

APPROVED

NHS Grampian (NHSG)
Minute of the Performance Governance Committee
Tuesday 17th September 2019, 14.00-16.30
Conference Room, Summerfield House

Present

Mrs Rhona Atkinson, Non-Executive Board Member, NHS Grampian (Chair)
Ms Joyce Duncan, Non-Executive Board Member, NHS Grampian
Ms Luan Grugeon, Non-Executive Board Member, NHS Grampian
Ms Rachael Little, Employee Director, NHS Grampian
Councillor Shona Morrison, Non-Executive Board Member, NHS Grampian

In Attendance

Professor Amanda Croft, Chief Executive, NHS Grampian
Mrs Jillian Evans, Head of Health Intelligence, NHS Grampian
Mrs Fiona Francey, Chief Officer, Acute Services, NHS Grampian
Mrs Jenny McNicol, Acute Director of Nursing and Midwifery, NHS Grampian
Ms Else Smaaskjaer, Minuting Secretary

Item	Subject	Action
1	<p>Welcome</p> <p>Mrs Atkinson welcomed everyone to the meeting.</p> <p>Apologies</p> <p>Mr Paul Bachoo, Acute Medical Director, NHS Grampian Professor Nick Fluck, Medical Director, NHS Grampian Mr Alan Gray, Director of Finance, NHS Grampian Mrs Caroline Hiscox, Acting Director of Nursing, Midwifery and AHPs, NHS Grampian Mrs Susan Webb, Director of Public Health, NHS Grampian</p>	
2	<p>Minute of Meeting Held on 14th May 2019</p> <p>The minute of the previous meeting was approved as an accurate record.</p>	
3	<p>Matters Arising</p>	

Item	Subject	Action
	<p data-bbox="272 268 324 304">3.1</p> <p data-bbox="367 268 521 304"><u>Action Log</u></p> <p data-bbox="367 342 1273 447">The Committee reviewed the action log and agreed it should be updated to include items from the meeting on 14th May. The log will be reviewed again at the next meeting on 19th November.</p>	
	<p data-bbox="272 495 324 531">3.2</p> <p data-bbox="367 495 672 531"><u>Other Matters Arising</u></p> <p data-bbox="367 569 1284 674"><u>Community Planning Partnerships</u> – Ms Grugeon asked that a future meeting of the Committee should consider how NHSG can provide assurance that it is fulfilling its role with regard to CPPs.</p> <p data-bbox="367 711 1260 779"><u>Dementia Post Diagnostic Support Services</u> – an update will be provided to a future Committee meeting.</p> <p data-bbox="367 816 1182 884"><u>Vaccination Rates</u> – an update will be provided to a future Committee meeting.</p> <p data-bbox="367 921 1166 989"><u>Access to Drug and Alcohol Services</u> – an update will be provided to a future Committee meeting.</p> <p data-bbox="367 1026 1247 1094"><u>Acute Sector Performance Update</u> – additional narrative to the report had been provided.</p> <p data-bbox="367 1131 1247 1199"><u>Annual Operational Plan</u> – progress reported within the NHSG Performance Report.</p>	
4	Performance Reports	
	<p data-bbox="272 1335 324 1371">4.1</p> <p data-bbox="367 1335 764 1371"><u>NHSG Performance Report</u></p> <p data-bbox="367 1409 1273 1581">Mrs Evans introduced the Performance Report to September 2019. Mrs Evans explained that this mid-year report summarised progress against actions in the Annual Operational Plan and highlighted some key areas for the Committees attention:</p> <ul data-bbox="367 1619 1284 1875" style="list-style-type: none"> • Unscheduled Care: NHS Grampian does not meet the 95% target regarding 4 hours from arrival to admission, discharge or treatment but it does compare well with other areas in Scotland. Ms Grugeon asked why the target had been set at 95% and if there is any evidence to indicate a positive impact if patients are seen within the four hour period. Mrs Francey reported that the target had most likely been agreed by the 	

