Petra Corr	Northern Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Wendy McGregor	RQIA		
Vivian McConvey	PCC		
Grainne Close	Mencap		
Mary Emerson	PHA		
Mandy Irvine	NI British Psychological Society		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Peter Toogood welcomed attendees and introduced himself as the new interim Head of the Social Services Policy Group. Peter clarified that following Séan Holland’s move, his role had been split with Peter taking over as the Head of Social Services Policy Group and Aine Morrison taking on the role of the Chief Social Work Officer. Peter advised that Maria McIlgorm had been delayed in joining today’s meeting, and he would co- chair the meeting with Lynn Woolsey,

the Deputy Chief Nursing Officer. Peter thanked attendees for accommodating the rescheduled date for today's meeting, and advised that apologies had been received from Moira Kearney, Jan McGall and Lynn Long.

2. Tracy Reid advised that Brenda Creaney and Billie Hughes were also unable to join the meeting, and introduced Peter Sloan who is acting as Interim Director of Mental Health, Intellectual Disability & Psychological Services for the Belfast Trust in Moira Kearney's absence.

Agenda Item 2 – Minute of Previous Meeting

3. Peter Toogood noted that the draft minutes of the previous meeting held on 26 October had been circulated to members for consideration as usual and, in the absence of any comments being received by the requested date, had been published on the Department's website as an agreed record of the meeting. However, a number of comments were subsequently provided, and the published minutes were amended to reflect these. Peter reminded members that as agreed at the September 2020 MDAG meeting, minutes of these meetings are routinely published on the Department's website, and asked that any comments be provided in a timely fashion to facilitate this. There were no further comments on the minutes.

Agenda Item 3 - Update on Action Points

4. Peter Toogood provided an update on the open action points from previous meetings of the Group. For the open actions from the October meeting, attendees were advised that in relation to 26/10/AP1 the names and contact details of the senior team at Muckamore had been shared at a recent meeting of the Trust's Carer's forum. Regarding 26/10/AP2, MDAG were advised that an update paper had been circulated on the proposed engagement in advance of today's meeting and this will be discussed under Agenda Item 7.
5. In relation to 26/10/AP3, Dawn Jones confirmed that her next MDT meeting was due to take place at 2pm today and while it may be that the update sought would be included on the agenda for this, Dawn advised that Billie Hughes had not confirmed this with her. Tracy Reid agreed to follow up with Billie Hughes.

6. With regards to 26/10/AP4, Tracy Reid advised that correspondence had issued to all families via e-mail and hard-copy letter advising of two dates, 15 December and 24 January, for families to meet with Muckamore's Collective Leadership Team. Dawn Jones advised that she had e-mailed Billie Hughes last week on this action and had been advised that the e-mail and letter had issued on 5 December, but she had not yet received these. Dawn also advised that she had not been notified of these dates to meet with Muckamore's Collective Leadership Team. She asked Brigene McNeilly had she attended the Carers Forum, as she does not. Brigene confirmed that she had received the letter and that she had also been the sole attendee at the Carer forum meetings for approximately the last year. Tracy confirmed that she would look into communications to identify any issues and would respond directly to Dawn and others affected to try and resolve these.

7. Peter confirmed that actions 26/10/AP5 and 26/10/AP6 were both now closed as the RQIA report had issued to members following the October meeting and the December meeting had been rescheduled.

8. Updates were also provided on open actions carried forward from previous meetings. In relation to 31/08/AP4, following discussion on the potential value of facilitating direct engagement between relatives and carers and the ELFT team, and given the ELFT is primarily acting as a critical friend and providing clinical advice to Trust staff in this capacity, it was agreed that the Belfast Trust would liaise in the first instance with the ELFT on this point. The Chair requested that the Trust provide an update on the outcome of this engagement in advance of the next meeting of MDAG.

9. In relation to 27/04/AP4 the Chair noted that the Belfast Trust had provided a summary of the Leadership and MDT structure at Muckamore which had been included as an Annex to the circulated Highlight Report. Tracy Reid confirmed that there was nothing further to add in relation to this action point, and the Chair confirmed this action was closed.

10. Finally, regarding action 27/04/AP6, it was confirmed that an update would be provided under Agenda Item 6 of today's meeting.

Agenda Item 4 – RQIA Inspection Update

11. Peter Toogood reminded attendees that the final RQIA inspection report had been circulated following the October meeting and advised that the Belfast Trust were due to provide their next update to the RQIA in January. Peter invited Wendy McGregor to provide an update.
12. Wendy confirmed that the RQIA had formally written to the Belfast Trust to request a progress update be provided by the end of January 2023. Wendy also advised that the RQIA is continuing to liaise with the Trust on adult safeguarding arrangements. She confirmed that the RQIA are monitoring information provided by the Trust on all current adult safeguarding incidents and had noted an improvement with these, and also a reduction in the backlog of historical cases. Tracy Reid added that there was also significant attendance from the RQIA at ASG strategy meetings and the invitation to the RQIA to attend these meetings remained open.
13. The Chair confirmed that MDAG would continue to monitor progress on the Trust's response to the inspection and the related action plan.

Agenda Item 5 – Update on Staffing Position

14. Tracy Reid advised members that the staffing position continues to be challenging on the Muckamore site, and the level of contracted agency staff on site remains high. The forthcoming industrial action will also likely impact on services at Muckamore, however the Trust has sought derogations to help minimise this. Attendees were also advised that work was ongoing to ensure there was sufficient cover in place over the forthcoming holiday period. Tracy also confirmed that the situation was being regularly monitored and engagement was continuing with agencies to enable access to additional staff should they be needed.

15. Brigene McNeilly raised an issue with the temporary removal of the appropriate level of observations from her brother for a period last week due to staffing issues, and asked for reassurance from the Belfast Trust that this would not happen again over the Christmas period. Brigene explained that this had happened on a previous occasion which had resulted in her brother suffering an injury. Tracy Reid apologised for this on behalf of the Trust, and agreed that it was not acceptable. She added that while it was not possible to give a categorical assurance that there would be no repeat of this, she could confirm that the Trust was making every effort to prevent any recurrence. Brigene accepted that staff were working very hard, but was concerned this may happen again.

16. Lynn Woolsey added that she and Maria McIlgorm had recently met with Billie Hughes and Brenda Creaney to discuss the Trust's data on safety related incidents, and had sought reassurance from the Trust on their escalation processes for these. She considered it would be helpful to seek an update on this from the Trust at the next meeting.

AP1: Update to be provided on work to address current staffing challenges at Muckamore. (Belfast Trust)

Agenda Item 6 – Safeguarding Audit Update

17. Peter Toogood reminded MDAG that this agenda item related to the independent audit of safeguarding referrals at Muckamore which was carried out last year, and invited Aine Morrison and Darren Strawbridge to provide an update on progress.

18. Aine Morrison advised that the Department was engaging with the Trust to work through the outstanding actions and provide clarification on a number of issues, and this work was progressing satisfactorily. Aine confirmed that a written progress update had now been received from the Trust and the Department will review this and respond to the Trust.

19. Tracy Reid noted that the Trust considered that all actions had been progressed and rated as green, and this work was nearing completion. The Trust were awaiting feedback from the Department. Aine agreed that significant progress had been made.

20. Peter noted that members would welcome an update on the status of the action plan at the next MDAG meeting.

Agenda Item 7 - Proposal for public consultation engagement events (MDAG/18/22)

21. Peter Toogood drew members attention to the paper circulated in advance of the meeting, and invited Vivian McConvey to provide an update on planning for the Muckamore public consultation engagement events.

22. Vivian highlighted the query in the paper for the Department around the facilitation of current Muckamore patients to respond to the consultation, advising that this was not considered within the paper and would be for the Department to consider. Peter confirmed that four current Muckamore patients had recently written to Dr Patricia Donnelly on that point and that she intended to meet the authors of the letter to discuss. Mark McGuicken added the Department was cognisant of the concerns of current patients about the future of the hospital, and noted the important role of patient advocates in supporting patients to contribute their views.

