### **UNAPPROVED**

### **NHS GRAMPIAN**

Board Meeting 06 08 20 Open Session Item 4

Board Meeting - Thursday 2 July 2020 at 10.00am

The following were in attendance at a virtual meeting held using Microsoft Teams

**Board Members** 

Professor Lynda Lynch Chair, Non-Executive Board Member

Mrs Amy Anderson Non-Executive Board Member

Mrs Rhona Atkinson Vice-Chair, Non-Executive Board Member

Professor Siladitya Bhattacharya Non-Executive Board Member

Professor Amanda Croft Chief Executive

Mrs Kim Cruttenden. Chair of Area Clinical Forum/Non-Executive Board Member

Cllr Isobel Davidson Non-Executive Board Member

Mr Albert Donald Non-Executive Whistleblowing Champion

Ms Joyce Duncan Non-Executive Board Member

Mr Alan Gray Director of Finance

Mrs Luan Grugeon Non-Executive Board Member

Dr Caroline Hiscox Nurse Director

Miss Rachael Little Employee Director/Non-Executive Board Member

Cllr Douglas Lumsden
Cllr Shona Morrison
Mon-Executive Board Member
Mr Jonathan Passmore
Mr Sandy Riddell
Mr Dennis Robertson
Mr John Tomlinson
Non-Executive Board Member
Non-Executive Board Member
Non-Executive Board Member
Non-Executive Board Member

Mrs Susan Webb Director of Public Health

**Attendees** 

Mr Paul Allen Director of Facilities and eHealth

Mr Paul Bachoo Medical Director - Acute
Mr Simon Bokor-Ingram Interim Chief Officer, Moray

Dr Adam Coldwells Interim Director of Strategy/Deputy Chief Executive

Mrs Susan Coull Operational Director of Workforce

Miss Lesley Hall Assistant Board Secretary

Mr Stuart Humphreys Director of Marketing and Corporate Communications

Mrs Karen Low PA

Mrs Sandra MacLeod Chief Officer, Aberdeen City
Mr Gary Mortimer Director of Operational Delivery
Mr Tom Powers Director of People and Culture
Ms Lorraine Scott Acting Director of Modernisation

**Apologies** 

Professor Nick Fluck Medical Director

Mrs Angie Wood Chief Officer, Aberdeenshire

## 1 Apologies

Noted as above.

### 2 Declarations of Interest

There were no declarations of interest.

#### 3 Chair and Chief Executive's Welcome

Professor Lynch welcomed everyone to the meeting and Professor Croft welcomed Tom Power as the new Director of People and Culture. She thanked Susan Coull for covering the director's role on an interim basis during which time she had done a sterling job.

Professor Croft explained that as the organisation was moving to the next remobilisation stage, it was important that we supported staff and addressed any concerns they may have regarding our plans for the future and the changes that will be required to meet the health and social care needs of the population. The arrangements within the leadership model have already transitioned and preparations were taking place to support change following the Staff Governance Standard and our existing policies. The Director of People and Culture will have an important role to supporting the Board and staff during this period.

Mrs Coull explained that it was an ongoing challenge to provide information to staff who had no access to the internet. She stressed that it was important for managers to ensure staff were kept informed. Mr Humphreys advised that audio and sign language versions of the staff briefings were now being provided to improve accessibility to these.

Professor Croft also confirmed that we had committed to the continuation of the Psychological Resilience Hub until the end of March 2021 and that continuation beyond this period would be considered as part of the wider redesign of services. With regard to the Psychological Resilience Hub, this had been advertised and promoted frequently through emails and bulletins.

Mr Donald reported, from attendance at the Grampian Area Partnership Forum (GAPF) and Staff Governance Committee, that there appeared to be a groundswell of feeling coming through from staff. Professor Croft responded that there was anxiety in some staff groups because of uncertainty, which was normal in the circumstances, but it was important to deal with these concerns and support staff and their wellbeing at this time. There was an opportunity to continue with new methods of working and to support appropriate innovation and change.

Miss Little explained that existing processes and policies would be followed and pieces of work relating to recovery were focused on addressing staff concerns and issues appropriately. Dr Coldwells explained that involving all staff was important and that planning for the next steps was progressing.