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	<p>Royal College and although there is some move towards looking at average waiting times and the impact of surges in ED on patient safety, this will still be measured against the 4 hour access standard.</p> <ul style="list-style-type: none"> • Delayed Discharge: data indicated fluctuations with Aberdeen City showing a downward trend. Councillor Morrison noted that the information in the report is not time synchronised and asked if more up to date information should be provided to the Committee. Mrs Evans confirmed that only published data can be used for Board reporting. Mrs Atkinson noted that HSCPs are all working towards a reduction in patient delays. Professor Croft suggested that information from performance review meetings with IJBs could be included in the report and Mrs Atkinson agreed that this would be useful at mid-year and year-end. • MHLDS – figures indicate an improvement but there is still some way to go in reaching the targets set for 2020. Professor Croft explained that NHS Grampian had been using a distinct reporting model and work is ongoing to move towards national standard reporting. Ms Grugeon asked if the introduction of school counsellors will have a positive or negative impact on waiting times. It was agreed that although new initiatives can often lead to an increase in referrals school liaison work is supported by CAMHS and any inappropriate referrals will be signposted to other agencies as required. • Elective Care – following the introduction of additional capacity at Stracathro further improvements are anticipated in the number of patients waiting. • Cancer – due to capacity and workforce challenges it is likely that in the short term NHS Grampian will remain vulnerable against the 62 day standard. <p>Mrs Francey asked the Committee to note some recent initiatives to address TTG and Waiting Times. The unscheduled care team had formed a short life working group which will examine the data set across the whole system. Surgeons now discuss with patients all the options available allowing them to make informed decisions regarding how to proceed with their ongoing care. In time it is anticipated that this will reduce Category 3 surgical waiting times. Taking a wider system view there is ongoing work with Aberdeen City regarding the information and services</p>	

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	<p>available at practice level. Members were pleased to note these initiatives.</p> <p>Mrs Atkinson asked if there had been any progress regarding the NHS Grampian Cancer Improvement Plan and the challenges regarding availability of staff. Mrs Francey confirmed that there are a number of difficulties in maximising theatre capacity for all patients, including the availability of theatre nurses and anaesthetists. Mrs McNicol informed members that a number of applicants are taking up places on a two year programme, developed by the University of the West of Scotland, leading to a Diploma qualification and registration as an Operating Department Practitioner. The candidates will be employees of NHS Grampian and will work at appropriate levels in the organisation. It is intended that the skills and experience developed will be utilised across the organisation.</p> <p>Members noted the report and it was agreed that Mrs Atkinson and Ms Evans will discuss the dissemination of ISD Statistics Publications and examine how the information provided on performance can be contextualised.</p>	RA/JE
4.2	<p><u>Acute Sector Performance Report</u></p> <p>An information pack giving an overview of acute sector performance had been circulated prior to the meeting and Mrs Francey highlighted the following as background information:</p> <ul style="list-style-type: none"> • Waiting Times Performance – the intended position with regard to TTG had slipped, mainly due to delays in establishing additional capacity at Stracathro. The joint model with NHS Tayside will commence on 30th September and the slippage had been agreed with the SG team. The intended position for outpatient waiting times had also slipped due to reliance on temporary agency staff and independent contractors. However, Mrs Francey reported that services had worked hard to reduce the number of patients on waiting lists and the introduction of ‘see and treat’ contracts had been helpful. With regard to long wait patients a manager had been aligned to follow up and ensure that all those waiting in excess of 78 weeks had been vetted by clinicians and assurance provided that they are not clinically at risk. Mr Francey also informed members that a significant year on year increase in requests for MRI scanning had impacted on the number of patients waiting for more than six weeks for key diagnostic 	