23. Vivian provided an overview of the paper, and highlighted engagement with relatives and advocates on the planning arrangements for the engagement sessions which were scheduled to take place via video conference on 9 and 10 January 2023. Vivian advised that the PCC would also provide dedicated support to address any queries or issues arising outside these sessions. The respective roles of the PCC and the Department in the sessions were set out in the paper and she confirmed that the PCC would produce an aggregated report of responses made at the events, which would highlight as far as possible if contributors also intended to make individual responses to the consultation.

The draft report will be shared with contributors for review before being finalised and submitted to the Department for consideration as part of the response to the public consultation.

24. Dawn Jones thanked Vivian for the update and welcomed this approach. She queried what the Department would do with the report. Peter Toogood advised that the PCC would support contributors' voices to be clearly heard, and the Department will consider the report along with the other responses received through the consultation. A quantitative analysis will be carried out of the responses received as part of a structured process of considering all the comments provided through the consultation, which will be used to inform production of a consultation analysis report.
25. Dawn advised that while her view was that Muckamore should close, it will be important to be clear about how services currently being provided by the hospital will be replaced. Peter agreed that there was a need to set this out, and he confirmed that in the event of a final decision that Muckamore should close, any closure would not take effect until adequate alternative service provision was in place.
26. Brigene McNeilly advised she was glad to hear that patients were mentioned in the consultation process as they would be impacted the most by any decision on the future of the hospital, particularly since Muckamore had effectively become home for a number of patients, given the length of time they had lived there.
27. Mark McGuicken highlighted that the engagement events were currently being organised to deliver on a commitment given at the consultation launch event, and confirmed that participation in the engagement events did not preclude individuals involved also making their own individual responses to the consultation. Mark pointed out however it was important to ensure that consultation responses were not double counted, and Vivian advised that the PCC would reflect on how best to do this.

28. Siobhan Rogan flagged the need to disaggregate responses to the consultation from individuals and families. Vivian suggested that further thought should be given to engagement with current in-patients. Mark McGuicken advised that the Department was very aware of the importance of supporting current in-patients in providing their views, but was equally conscious that the needs of some current in-patients may mean they will find engaging directly in the consultation on the hospital's future to be difficult and potentially traumatising.

Agenda Item 8 – MDAG Revised Reporting Arrangements (MDAG/19/22)

29. Sean Scullion referred members to the circulated paper MDAG/19/22 which provided an update on the revised reporting arrangements to MDAG further to discussions at the previous two MDAG meetings on a new thematic reporting format, outlining that the circulated paper represented a first draft of this new format. Sean provided detail on the sections proposed for inclusion in the report, and advised that an overarching action plan was being developed which will include all relevant recommendations from the range of extant action plans and reports relevant to Learning Disability services as part of the ongoing work to finalise the Learning Disability Service Model (LDSM) and associated oversight arrangements. As a result, he noted that the paper remained a work in progress pending the completion of this work and invited comments on the draft.
30. Tracy Reid raised the need for the report to include detail on ongoing work in relation to wider Learning Disability services to help provide context. Sean advised that the intention was that this work would be reflected in the new governance arrangements for regional Learning Disability services which would accompany the new LDSM. The new streamlined report for MDAG is intended to provide MDAG members with clear oversight of those actions relevant to MDAG's Terms of Reference. Peter Toogood agreed it would be helpful for reporting arrangements to MDAG to be placed in the context of wider governance arrangements for regional Learning Disability services.
31. Brendan Whittle welcomed the detail in the paper in relation to the ongoing work on the LDSM, and noted that reporting and oversight would be strengthened by

the development of a thematic action plan to accompany the new reporting format. Sean confirmed this was being taken forward through the work on the LDSM which would also include the development of a single overarching thematic action plan for Learning Disability services which will encompass all relevant action plans and outstanding recommendations. Mark McGuicken agreed with the principle of an overarching action plan for Learning Disability services, and noted the aim of the refocused reporting format for MDAG was to move to a more strategic and thematic way of reporting on progress in relation to Muckamore, which would facilitate MDAG members in their oversight role.

32. Mary Emerson agreed that the report was very helpful and suggested the inclusion of AHP input would help better inform the detail on resettlement. Sean confirmed that the report was a work in progress, and it would be important to ensure all relevant linkages and learning were reflected in the report. Mark McGuicken suggested that this level of detail might be of more relevance to the work of the Regional Resettlement Oversight Board, who could in turn include any relevant updates in their reporting to MDAG. Mary confirmed that she would be content with this approach.

33. Peter Toogood suggested it might be timely to review the Terms of Reference for MDAG. A review would also provide the opportunity to take stock generally of the current reporting arrangements for Learning Disability services, to identify any duplication and opportunities to streamline these.

AP2: MDAG Terms of Reference to be reviewed in the context of the proposed new reporting arrangements for regional Learning Disability services. (DoH)

34. Brendan Whittle advised that it may be useful to bring the proposed LDSM overarching action plan to the next meeting of MDAG to help provide clarity.

AP3: Draft LDSM overarching action plan to be circulated with the papers for the February MDAG meeting. (DoH)

Agenda Item 9 – Highlight Report (MDAG/20/22)

35. Sean Scullion referred members to the Highlight Report paper circulated in advance of the meeting, and highlighted some key messages in the Report, relating to the work of the adult safeguarding team at Muckamore, continuing CCTV viewing, ongoing work of the Family Liaison Officers at Muckamore and updates on the current work in relation to the LDSM and the Independent Review of Acute Care Services.
36. Members were advised that the overall number of patients in Muckamore was now 29, down from the baseline figure of 36 patients in August, with 7 patients discharged. Progress reports on a number of community placement schemes was provided, and Sean noted that, as Dawn Jones had mentioned earlier in the meeting, an update on the Minnowburn scheme had not been included and this would be provided in future reports.
37. Sean highlighted the inclusion of updates in relation the Belfast Trust's ongoing work with the ELFT and communication with families, and drew members attention to the diagram setting out the nursing management structure at Muckamore included on page 12, and also the diagram which set out the leadership and MDT structure at the Hospital included at Annex A on page 15.
38. Peter Toogood suggested that the content of the Highlight Report should be considered to identify any areas of overlap with the Thematic Report, and be modified accordingly.

AP4: Highlight and Thematic Reports to be reviewed to identify and remove any areas of duplication. (DoH)

39. Lorna Conn queried the detail included in the Highlight Report on the current status of the Independent Review of Acute Care services. Mark McGuicken clarified that the draft proposal was now with his team and not with SPPG as indicated in the Highlight Report.
40. Lynn Woolsey advised that work has been ongoing with the Belfast Trust on the development of a staffing and safety dashboard, and it was agreed that the

Belfast Trust would provide an update at the next MDAG meeting on this work as the dashboard reporting could also assist MDAG to meet its responsibilities set out in the Terms of Reference.

AP5: Update to be provided for the February MDAG meeting on the revised safety dashboard developed with the Department. (Belfast Trust)

41. Dawn Jones noted the update on the Muckamore leadership and MDT structure outline provided in the Highlight Report and queried the inclusion of a specific member of staff as she understood that they had retired. Tracy Reid confirmed that the individual staff member in question had recently returned under the 'retire and return' scheme to work on some areas within Muckamore.
42. Dawn also advised members that a member of the management team had recently visited her son's ward without prior notice to ward staff, which had caused some degree of concern over access to the ward. Dawn confirmed that she was subsequently able to clarify this individual's identity. Tracy Reid confirmed that anyone entering wards should be clearly introducing themselves, and would feed this back to the team. Dawn also advised that an offer had been made to have this incident referred for screening, however she had no further update on this. Tracy agreed to follow up on this also with Ciara Rooney.
43. Petra Corr welcomed the amended Thematic Report and the work to be taken forward with this and the Highlight Report, and queried if there had been any changes made to the screening out processes which might have resulted in the reduction on staff on patient adult safeguarding referrals as indicated in the table on page 8 of the Highlight Report. Tracy Reid confirmed that all staff on patient referrals were now being processed through a central point of referral involving one DAPO. This had improved consistency in the screening out process, and also assisted in identification of any potential patterns emerging. Petra advised that it would be helpful to explore this further, as the Northern Trust had made a similar change in Holywell and had seen similar results. Aine Morrison suggested that the improvement may also be down to the impact of

inappropriate referrals being screened out. Tracy confirmed that additional training provided on reporting thresholds may also have improved consistency.