Mr Passmore agreed that it would be more concerning if staff were not making their concerns known. He acknowledged the immense effort on the part of management to pass out as much information as necessary, although there were challenges to information reaching all staff and that it may be out of date because of the speed of change. The System Leadership Team (SLT) had done an outstanding job and the Board should be reassured by this. He explained that the Staff Governance Committee will remain focused on workforce aspects and was particularly supportive of the work of the Psychological Resilience Hub.

The Chair acknowledged that the discussion reflected how important staff were to the Board and that the governance structures used over the last few months had provided suitable assurance.

She wished to add her thanks to Mrs Coull for an incredible job dealing with challenges and for her commitment to the interim role. She also welcomed Mr Power, who responded that he was pleased to be joining NHS Grampian.

The Chair intimated that Amy Anderson had been appointed for a second term of four years from 1 August 2020 and that Kim Cruttenden's appointment to the Board, as Chair of the Area Clinical Forum (ACF), had been extended up to another nine months to allow elections to take place. Mrs Cruttenden acknowledged that she was delighted to stay on longer and that ACF colleagues had supported this extension, with the elections being moved to 2021.

# 4 Minutes of Meeting on 4 June 2020

The minutes were approved subject to the following amendments:

- 1. Attendance list on page 1: Removal of Mrs Anderson's name from list of attendees as she had submitted apologies.
- 2. Item 6.1.1 on page 5: Add the following sentence to the end of paragraph 4: Mr Passmore explained that whilst he had supported the initial proposals for the elective care centre, it had been with the critical inclusion of diagnostic capacity away from Foresterhill. As that was not part of what had now been funded, he could not now support the proposal.

### Matters arising:

COVID-19 hotspots – whilst local information and intelligence would be used, actions in relation to localised outbreaks would be identified and addressed following national direction and advice.

Patient feedback – only one complaint had made reference to use of digital technology and there were numerous compliments on the effectiveness and ease of digital solutions for consultations. Both local and national surveys were being undertaken to understand the impact. Feedback from clinicians had been positive and further feedback from patients was expected in the next few months.

## 5 NHS Grampian Re-mobilisation Plan

The paper that had been circulated summarised progress against the following key elements of the Re-mobilisation Plan that had been submitted to the Scottish Government Health and Social Care Directorates:

- Responding to and living with COVID-19 / Non COVID-19
- Urgent elective and cancer care
- Child and Adolescent Mental Health Services
- Care Home support
- Unscheduled care Operation Home First
- Test and Protect
- Staff Wellbeing

Mr Gray's presentation focused on the following aspects:

- Update on progress against the plan
- Next re-mobilisation plan
- Care Homes
- Test and Protect

The aim of the integrated Re-mobilisation Plan was to co-ordinate a whole-system response to the safe delivery of healthcare whilst living with COVID-19 that minimised harm, maximised outcomes and enabled learning, recovery and renewal to meet future needs. The aim and objectives for the plan were informed through engagement with a significant number of staff across NHS Grampian and the three Local Health and Social Care Partnerships.

With regard to scheduled care:

- Overall waiting list size for outpatients has decreased since 27 April (2%), with Treatment Time Guarantee (TTG) waiting list size up 7%
- The number of Elective Surgery Categorisation System (ESCatS) 1 waiting over 4 weeks had decreased to 495 (6 May – 674) and we remained on track to reduce the backlog of cancer patients waiting for surgery in line with the current plan.
- Overall numbers of waiting beyond 12 week standard continues to increase.

There had been a significant growth in digital consultations, with Grampian having the largest number per week. Numerous services were using e-consultations, particularly oncology, Child and Adolescent Mental Health Services (CAMHS) and community nursing.

In the previous week there had been an increase in the number of attendees at the Emergency Department, putting pressure on unscheduled care services.

As the Plan was a live document it will continue to be developed. The next version of the Plan would be more aligned to the clinical strategy and is due for submission to Scottish Government by 31 July 2020.

With regard to enhanced professional and care oversight of Care Homes, the Board was provided with a RAG (red Amber Green status) report for Aberdeen City, Aberdeenshire and Moray. Care Home testing figures were provided for June showing the number of residents and staff tested during weeks commencing 15, 22 and 29 June.