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	<p>tests.</p> <ul style="list-style-type: none"> • Cancer Performance – the cancer team now includes a senior manager and improvements made during the past year and a recent visit from Scottish Government colleagues had resulted in a positive report. • Waiting Time Improvement Plan – NHS Grampian is not achieving all the agreed milestones but there had been significant improvement from previous position. • Unscheduled Care – funding indicated for winter planning less than that allocated in previous years. Ms Little observed that staff had noted concerns that there does not seem to be any respite from seasonal spikes and there is no capacity left to accommodate any additional increase in activity without placing significant pressure on the system. Mrs Francey agreed that there had been a gradual year on year rise in activity. She noted an increase in admissions through ambulatory care services and the impact of reduced bed numbers in community hospitals which she continues to monitor with IJB Chief Officers. • Finance – staff continue to work on developing composite working models to reduce locum and agency nursing spend. <p>Ms Grugeon queried the reactive nature of locum spend and asked if it would be possible to review how they are used in the organisation. Mrs Francey noted that the Acute Sector Management Team are aware of the cost of locums but they often fill fundamental gaps in vulnerable areas of service and are particularly valuable in supporting the work of small specialised teams. She agreed it would be more beneficial if locums could be offered an attractive package and appointed into established posts. There are ongoing discussions between Scottish Government colleagues, Medical Directors and HR Directors regarding the reintroduction of staff graded posts.</p> <p>Members noted the report and thanked staff for their work in achieving the improvements made to date.</p>	
5	Other Performance Topics	

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5.1	<p data-bbox="370 264 594 296"><u>Finance Report</u></p> <p data-bbox="370 342 1295 667">Mr Sharp presented the financial summary for the four months ended 31st July 2019. He reported an overspend at this point in the financial year but with slippage and the impact of agreed savings programmes it is forecast that there will be a break even position at year end. One of the main areas of pressure continues to be agency locum spend and Mr Sharp reported that the Acute Sector are reviewing locum usage and a move towards direct engagement with locum staff which will result in VAT savings.</p> <p data-bbox="370 705 1305 814">Mr Sharp noted that two of the main risks to financial performance are indicated overspends by Aberdeenshire and Moray IJBs and any additional costs which materialise as a result of Brexit.</p> <p data-bbox="370 852 1305 1325">Ms Duncan asked if it was reasonable that there should be such a large overspend at this point in the financial year. Mr Sharp advised the current overspend represented a very small percentage of the overall annual budget, is considered to be within the boundaries of accessibility and that financial break even should be achievable at year end. Ms Duncan also asked why the forecasted overspend by IJBs is not provided for in the annual budget. Mr Sharp informed the Committee that it had been considered unwise to give IJBs the message that any overspend on their part had been built into the NHS Grampian budget and Professor Croft confirmed that during performance reviews IJBs are reminded of the need to achieve financial balance.</p> <p data-bbox="370 1362 1295 1619">Members discussed the difficulties of making savings in the context of having less to spend. Professor Croft noted the obligation to support teams in meeting targeted savings and members agreed that the introduction of the Health and Care (Staffing) (Scotland) Bill, known as the Safe Staffing Bill, will have a significant impact and present the Board with some challenging decisions.</p> <p data-bbox="370 1656 1203 1766">Ms Grugeon asked if the overspend associated with MHL D Services will transfer to Aberdeen City IJB and Mr Sharp confirmed there are ongoing discussions.</p> <p data-bbox="370 1803 1110 1835">The Committee thanked Mr Sharp for his update.</p>	
5.2	<u>NHS Grampian Resilience – Annual Report</u>	

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		<p>The Committee agreed that as both the Director of Public Health and the Head of Civil Contingencies were unable to attend the meeting this item should be brought back to the next meeting of the Committee in November.</p>	RA
6	Assurance Framework.		
	6.1	<p><u>Board Assurance Framework</u></p> <p>The Committee agreed that the Framework should be reviewed to take into account national guidance and discussions at the recent Development Session. This item will be brought back to the next meeting of the Committee.</p>	RA
7	Risk		
	7.1	<p><u>Strategic Risk Register</u></p> <p>It was agreed that the risks assigned to the Committee should be reviewed in full at a future meeting.</p>	RA
8	<p>Report to NHSG Board</p> <p>The Committee agreed that the following items would be of interest to all Board members:</p> <ul style="list-style-type: none"> • Performance Update; • Financial Report; • Assurance Framework; and • Risk Register 		
9	AOCB		
	9.1	<p>Mrs Atkinson suggested a longer meeting of the Committee in November to allow time to consider the issues raised and how the Committee can work towards the development of a single system assurance framework.</p>	
10	<p>Date of Next Meeting</p> <p>Tuesday 17th September 2019 12.00-16.30 Conference Room, Summerfield House (Lunch will be provided)</p>		