AP6: Detail to be provided on changes made by the Belfast Trust to the referral process for staff on patient referrals. (Belfast Trust)

Agenda Item 10 – AOB

44. No items were raised under AOB.

Agenda Item 11 - Date of Next Meeting

45. Attendees were advised the next meeting is currently scheduled for Wednesday 22 February 2023 at 2pm.

46. Peter thanked attendees again for taking the time to attend this rescheduled meeting and wished all a quiet and peaceful Christmas and New Year.

Summary of Action Points – MDAG 13 December 2022

Ref.	Action	Responsible	Update	Open/ closed
13/12/AP1	Update to be provided on work to address current staffing challenges at Muckamore.	Belfast Trust		
13/12/AP2	MDAG Terms of Reference to be reviewed in the context of the proposed new reporting arrangements for regional Learning Disability services.	DoH		
13/12/AP3	Draft LDSM overarching action plan to be circulated with the papers for the February MDAG meeting.	DoH		
13/12/AP4	Highlight and Thematic Reports to be reviewed to identify and remove any areas of duplication.	DoH		
13/12/AP5	Update to be provided for the February MDAG meeting on the revised safety dashboard developed with the Department.	Belfast Trust		

Ref.	Action	Responsible	Update	Open/ closed
13/12/AP6	Detail to be provided on changes made by the Belfast Trust to the referral process for staff on patient referrals.	Belfast Trust		

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 22 February 2023****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Peter Toogood	DoH (Chair)	Moira Kearney	Belfast Trust
Lynn Woolsey	DoH (Chair)	Gavin Davidson	QUB
Mark McGuicken	DoH	Mary Emerson	PHA
Sean Scullion	DoH	Siobhan Rogan	PHA
Kevin Scullion	DoH (Observing)	Lynn Long	RQIA
Aine Morrison	DoH	Brenda Creaney	Belfast Trust
Nigel Chambers	DoH (Agenda item 3)	Margaret O'Kane	South Eastern Trust
Darren McCaw	DoH (Note)	Petra Corr	Northern Trust
Brendan Whittle	DoH (SPPG)	Aidan McCarry	Family rep
David Petticrew	DoH (SPPG)	Margaret McNally	Family Rep
Lorna Conn	DoH (SPPG)		
Randal McHugh	DoH (SPPG)		
Peter Sloan	Belfast Trust		
Billie Hughes	Belfast Trust		
Tracy Reid	Belfast Trust		
Jan McGall	Southern Trust		
Gareth Farmer	Northern Trust		
Karen O'Brien	Western Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Wendy McGregor	RQIA		
Vivian McConvey	PCC		
Grainne Close	Mencap		
Elaine Armstrong	Cedar Foundation		
Mandy Irvine	NI British Psychological Society		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Peter Toogood welcomed everyone to the meeting and advised that apologies had been received from Gavin Davidson, Mary Emerson, Siobhan Rogan, Lynn Long, Brenda Creaney and Petra Corr. Brigene McNeilly advised of an apology from Aidan McCarry and an apology on behalf of Margaret O'Kane was also provided. In the absence of Mary Emerson and Siobhan Rogan, it was confirmed there was no PHA representative in the meeting.

Agenda Item 2 – Minute of Previous Meeting

2. Peter Toogood noted that the draft minutes of the previous meeting held on 13 December had been circulated to members for consideration on 9 January, and following receipt of a number of comments, an updated version of the minutes had been published on the Departmental website on 1 February. There were no further comments on the minutes.

Agenda Item 3 - Update on Action Points

3. Updates were provided on the open action points from previous meetings with Peter advising that in relation to the actions from the December meeting, 13/12/AP1 would be covered under Agenda Item 5 of today's meeting. With regards to 13/12/AP2, 13/12/AP3 and 13/12/AP4, he advised members that progress on these actions would be dependent on the work to implement the Learning Disability Strategic Action Plan. Attendees were advised that the Plan had recently been approved by the Top Management Group (TMG) in the Department and implementation work was now underway. Peter invited Nigel Chambers to provide an update on this work.
4. Nigel advised that the paper approved by TMG had outlined the challenging context for children's and adult learning disability services across both inpatient and community provision, and the need to better align services to provide more joined up and effective provision. The establishment of a Task & Finish Group (T&F Group) for a period of six months had been agreed by TMG to progress the various strands of this work. The work will include the collation of baseline detail to understand the current position and the examination of approaches in other jurisdictions to identify best practice. This will then be used to test against the draft Learning Disability Service Model and Children with Disabilities Framework to aid their finalisation and production of costed implementation plans.
5. Further to queries from members, Nigel confirmed that the T&F Group was currently comprised of policy, planning and performance colleagues from the Department, but this would be widened through the engagement of relevant

stakeholders such as carers, HSC colleagues, professional bodies and professionals during the process as the work dictated. Vivian McConvey emphasised the importance of early engagement with stakeholders to allow them to inform the work as it progressed. Nigel agreed to follow up separately with Mandy Irvine on the involvement of professional bodies. Peter Toogood highlighted the need for meaningful co-production and asked that updates on this work be provided to MDAG to ensure they were sighted on developments.

6. In relation to 13/12/AP5, Peter advised that this would be covered under Agenda Item 7.
7. Tracy Reid provided an update on 13/12/AP6, and confirmed that the Trust had reviewed to ensure that standardised threshold criteria were being utilised and had also implemented a central DAPO gateway which had improved consistency and timeliness of referrals. Members were also advised that alternative adult safeguarding responses were being used to aid responses where referrals did not meet thresholds. Aine Morrison confirmed that she was supportive of the approach the Trust have taken.
8. Updates were also provided on open actions carried forward from previous meetings. Members were advised that an update on 26/10/AP3 would be provided under Agenda Item 5. In relation to 26/10/AP4, Dawn Jones confirmed that she received a notification from the Trust for the meetings and had attended the second meeting, at which Dr Margaret Flynn and one other person were in attendance. In response to a query from Dawn on attendance at the first meeting, Billie Hughes confirmed that there had been no attendees for the first meeting, highlighting that the Trust had engaged with families and carers at a Christmas party earlier that day. Dawn highlighted that she had not received notification of the Christmas party until three days after it had taken place. Billie confirmed that an apology had been provided to Dawn for this delay and that a new system had been implemented for communication with Dawn which should improve this. Peter Toogood confirmed that this action was now closed.

9. Finally, in relation to 13/08/AP4, Peter Sloan confirmed that the Belfast Trust were engaging with the East London Foundation Trust (ELFT) specifically as a critical friend and a provider of clinical advice and wished to maintain this relationship. He explained that direct engagement with relatives and carers was outside the role of ELFT, and the Trust had instead engaged Dr Margaret Flynn to advise them on arrangements for communication with families. On this basis, Peter Toogood confirmed he was content for this action to be closed, although he added that the potential for this type of communication with the ELFT would be kept under review.

Agenda Item 4 – RQIA Inspection Update

10. Wendy McGregor advised that the Belfast Trust continued to be monitored under the serious concerns process with an action plan update received from the Trust on 4 February. The update was currently being reviewed to inform RQIA's next steps. Peter Sloan confirmed that the Trust had nothing further to add and was awaiting feedback from the RQIA.
11. Wendy also confirmed that RQIA continued to be notified of any adult safeguarding incidents that met the agreed threshold with the Belfast Trust. She advised that RQIA also aim to attend all adult safeguarding strategy meetings, and should RQIA be unable to provide an attendee for a meeting, minutes of the meeting will be provided to RQIA for review.
12. Mark McGuicken noted that this will be maintained as a recurring agenda item for MDAG to allow progress updates to be provided to members following RQIA's engagement with the Belfast Trust.

Agenda Item 5 – Update on Staffing Position

13. Peter Sloan provided an update on the current staffing position, and highlighted that detail on this had been included in the circulated Highlight Report paper (MDAG/02/23). In relation to nursing, members were advised that the overall position was largely unchanged with the Belfast Trust now achieving 90% of safe staffing levels, with agency staff making up around 85% of these staff. Detail on current vacancy levels was provided, noting high vacancy rates in the

deputy and Charge Nurse categories, and the vacancy position in the adult safeguarding and psychology services was also outlined. Peter confirmed that the Trust had redeployed staff to the adult safeguarding team to ensure safe staffing levels were maintained.