Following the presentation, Board members discussed the importance of involving the third sector more, particularly relating to self-management and prevention, and also engaging with communities and patients. Mr Gray advised that there would be more emphasis on these in the next iteration of the plan. The Director of Marketing and Corporate Communications would be setting out a plan for engagement with the public in relation to remobilisation of services and planned changes. There was a strong commitment to public involvement and engagement in future planning vital to redesign of services.

Mr Bokor-Ingram explained that the Health and Social Care Partnerships were committed to working in partnership with the third sector.

Mr Gray advise that further work was being done on outcome measurements so that progress with the implementation of the plan can be monitored.

Professor Croft accepted that it was necessary to make the key high level enablers, relating to the culture of the organisation and compassionate leadership, more explicit in the Re-mobilisation Plan. Mr Power, as recently appointed Director of People and Culture, would have a lead role in this.

The next version of the plan will have more detail on the primary/secondary care interface. National guidance on communications was awaited and Mr Humphreys advised that it was necessary for materials to be aligned, localised and applied. A request was made for a separate risk analysis to test the validity of assumptions.

Board members commended progress with the plan, particularly CAMHS performance and digital access to consultations.

Assurance was sought on the clinical risks relating to supporting care homes and the changing role of Directors of Public Health, together with the enhanced responsibilities of the Medical and Nurse Directors. Professor Croft advised that she and the Chief Executives of the Local Authorities had commissioned the Chief Officers to review the arrangements in place to support care homes during the initial COVID-19 response and the decisions made at this time,

Mrs Webb advised that colleagues across health and social care were working closely with Care Homes and that there was a real team effort to make progress. She explained that the Director of Finance was supportive locally of using available national funding for the additional work involved. There were concerns around the resilience of the Public Health Team and a plan had been developed to appoint support staff. Funding was being discussed with the Scottish Government.

Mr Gray advised the Board that NHS Grampian was on track with the plan at week 4 of the 8 week programme. He agreed to provide an update to Board members in advance of the August Board meeting.

#### The Board:

Noted the Re-mobilisation Plan submitted to the Scottish Government Health and Social Care Directorates. On 25 May 2020 setting out the Board priorities for the period to July 2020

Reviewed the current position regarding progress against the Re-mobilisation Plan and the proposed approach to development of the Re-mobilisation Plan for the period post July 2020

In addition, the Board noted the positive progress and recognised the impressive job done by senior colleagues in dealing with the COVID-19 situation and planning for Re-mobilisation.

The Board also acknowledged the significant progress made in Grampian particularly with digital solutions and in Child and Adolescent Mental Health Services (CAMHS).

# 6 Committee Reports – Assurance Reports in relation to COVID-19

The Board noted the following committee reports:

### **6.1 Staff Governance Committee**

Mr Passmore explained that there had been considerable focus on PPE (personal protective equipment), Health and Safety, redeployment of staff and testing. He advised that the quality of work done and presented to the committee was generally excellent. The audit of the Staff Governance Standard during COVID-19 would provide a valuable contribution to the work of the Committee over the next 12 months. The pressures on staff were acknowledged. Senior management had done a remarkable job managing during the crisis but some tensions were apparent from the audit. The positive role of partnership working was evident in the audit and credit was given to staff and staff side for the way they had dealt with problems.

The Chair formally acknowledged, on behalf of the Board, the significant contribution of staff side which had been critical to the success of managing the COVID-19 response.

#### 6.2 Clinical Governance Committee

Mrs Duncan also commended colleagues for the quality of reports and speed at which they had been provided for the more regular committee meetings. She also thanked SLT colleagues for fitting in support for clinical governance

matters along with other priorities.

# 6.3 Performance Governance

Mrs Atkinson added thanks to colleagues during an intensive period of work. She highlighted that the committee had continued with its assurance role and would be resuming more of its normal business and would oversee the implementation of the Remobilisation Plan.

# 7 Date of Next Meeting

The next meeting will be on Thursday 6 August 2020 at 10.00am by MS Teams.

# 8 AOCB

There was no other business.