14. Peter advised that on the medical staffing side, two consultants, one substantive and one locum, had left the service since the December MDAG meeting. It was confirmed that the Trust was taking steps to manage these vacancies with action underway to recruit replacement staff, as well as engagement with agencies and working with existing consultants and locums to maintain a safe level of care.

15. Peter Toogood emphasised the importance of continued scrutiny of the staffing position, and the need for the Trust to take all necessary steps to maintain the staffing levels required.

Agenda Item 6 – Safeguarding Audit Update

16. The Belfast Trust have submitted their finalised action plan to DOH and are awaiting an outcome from DOH. Aine Morrison confirmed that significant progress continued to be made on progressing the action plan, with a small number of items remaining to be clarified with the Belfast Trust. She expected that these will be addressed shortly, and a further report will be provided at the next meeting of MDAG to confirm all actions had been completed. Tracy Reid confirmed the Trust would continue to work with Departmental colleagues to finalise these.

17. Peter Toogood noted the importance of maintaining focus on this work, and welcomed the commitment to provide a further update at the next MDAG meeting.

Agenda Item 7 – Safety Dashboard

18. Billie Hughes provided an overview of the updated safety dashboard which used the weekly 'safety in time' report to aggregate detail to help provide month

on month trend detail for analysis. The dashboard, which had been developed in partnership with professional colleagues from the Department's Chief Nursing Officer Group, will form part of the Muckamore governance arrangements and will be submitted to the Department each month along with a highlight report containing supporting analysis.

19. Billie highlighted some key points from the dashboard, outlining the improving trend on safe staffing levels, the number of shifts per ward where there were two or more registered nurses on the ward and a chart setting out monthly staffing levels, by profession, in Muckamore. Members were advised that there were improvements in education and training rates. Billie further advised that there continued to be gaps in leadership roles, significantly at Band 6 and Band 7 levels, although more senior grades had been enhanced to help address these gaps. Finally, Billie confirmed that the patient experience team provided a monthly report on their engagement activity, with recent detail indicating an 80 - 90% satisfaction rate with the care provided.
20. Brendan Whittle commented it was encouraging to see the improvements outlined, particularly the enhanced leadership roles above Band 8 and noted the improvements in safe staffing levels. Billie advised that a number of graphs setting out some of this detail had been included in the February Highlight Report, and a fuller dataset would be included in the next report.
21. Peter Toogood thanked Billie for the helpful update, and welcomed the addition of this detail to the assurance process which would help ensure MDAG were sighted on any emerging issues.

Agenda Item 8 – Update on MAH Public Consultation

22. Sean Scullion advised that the public consultation on the proposed closure of Muckamore Abbey Hospital had closed on 24 January 2023. The consultation had launched on 24 October 2022 and, allowing an extra week for the Christmas holiday period, had remained open for a 13-week consultation period. During the consultation period the PCC had also facilitated two virtual engagement events and provided a dedicated phone line service for feedback,

and Sean thanked the PCC team involved for all their work around these events. Members were also advised that a small number of extensions to the deadline had been agreed in response to requests from some respondents, and a full set of responses had now been received.

23. Sean confirmed that a total of 117 responses had been received to the consultation with a further 19 facilitated through the PCC process - 13 from the engagement events and 6 written responses. Responses had been received from a range of individuals and organisations, including relatives and carers of current and past patients, former patients, patient representative groups, Trust staff, trade unions, political parties, independent sector organisations, professional bodies and academics.

24. Sean advised that work on the analysis of the responses received has now begun and a summary report will be prepared. Pending completion of the final report, an initial analysis of the responses to question one has indicated a majority of respondents are in agreement with the proposal to close the Hospital. With regard to question two, initial indications were that a majority agreed that closure of the Hospital would be consistent with the wider policy aims for learning disability services.

25. In terms of next steps, Sean confirmed that once the analysis of responses had been completed and a summary report produced, advice on the way forward would be provided for consideration either by a Minister, or alternatively by the Department's Permanent Secretary should a Minister not be appointed in the interim. Peter Toogood noted that the next steps would be informed by the political situation, and, in the absence of a Minister, advice would be provided to the Permanent Secretary.

26. Brendan Whittle queried the length of the extensions given and the expected timeframe for a decision. Sean advised that the extensions granted were relatively short. In relation to the potential timeframe for a decision, members were advised that the work involved was being expedited to enable advice to be produced for a Minister or Permanent Secretary as quickly as possible.

However, competing demands on the team, particularly in relation to dealing with requests from the Muckamore Abbey Hospital Inquiry, meant it was difficult to provide a definitive timeframe.

AP1: Confirmation to be provided on the length of extensions granted to potential respondents to the MAH Consultation. (DoH)

27. Mark McGuicken confirmed that an update on progress on the analysis of the responses to the consultation would be provided at the next MDAG meeting, and the final analysis report would be circulated to MDAG members once completed and agreed, as well as being published on the Department's website.

Agenda Item 9 – Update on MDAG Revised Reporting Arrangements (MDAG/01/23)

28. Darren McCaw referred members to the circulated paper (MDAG/01/23), and drew their attention to the progress update on the draft Strategic Action Plan for Learning Disability, as summarised by Nigel Chambers earlier in today's meeting. He advised that, pending work being progressed by the Task and Finish Group to develop a revised governance structure for Learning Disability services, the focus of the themes in the update report would continue in the interim to relate primarily to the remaining open actions in the MAH HSC Action Plan.

29. Darren summarised the content of the paper, highlighting that seven patients had been resettled since the Regional Resettlement Oversight Board began meeting in August 2022 and confirming that Peter Toogood has now replaced Sean Holland as the Chair of the Adult Protection Transformation Board.

30. Brendan Whittle suggested it would be helpful for MDAG to have sight of the mapping of the relevant actions and recommendations into the proposed Strategic Action Plan to provide assurance that all relevant outstanding actions are captured. Sean advised that the Task & Finish Group would be carrying out a detailed piece of work on the mapping of all relevant actions and

recommendations into the Plan. Peter Toogood agreed it was important that MDAG be sighted on this mapping work to ensure effective oversight of its evolution and development.

Agenda Item 10 – Highlight report (MDAG/02/23)

31. Sean Scullion provided an update on the circulated Highlight Report (MDAG/02/23), advising that as with the thematic report, consideration of the content within the Highlight Report would be informed by the work on the draft Strategic Action Plan. He noted that some initial work had been carried out to remove obvious areas of duplication between the two reports.
32. Sean highlighted a number of areas within the report outlining current work in relation to adult safeguarding referrals, with associated trend detail from the Trust provided in the paper, the work being taken forward by the Task & Finish Group on the Learning Disability Service Model, Acute Care Review and resettlement review and an update on the current inpatient population at Muckamore including progress on resettlement schemes. Sean also drew members attention to the updated detail from the Trust on the leadership and MDT structure at Muckamore that was included at Annex A of the paper and finally, the current arrangements for the Trust's communication with families as outlined in Section 5.2 of the paper.
33. Billie Hughes advised of a small update to the detail within the paper, advising that the weekly resettlement meetings outlined on page six of the paper had since moved to fortnightly since the paper had issued.
34. Further to a query from Lynn Woolsey on the update provided on the viewing of CCTV footage, Billie confirmed that this related to the viewing of historical material and agreed to include more detail on the set viewing schedule in future highlight reports.

AP2: Belfast Trust to add detail of CCTV viewing schedules to their future highlight reports. (Belfast Trust)

35. Dawn Jones sought clarification on whether ongoing safeguarding issues were still being reported on by the Belfast Trust. Billie Hughes confirmed that both ongoing and outstanding issues were still being reported on. Tracy Reid added that there was a continuing focus on adult safeguarding issues in the Trust and this would continue.
36. Lynn Woolsey advised that the additional safety dashboard reporting information to be provided in the highlight report for the April MDAG meeting would not all be necessarily required for MDAG in the future. Nursing colleagues in the Department would liaise with the Belfast Trust to advise on future requirements.
37. Brendan Whittle suggested that the detail provided in the chart on page 12, outlining the percentage of weekly staffing achieved against plan, be brought up to date for future reports. Billie Hughes confirmed that this has been amended and will provide detail to the nearest month end when provided in future.
38. Dawn Jones queried the use of the 100% figure in the table of overall incident totals included on page two of the report as it was not clear what this meant. Following discussion Tracy Reid agreed to provide clarification on the detail contained within the table for inclusion in the next report.

AP3: Clarification on the detail contained within the ‘Overall Incidents Totals identified by PSNI and Adult Safeguarding’ table to be provided in the April Highlight Report. (Belfast Trust)

39. Peter Toogood welcomed the development of the report, and noted the breadth of information it provided would be further enhanced by the additional dashboard items discussed.

Agenda Item 11 – AOB

40. Vivian McConvey advised members that today's meeting would be her last as a member of MDAG as she was retiring as the Chief Executive of the PCC. Vivian added that details of her successor would be announced in due course once confirmed. Peter Toogood extended his thanks on behalf of MDAG for Vivian's contribution to the Group and passed on MDAG's best wishes to her for the future.
41. Lorna Conn also advised that today would also be her last MDAG meeting with Randall McHugh taking over her learning disability post in SPPG.
42. David Petticrew advised members that he was part of a team that had recently met with the Telling It Like It Is (TILII) group to discuss resettlement issues. At the meeting TILII had advised that they were keen to communicate their views on their experiences of Muckamore, and how they valued the staff contribution to this, to MDAG and had queried how they might be able to do this. Mark McGuicken suggested that, subject to agreement from Belfast Trust clinical and professional colleagues, he would arrange to meet TILII along with David Petticrew to hear their views first hand.
43. Both Billie Hughes and Tracy Reid advised that if patients felt that they were not having their voices heard then this was something that the Belfast Trust would wish to address and improve. They noted it was important that the patient voice was heard and that effective mechanisms existed to enable this.
44. Brendan Whittle, Grainne Close and Dawn Jones all concurred on the importance of MDAG hearing the patient voice in relation to services at Muckamore, with Dawn adding that it was about showing the patients appropriate respect.
45. Mark McGuicken agreed with the Belfast Trust that an effective mechanism was required to ensure dialogue was ongoing and enabled views to be reflected back to MDAG. The potential was raised for this to be explored with ARC or TILII.

46. Peter Toogood confirmed it was clear that the consensus from members was that this was the right and important way to proceed. He suggested that as a first step Mark McGuicken and David Petticrew should make arrangements to meet with patients' representatives group to hear their views first hand, and then consider potential options for an ongoing communication channel for the patient voice to MDAG. Peter asked that an update on this issue be provided at the next MDAG meeting.

AP4: Update to be provided to MDAG on initial engagement with TILII and work to consider options for ongoing engagement with the patient voice. (DoH/Belfast Trust)

47. Mark McGuicken drew to members' attention the recent request issued by the Muckamore Abbey Hospital Inquiry which had been circulated with the MDAG meeting papers, inviting current and past members of staff and management at Muckamore to contact the Inquiry to provide detail of their experience. Mark encouraged all MDAG members to publicise and share this request as widely as possible.

Agenda Item 12 - Date of Next Meeting

48. Attendees were advised the next MDAG meeting is currently scheduled for Wednesday 26 April 2023 at 2pm.

Summary of Action Points – MDAG 22 February 2023

Ref.	Action	Responsible	Update	Open/ closed
22/02/AP1	Confirmation to be provided on the length of extensions granted to potential respondents to the MAH Consultation.	DoH		
22/02/AP2	Belfast Trust to add detail of CCTV viewing schedules to their future highlight reports.	Belfast Trust		
22/02/AP3	Clarification on the detail contained within the 'Overall Incidents Totals identified by PSNI and Adult Safeguarding' table to be provided in the April Highlight Report.	Belfast Trust		
22/02/AP4	Update to be provided to MDAG on initial engagement with TILII and work to consider options for ongoing engagement with the patient voice.	DoH/Belfast Trust		

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 26 April 2023****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Peter Toogood	DoH (Chair)	Maria McIlgorm	DoH
Mark McGuicken	DoH	Lynn Woolsey	DoH
Sean Scullion	DoH	Mary Emerson	PHA
Darren Strawbridge	DoH	Brendan Whittle	DoH (SPPG)
Darren McCaw	DoH (Note)	Aine Morrison	DoH
David Petticrew	DoH (SPPG)	Aidan McCarry	Family rep
Brenda Creaney	BHSCT	Margaret McNally	Family rep
Peter Sloan	Belfast Trust	Randal McHugh	DoH (SPPG)
Billie Hughes	Belfast Trust		
Tracy Reid	Belfast Trust		
Rachel Gibbs	South Eastern Trust		
Christine McLaughlin	Western Trust		
Jan McGall	Southern Trust		
Gareth Farmer	Northern Trust (agenda items 7 – 11)		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Siobhan Rogan	PHA		
Lynn Long	RQIA		
Meadhbha Monaghan	PCC		
Grainne Close	Mencap		
Elaine Armstrong	Cedar Foundation		
Mandy Irvine	NI British Psychological Society		
Gavin Davidson	QUB		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Peter Toogood welcomed everyone to the meeting and specifically Rachel Gibbs and Meadhbha Monaghan who were both attending their first MDAG meeting. Attendees were advised that Rachel was the new Director of Adult Services for the SEHSCT and that Meadhbha had replaced Vivian McConvey

as the Chief Executive of the PCC and as the PCC representative on MDAG.

2. Members were advised that apologies had been received from Maria McIlgorm, Lynn Woolsey, Mary Emerson, Brendan Whittle, Aine Morrison and Randal McHugh.

Agenda Item 2 – Minute of Previous Meeting

3. Peter Toogood noted that the draft minutes of the meeting held on 22 February had been circulated to members for consideration on 10 March. Following receipt of a number of comments, an updated version of the minutes had been published on the Departmental website on 6 April. There were no further comments on the minutes.

Agenda Item 3 - Update on Action Points

4. Peter provided an update on the open action points from previous meetings, starting with the actions from the February meeting. In relation to 22/02/AP1, attendees were advised that a total of six requests were received for an extension to submit a response to the MAH consultation. Short extension periods were agreed for the six and, from those six requests, five responses were then received as the RQIA decided not to submit a response. Of the five responses received, three of those were returned within a week of the initial consultation closing date of 24 January. The final response received was the engagement report from the PCC with this being received on 20 February, not 21 February as noted in MDAG/04/23. As a result of this update this action was now closed.
5. Regarding 22/02/AP2 and 22/02AP3, the Belfast Trust advised that additional detail had been added to their reporting material as requested. In response to 22/02/AP2, the total number of CCTV viewing shifts viewed each week now included in the Highlight report and the Trust added that it was hoped that this number of shifts would increase each week. This action was now closed. In relation to the detail in the 'Overall Incidents Totals identified by PSNI and Adult

Safeguarding' table, per 22/02/AP3, Tracy Reid confirmed that the 100% figure used related to the total number of incidents for review, and advised that this figure may change should more incidents be identified whilst the review was being carried out. The figures in the rows then underneath in the table provided a breakdown of the percentage and related numbers at each stage of the process. Tracy advised that the Trust was testing different options for the presentation of this information and would provide this for the next meeting of MDAG. Peter thanked Tracy and noted the content of the highlight report continued to evolve in support of the Group's assurance role.

6. In relation to 22/02/AP4, Peter confirmed that Mark McGuicken and David Petticrew had met with a number of current Muckamore inpatients, facilitated by TILII at the hospital on 27 March to hear their views on the future of the hospital. Mark McGuicken advised members that two of the patients they met expressed some reservations around resettlement particularly in relation to ensuring they were involved in the process; the other patient they met was in the process of being resettled and was very positive about the experience, although they highlighted some areas that could have been managed better. He added that the patients involved were keen to have their views heard on the future of the hospital, and after the meeting TILII had reiterated the request for direct patient involvement with MDAG and the Regional Resettlement Oversight Board.
7. Mark advised members that given the sensitivities around some of the issues discussed at MDAG, he had advised TILII that the PCC was represented on MDAG to present the patient voice. The potential for TILII to join the Regional Resettlement Oversight Board had been raised with the Chair of the Oversight Board and again, given the Oversight Board's role in overseeing the resettlement arrangements for individual patients, there were issues around protecting the confidentiality of those discussions. As an alternative, Mark proposed that he and David Petticrew would instead act as a conduit to continue to engage with TILII's to discuss MDAG and the Oversight Board, and sought members views on this proposal.

8. Meadhbha Monaghan agreed that it was important to find a mechanism for the patients' voice to be heard at MDAG as there was not one currently, and considered the views of the family representatives and the other advocacy services represented on MDAG should inform this. Grainne Close confirmed that Mencap were happy to be involved in consideration of this.
9. Brigene McNeilly agreed the importance of patient views being heard, and asked for clarity on the appropriateness of the discussion of individual patients' circumstances at MDAG meetings. Peter Toogood advised that MDAG was not an appropriate forum for discussions on issues relating to individual patients, as these should be raised with the responsible Trust. If however these issues pointed to broader systematic issues, then these would likely fall within MDAG's remit. Mark McGuicken agreed it was important that any discussions at MDAG should protect the confidentiality of individual patients' circumstances.
10. Following discussion, Peter requested that representatives from the Department, PCC, Mencap and Cedar consider this action further, and bring a proposed way forward to the next MDAG meeting.
11. In relation to the remaining open actions from the December meeting, Peter advised that progress on 13/12/AP2 and 13/12/AP3 was dependent on the work underway to develop the Learning Disability Strategic Plan. He noted this was not yet at a stage that would allow these actions to be addressed. Peter confirmed that these actions should remain open, pending further work on the Strategic Plan.
12. Finally, in relation to 13/12/AP4, Peter noted that initial work had been taken forward to remove some areas of duplication although more work was needed to streamline reporting mechanisms. He advised that work to support the Department's response to the Muckamore Abbey Hospital Inquiry had taken priority since the last meeting, so this action will remain open and be revisited at the next meeting.

Agenda Item 4 – RQIA Inspection Update

13. Lynn Long provided an update on the recent unannounced inspection on Muckamore in March 2023 advising that it had been an intelligence led inspection, informed by Early Alert activity and other information provided to the RQIA. The inspection had been carried out by a multi-disciplinary team over a three-week period and had been conducted over a range of time periods covering day, night and weekends.
14. In general terms, the findings of the inspection had indicated that patients were receiving a good level of care which was reassuring given the current pressures on staffing at the hospital. However, some issues in relation to staffing remained, and the RQIA were engaging with the Trust on work to address these.
15. A number of areas for improvement were identified including staffing, safeguarding and the general environment, and Lynn advised that commitments had been provided by the Trust that work would be progressed to address these areas.
16. Lynn confirmed that the RQIA had provided feedback on the inspection to the Trust on 6 April and that a draft report has been prepared, pending feedback from the Trust which was due to be received in the first week of May. Once this had been received and the report finalised, it would then be published on the RQIA website and shared with carers.
17. Members were also advised that the RQIA would continue to monitor the situation at Muckamore and that, following the inspection outcomes, an updated action plan would be submitted by the Belfast Trust.
18. Peter thanked Lynn for the update and members were reminded of the confidentiality of discussions at MDAG.

Agenda Item 5 – Update on Staffing Position

19. Peter Toogood drew attendees attention to the staffing updates contained in the Highlight Report that had been circulated with the meeting papers, and invited the Belfast Trust representatives to provide an update. Peter Sloan outlined that the nurse staffing position remained a challenge, however the Trust had maintained safe staffing levels since January. Brenda Creaney advised that the staffing position was stable at present with around 90% achievement of the staffing requirement, although 80% of these staff were agency staff. Brenda further advised that she appreciated the concern raised in the RQIA unannounced inspection report around agency staff, but highlighted that the agency staff had been working in Muckamore for some time and had developed relationships during that period. However, she acknowledged that they were temporary staff, and the situation remains fragile. Attendees were also advised that the Belfast Trust were planning to end off-contract agency staffing, although it had been agreed with the Department that this would not apply at Muckamore in the current circumstances.
20. Brenda also highlighted that a new Divisional Nurse had been appointed and had taken up post at the start of April. The postholder is an experienced nurse who has worked in learning disability services previously, and has also worked with Muckamore on staffing and rostering. Brenda also confirmed that the other senior nurses recently appointed by the Trust were now well embedded in the team.
21. In relation to the wider workforce, Peter Sloan advised that the medical staffing position remained challenging as the Trust had not yet been able to replace the two consultants who left recently. Currently there is one consultant on site and arrangements to maintain cover are also in place.
22. Peter Toogood thanked Peter and Brenda for the update and noted that whilst the staffing situation remains challenging, it was reassuring to hear mitigations were being put in place.

Agenda Item 6 – Safeguarding Audit Update

23. Darren Strawbridge updated members on progress, advising that as a result of continued engagement with the Belfast Trust the action pertaining to the Departmental ASG audit report action plan was now in a position to be closed with the ASG action plan remaining a live document for implementation by the BHSCT.
24. In response to a query from Peter Toogood on how the action plan would be monitored, Tracy Reid confirmed that the Trust had been providing updates to Aine Morrison and Darren Strawbridge throughout the action plan process and that the RQIA will include an assessment of Trust performance against the actions in their inspection arrangements.

Agenda Item 7 – Update on the MAH Public Consultation

25. Sean Scullion provided an update on the MAH public consultation confirming that six requests were received for short response extensions, in advance of the consultation closing on 24 January, as outlined earlier in the meeting. A total of 117 responses were received on the consultation by the Department.
26. Sean confirmed that the PCC had also facilitated 19 responses from their engagement activity and had provided the Department with a report summarising the key messages from their engagement.
27. Members were advised that responses had been received from a range of individuals and organisations including relatives and carers of current and past patients, former patients, patient representative groups, Trust staff, Trade Union Side, political parties, independent sector organisations, professional bodies and academics.
28. A summary of the key findings and themes from the analysis of the responses was also outlined for attendees, and these will be reflected in the consultation summary report.

29. Sean highlighted that advice on the way forward was now being prepared for the Permanent Secretary, in the continuing absence of a Health Minister. Once the Permanent Secretary had considered the advice and agreed a way forward the report would be published on the Departmental website and circulated to MDAG members.
30. Dawn Jones queried the likely timeframe for a decision to be made on the outcome of the consultation. Mark McGuicken advised that the expectation was that it would be within a matter of weeks.
31. Gavin Davidson queried the need for ongoing specialist responses, and whether some of these should be designated as hospital services. Mark McGuicken referred to the ongoing work in relation to the Learning Disability Strategic Plan, which was considering future service provision, including the level and location of assessment and treatment services. Mark confirmed that should a decision be taken to close Muckamore, it will be critical to ensure that an adequate alternative level of provision is developed to replace the assessment and treatment services currently being provided at the hospital. Sean Scullion noted that this was a clear message coming through responses to the consultation.
32. Peter Toogood advised members that, subject to consideration by the Permanent Secretary, they will be updated on progress.

Agenda Item 8 – Thematic Report Update (MDAG/04/23)

33. Peter Toogood advised that the Thematic Report Update (MDAG/04/23) had been circulated with the papers for the meeting, and noted that work on the actions on the development of the report and removal of any areas of duplication with the Highlight Report continued.
34. Darren McCaw provided a summary of the paper, including detail from the initial meetings of the Learning Disability Strategic Action Plan Task and Finish

Group, with the third meeting of the Group due to take place at the end of June. Members were also advised that the number of patients that had been resettled since the Regional Resettlement Oversight Board began meeting in August 2022 remained at seven, and an outline was provided on the recent work of the Regional Workforce Review across Adult Learning Disability Services in relation to the draft analysis reports on the different elements of the workforce.

Agenda Item 9 – Highlight Report (MDAG/05/23)

35. Sean Scullion summarised the detail of the circulated Highlight Report (MDAG/0523), drawing the attention of members to the updates provided on Adult Safeguarding Referrals, which included detail on CCTV viewing and the associated processes for this, and family liaison activity. Sean also highlighted the additional information provided on Adult Safeguarding trend data at Section 2.1 of the report. Attendees were advised that a summary of the current inpatient population and progress on the individual resettlement schemes was also included the report at Section 1.1.

36. Sean also flagged the update on patient safety metrics in Section 2 of the report which set out trends from the safety dashboard and the current staffing position at Muckamore in Section 3, drawing attention in particular to the graph included on page 14 that provided a breakdown of the workforce at Muckamore by profession.

37. In relation to the workforce graph included on page 14, Dawn Jones queried why the data included did not include any information for March. Billie Hughes confirmed that, due to the way the information is gathered, there was a four-week data delay on staffing reporting.

Agenda Item 10 – AOB

38. No other business was raised.

Agenda Item 11 – Date of Next Meeting

39. Attendees were advised that the next MDAG meeting was scheduled for Wednesday 28 June 2023 at 2pm via videoconference.

Summary of Action Points – MDAG 26 April 2023

Ref.	Action	Responsible	Update	Open/ closed
<p>No new actions were raised at this meeting.</p>				

Muckamore Departmental Assurance Group (MDAG)**2pm, Wednesday 28 June 2023****By video-conference****Minutes of Meeting**

Attendees:		Apologies:	
Peter Toogood	DoH (Co-chair)	Brenda Creaney	Belfast Trust
Lynn Woolsey	DoH	Peter Sloan	Belfast Trust
Maria McIlgorm	DoH (Co-chair) (item 7 onwards)	Tracy Reid	Belfast Trust
Mark McGuicken	DoH	Meadhbha Monaghan	PCC
Aine Morrison	DoH	Elaine Armstrong	Cedar
Sean Scullion	DoH	Rachel Gibbs	South Eastern Trust
Darren McCaw	DoH (Note)	Aidan McCarry	Family rep
Brendan Whittle	DoH (SPPG)	Margaret McNally	Family rep
David Petticrew	DoH (SPPG)		
Randal McHugh	DoH (SPPG)		
Billie Hughes	Belfast Trust		
Karen O'Brien	Western Trust		
Jan McGall	Southern Trust		
Petra Corr	Northern Trust		
Dawn Jones	Family rep		
Brigene McNeilly	Family rep		
Siobhan Rogan	PHA		
Lynn Long	RQIA		
Grainne Close	Mencap		
Johny Turnbull	Cedar Foundation		
Mandy Irvine	NI British Psychological Society		
Gavin Davidson	QUB		

Agenda Item 1 - Welcome/Introductions/Apologies

1. Peter Toogood welcomed everyone to the meeting and advised that apologies had been received from Brenda Creaney, Peter Sloan, Tracy Reid, Meadhbha Monaghan, Elaine Armstrong and Rachel Gibbs. Brigene McNeilly also provided an apology on behalf of Aidan McCarry.

Agenda Item 2 – Minute of Previous Meeting

2. Peter Toogood advised that the draft minutes of the meeting held on 26 April were circulated for comments on 23 May, and following receipt of a minor comment, were published on 13 June. Following this, a further amendment had been received and the published minutes were then updated to take account of the additional comment. Peter reminded members of the importance of responding with any comments by the requested deadline as the minutes would then be published. There were no further comments on the minutes.

Agenda Item 3 - Update on Action Points

3. An update was provided on open action points from previous meetings with Peter reminding attendees that no new actions had been raised at the April MDAG meeting.
4. In relation to updates on open action points from previous meetings, starting with those from the February meeting Peter advised that further detail had been provided by the Belfast Trust in relation to 22/02/AP3 and this was included within the circulated Highlight Report. He advised members that any queries in relation to this would be picked up under agenda item 8.
5. With regards to 22/02/AP4 in relation to engagement between the Department and advocacy bodies on MDAG, Peter asked Mark McGuicken to provide an update. Mark advised that Departmental officials had met with Mencap and Cedar to consider the most appropriate channel for the patient voice. As both MDAG and the Resettlement Oversight Board on occasion include consideration of the circumstances of individual patients, it had been agreed that including TILII as a member of either Group would present confidentiality issues. Mencap noted there were existing structures which involve TILII/ARC to facilitate engagement with individual patients and families as part of the resettlement process and it was proposed that enhancing these would represent the most effective way of hearing the patient voice. It was also agreed that the work underway to develop the Learning Disability Strategic Plan would include consideration of the appropriate and effective patient involvement

structures.

6. Mark provided an update on the work of the Learning Disability Task & Finish Group on the Learning Disability Strategic Action Plan. He highlighted a forthcoming workshop on 5 July which was intended to finalise work to baseline current Learning Disability service provision, and advised that once this initial phase of work was finalised, the Task and Finish Group would consider arrangements for involving service users and carers. Pending development of new involvement structures, Mark confirmed that he and David Petticrew would continue to meet with TILII/ARC in Muckamore and would represent their input at both MDAG and the Resettlement Oversight Board. Johnny Turnbull confirmed that Cedar would be supportive of this approach.
7. Peter confirmed he was content with the proposed approach, which would be kept under review. David Petticrew noted the importance of a proportionate approach, which could be flexed as necessary.
8. An update was provided on the remaining open actions from the December 2022 meeting, with Peter highlighting that work to complete 13/12/AP2 and 13/12/AP4 would be progressed in the context of the development of the LD Strategic Plan, with the planned workshop on 5 July an important next step in this. Peter advised these actions would remain open with a further update provided at the next MDAG meeting.
9. Finally in relation to 13/12/AP3, members were advised that an Annex had been included in the Thematic Update Report to update members on progress with open actions in the HSC Action Plan and this would be covered more fully under agenda item 7. Brendan Whittle stressed the importance of mapping all outstanding actions to the Learning Disability Strategic Action Plan. Mark confirmed that he was happy to work with SPPG to ensure this was the case.

Agenda Item 4 – RQIA Inspection Update

10. Lynn Long provided an update on the most recent RQIA unannounced inspection of Muckamore, and advised that the final draft of the inspection report had been issued to the Belfast Trust on 14 June for factual accuracy checking. The Trust response was due back with the RQIA in mid-July, and it was planned that the report would then be published.

Agenda Item 5 – Update on Staffing Position

11. Billie Hughes advised that the staffing position remained largely unchanged from previous updates. Billie confirmed that two new RNLDs had joined the workforce since the last meeting, however the position on agency staffing remained unchanged and there were no further significant issues to raise.
12. Peter queried the absence of the chart outlining the month-end workforce figures in the Belfast Trust data provided for today's meeting. Billie advised that this was an inadvertent omission, and undertook to forward this to the Department.

AP1: MAH Month-end Workforce figures to be forwarded to DoH. (Belfast Trust)

13. Billie confirmed that the registered nurses referred to in the chart outlining the number of occasions each month that there were two or more registered nurses per shift/ward were registered nurses of any type.
14. Dawn Jones queried the potential impact on patients planned activities in Muckamore when nurses accompanied patients to support trial resettlements. Billie advised that the Trust used the Telford formula for staffing levels for staff supporting patients in resettlements. She highlighted that there had recently been an unexpected spike in staff sickness levels which may have had a temporary impact on staff capacity, although a safe staffing level was maintained. Dawn noted that she believed staffing levels were good at present.

Agenda Item 6 – Update on the MAH Public Consultation

15. Sean Scullion provided a progress update on the public consultation on the future of Muckamore Abbey Hospital confirming that the summary report setting out the results of the consultation had now been completed. This had taken slightly longer than planned as resources had been diverted to support the Department's response to requests from the Muckamore Abbey Hospital Inquiry. Overall, the consultation responses were finely balanced with a small majority agreeing with the closure the Hospital.

16. Sean advised that the outcome analysis report had been provided to the Permanent Secretary, along with advice on his options for taking a decision under the powers available to him under the Executive Formation Act 2022 and the most recent guidance provided from the Secretary of State. Legal advice had also been sought on these options, and a meeting took place on 27 June on this. A final decision was expected shortly, and arrangements will be made to communicate this to all interested parties, including families, as well as MDAG members.

17. Dawn queried what would then happen once this had been done. Peter advised that this would depend on the decision. If the decision was to confirm the previous Ministers proposal to close the hospital, then planning work would start with all the relevant parties involved to bring that decision into effect. Peter confirmed that in the interim period the service would continue as it was currently, although if the decision was made to close the hospital, then there would likely be a definitive date set for this.

18. Mark advised that whatever the decision, it would be communicated to families and staff before it was publicly announced and arrangements would be put in place to ensure any communications were properly sequenced. Mark confirmed that the Department would lead on these arrangements, working in partnership with the Trust. Peter confirmed that the advice provided to the Permanent Secretary contained proposals for handling the announcement on his decision. Dawn emphasised the importance of effective communication with patients who will be impacted by the decision.

Agenda Item 7 – Thematic Report Update (MDAG/07/23)

19. Peter highlighted the ongoing work on reviewing the reporting arrangements to MDAG and the importance of monitoring progress on this, as outlined earlier in the meeting.
20. Darren McCaw advised attendees that considering the continued work on the Learning Disability Strategic Action Plan and AP3 from the December meeting, to help map outstanding learning disability actions and recommendations into the new structures being developed, an additional annex had been included with the circulated paper containing an update on those HSC Action Plan actions that remained open at the last update on the Plan. For completeness, the annex also included updates on open actions within the Transformation and Children and Young People themes.
21. While it was not planned to include this annex in every Thematic Report, it will be maintained and updated as a live document, and will be used to ensure all open actions are included in work to develop the overarching Learning Disability Strategic Action Plan.
22. The detail of the updates provided in the annex was discussed, with members advised that the date included in the update for A44 should read as 22-23 and not 23-24 as circulated. Following discussion on each of the six actions highlighted within the annex for consideration, it was agreed that A40 could be closed. In relation to the remaining five, it was agreed that:
 - A39 would remain open until all who needed to see and agree the draft protocol had done so, with SPPG to bring a further update to the August meeting;
 - A50 would remain open subject to confirmation from the Belfast Trust if this was an ongoing process or if there was an anticipated closure date;
 - A51 would remain open pending written confirmation from the Belfast Trust that the CLT would remain in place;

- A52 would remain open until the final report on the review of advocacy had been received by the Belfast Trust and shared with MDAG; and
- A54 will remain open pending clarification from the Belfast Trust on the detail of its provided update.

AP2: Updates to be provided to August MDAG on HSC Action Plan actions discussed at June meeting. (SPPG/Belfast Trust)

23. During discussion on the actions, Dawn sought clarification on what was meant by advocacy and the different types of advocacy available. Billie advised that the review referenced in A52 was considering the overall provision of advocacy, including how it was commissioned and used given the range of available advocacy groups. Peter noted that a short update on available advocacy services would be useful, and asked that this be tabled at a future MDAG meeting.

AP3: Update on advocacy services at MAH to be provided. (Belfast Trust)

24. In summarising the other main areas included within the paper, Darren highlighted that there had been two further resettlements since the paper was circulated, and consequently the number of patients was now 26, not 28 as outlined in the paper. Attendees were also advised that following the final meeting of the Regional Workforce Review across Adult Learning Disability Services on 19 June, next steps on the review were discussed and the final combined draft report of the project to date was expected to be completed by 30 June.

25. Lynn Woolsey advised that in relation to the assurance metrics included in the Thematic and Highlight Reports provided to MDAG, professional nursing colleagues are continuing to engage with Belfast Trust colleagues to help improve the framework of assurance. Maria McIlgorm noted that the excerpts in the highlight report lacked context and the assurance dashboard in its entirety has been developed to triangulate the data, context and action taken. She highlighted the work the Belfast Trust had undertaken as a good example of

work which requires further development but potentially could be rolled out regionally. Jan McGall and Petra Corr agreed that the sharing of learning and good practice from the learning disability assurance dashboard should be disseminated on a regional basis. Petra noted that it would also be useful to receive a copy of the dashboard referred to under A39 to help inform wider regional work. Maria advised that the assurance dashboard would require further development and testing and suggested that Lynn Woolsey initiate discussions with Billie, Jan and Petra and relevant stakeholders to progress this work.

AP4: Dashboard referenced in A39 to be shared regionally for information and Lynn Woolsey to get a group together to explore further development of the assurance dashboard. (SPPG/DoH)

26. Aine Morrison highlighted the importance of including all professions in the development of any new assurance framework. Maria confirmed that the development would be workforce wide and not focussed on any single profession. Maria suggested that it might be useful to set up a small subgroup around the development of the framework. Maria also agreed with the suggestion from Siobhan Rogan for the HSCQI to be involved in coordinating this across Trusts.

27. Given the range of issues discussed on this work, Peter advised that he and his team would consider options for reporting this to MDAG.

AP5: Process for regular updates on actions to MDAG to be reviewed. (DoH)

Agenda Item 8 – Highlight Report (MDAG/08/23)

28. Further to the discussion on the previous agenda item, Sean Scullion noted that the contents of the Highlight report had been evolving over recent meetings and was informed by the Belfast Trust safety dashboard data supplied in advance of each MDAG meeting. Sean confirmed that the key purposes of the report remained the provision of assurance to MDAG and providing sight of key

performance indicators, with the contents of the report kept under review as the safety dashboard work evolved. Peter added that the contents of the report would be kept under review as the work progressed to ensure that there was no duplication between reports.

29. Aine raised a number of queries around the specific detail within the paper, including seeking confirmation if the referrals to Cranfield 2 Ward, as detailed on page 1, were in relation to recent cases. Billie advised that element of the paper related to historical cases and undertook to confirm this. Billie also confirmed that issues in relation to medical staff were considered at a separate meeting, in line with the process for medical staff, and this was led by a DAPO from the historical review team.

AP6: Time period covered by detail in relation to Cranfield 2 referrals on page 1 of June Highlight Report to be confirmed. (Belfast Trust)

30. Aine requested that a breakdown of incident type be provided for the chart on page 11 providing figures from the Datix system and asked if a chart providing the breakdown of categories of abuse could also be provided, as had been the case previously. Aine also queried if additional information on outcomes could be made available. Billie advised that whilst the information on categories was captured and could be provided, the provision of data on outcomes was being developed but was not currently included in the dataset.
31. Lynn Woolsey sought clarification on the detail in the restrictive interventions chart included on page 11, specifically if the detail in relation to the entry that all physical interventions were low level holds, particularly in relation to the data regarding rapid tranquillisations. Billie advised that she would check and confirm the data presented, as well as the refining the categories to provide clarity. Lynn commended the Trust performance on seclusions since October 2022.

32. Mark suggested it would be helpful to establish a sub-group to review the information provided in the Highlight Report and the safety dashboard, to consider how these might be amalgamated. Lynn agreed to convene a sub-group to begin this work, though she advised she would shortly be moving to a new post. Peter confirmed that if Lynn established the sub-group, arrangements to continue this work would be agreed with Maria.
33. Petra Corr raised a point of accuracy around the detail on page 7 in relation to the learning disability beds at Holywell, clarifying that one bed was currently occupied and the other two were operational.
34. Dawn highlighted that whilst the work on safeguarding and reporting was essential, it was important that members bear in mind that the statistics and figures all relate to individual vulnerable people. Peter thanked Dawn for acknowledging the important role of effective reporting systems in identifying any concerns, and for the timely reminder that the wellbeing of patients is the primary motivation of the work overseen by MDAG.

Agenda Item 10 – AOB

35. No other business was raised.

Agenda Item 11 – Date of Next Meeting

36. Attendees were advised that the next MDAG meeting was scheduled for Wednesday 23 August 2023 at 2pm.

Summary of Action Points – MDAG 28 June 2023

Ref.	Action	Responsible	Update	Open/ closed
28/06/AP1	MAH Month-end Workforce figures to be forwarded to DoH.	Belfast Trust		
28/06/AP2	Updates to be provided to August MDAG on HSC Action Plan actions discussed at June meeting.	SPPG/Belfast Trust		
28/06/AP3	Update on advocacy services at MAH to be provided.	Belfast Trust		
28/06/AP4	Dashboard referenced in A39 to be shared regionally for information and Lynn Woolsey to get a group together to explore further development of the assurance dashboard.	SPPG/DoH		
28/06/AP5	Process for regular updates on actions to MDAG to be reviewed.	DoH		
28/06/AP6	Time period covered by detail in relation to Cranfield 2 referrals on	Belfast Trust		

Ref.	Action	Responsible	Update	Open/ closed
	page 1 of June Highlight Report to be confirmed.			