

## APPROVED

## NHS GRAMPIAN

Board Meeting – Thursday 1 April 2021 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 Rhona Atkinson	Vice-Chair, Non-Executive Board Member (Chair)
Mrs Amy Anderson	Non-Executive Board Member
Professor Siladitya Bhattacharya	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
Professor Caroline Hiscox	Chief Executive
Miss Rachael Little	Employee Director/Non-Executive Board Member
Cllr Shona Morrison	Non-Executive Board Member
Mr Jonathan Passmore	Non-Executive Board Member
Mr Sandy Riddell	Non-Executive Board Member
Mr Dennis Robertson	Non-Executive Board Member
Dr John Tomlinson	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
Miss Louise Ballantyne	Head of Engagement
Mr Simon Bokor-Ingram	Chief Officer, Moray
Dr June Brown	Interim Nurse Director
Dr Adam Coldwells	Director of Strategy/Deputy Chief Executive
Miss Lesley Hall	Assistant Board Secretary
Mr Stuart Humphreys	Director of Marketing and Corporate Communications
Mr Gary Mortimer	Director of Operational Delivery
Mr David Pflieger	Director of Pharmacy (Item 6)
Mr Tom Power	Director of People and Culture
Mrs Alison Wood	PA
Mrs Angie Wood	Interim Chief Officer, Aberdeenshire

### Apologies

Mrs Kim Cruttenden	Chair of Area Clinical Forum/Non-Executive Board Member
Cllr Isobel Davidson	Non-Executive Board Member
Professor Nick Fluck	Medical Director
Mrs Sandra MacLeod	Chief Officer, Aberdeen City
Ms Lorraine Scott	Acting Director of Modernisation

## **1 Apologies**

Professor Lynch welcomed everyone to the meeting including members of the media and members of the public forum who were observing this month.

Apologies were noted as above. Cllr Davidson had intimated that she was a candidate in the forthcoming Scottish Parliamentary elections and would therefore not be attending any NHS Grampian meetings in the pre-election period.

## **2 Declarations of Interest**

There were no declarations of interest.

## **3 Chair and Chief Executive's Introduction**

Professor Hiscox started her introduction by advising that situation with COVID-19 was looking more optimistic and, as of today (1 April 2021), NHS Grampian had stepped down Operation Snowdrop – level 4 response to the pandemic. The Board would now be in a level 3 response and the NHS across Scotland would remain on an emergency footing until at least June 2021. She urged everyone to continue to encourage others to attend for their vaccine when called, and follow FACTS and other Scottish Government guidance.

Professor Hiscox gave her personal thanks to everyone who worked across Grampian in health and social care for all they had done during the pandemic. She emphasised that it was critical for staff to have recovery time as services were remobilised. A balance would be required to support exhausted teams whilst also ensuring that patients who had waited for treatment due to the pause in services were seen. She expressed her appreciation for the support from the population and assured them that NHS Grampian would be prioritising those most in urgent need of treatment.

She confirmed that NHS Grampian was holding a session in later in April for the launch of the process for developing the NHS Grampian Strategy 2022-28 with Board members and other key partners.

Finally, Professor Hiscox reminded Board colleagues that in March 2021 the Cabinet Secretary had commissioned an independent review of maternity services in Moray which would be led by Mr Ralph Roberts, Chief Executive of NHS Borders. She emphasised that NHS Grampian welcomed and was fully supportive of the independent review. She also acknowledged the impact that the unavoidable delay to the Best Start North work had on both women and families who lived in Moray and on maternity services staff both in Dr Gray's Hospital and across Grampian. The review was expected to report in the summer of 2021.

Professor Lynch also added her thanks to all our staff who were working to recover, reshape and remobilise services. She also wished it noted that the Cabinet Secretary and the Chief Executive of NHS Scotland, had requested that their thanks be conveyed to our staff.

The previous week there had been a COVID-19 focused unannounced inspection of Aberdeen Royal Infirmary (ARI) by Health Improvement Scotland. Professor Lynch thanked the staff involved including Acute Sector and ARI leadership teams: Faye Simpson, Judith McLennan, Chief Nurses Yvonne Wright and Linda Oldroyd, the Infection Prevention and Control Team including Noha El Sakka, Grace Johnston and Leanne Bruce, Grace McKerron, the Safer Workplaces team, Gillian Poskitt and the portering and domestic services teams. The professionalism and openness of our staff had been acknowledged by the inspection team.

Professor Lynch highlighted changes to the Board membership and responsibilities:

- Mr Douglas Lumsden had stepped down as Aberdeen City Council's representative to focus on his Holyrood campaign. The Board's thanks to Mr Lumsden was noted. A new representative from the Council was awaited.
- Mrs Rhona Atkinson, was to be Chair of Aberdeenshire Integration Joint Board from 1 May 2021 and had decided to step down as Vice Chair Professor Lynch thanked Rhona for the dedication, time and effort that she had put into the role during her tenure.
- Professor Lynch also thanked Mr Jonathan Passmore following his completion of two full terms on the Board of NHS Grampian. She highlighted Jonathan's clear strategic thinking, rigour and solutions focus, as well as a sincere and deep compassion for the most vulnerable in our society. He had been a member of many committees and, as chair of the Staff Governance and Remuneration Committees, had a significant role in ensuring the Staff Governance Standard was maintained and our partnership approach was valued. He had also played a pivotal role in leading and developing the integration of health and social care. Having chaired both the Aberdeen City and Moray Integration Joint Boards, he had clearly demonstrated his leadership ability and commitment to the transformation of health and social care throughout Grampian.

Mr Passmore responded to Professor Lynch's comments by reflecting on the lessons learned during his time on the Board. He felt that NHS Grampian had strong leadership with a commitment to learning and developing. He believed that the Health and Social Care Partnerships in the North East led the way for integration. He encouraged the ongoing discussions around Dr Gray's Hospital to ensure that there was a high quality sustainable and safe solution. He requested that his thanks be passed on to the NHS Grampian partnership working team.

#### **4 Minutes of Meetings on 4 February 2021**

The minutes were approved subject to the amendment of Dr Brown's designation to Interim Executive Nurse Director.

#### **5 Governance Committee Assurance Reports**

The Board noted the following reports and points of note from the Committee chairs:

## **5.1 Clinical Governance Committee (12 February 2021)**

Mr Tomlinson highlighted:

- Safety – assured on the progress detailed in the report
- Protected Critical Services
- Dr Gray`s Hospital focus

There had been a discussion on waiting times and that remobilisation of services offered an opportunity to think and work differently locally, regionally and nationally. The importance of engaging with the public at an early opportunity to manage expectations for returning to ‘normal’ was highlighted. There were streams of work ongoing to understand the impact of the delays in treatment. Regular reporting on this work was requested to go through Clinical Governance Committee. Mrs Anderson advised that the Engagement and Participation Committee would also be able to provide a broad oversight.

The Board noted that the Healthcare Associated Infection Reporting Template (HAIRT) & Quarterly Report were considered as part of due diligence and audit trail purposes.

## **5.2 Staff Governance Committee**

### **5.2.1 Staff Governance Committee (15 January 2021)**

### **5.2.2 Staff Governance Committee (16 March 2021)**

Ms Duncan highlighted:

- Health, Safety and Wellbeing Programme
- Mobilisation and deployment of staff
- Implementation of the national Whistleblowing Standards

## **5.3 Performance Governance Committee (17 February 2021)**

In line with the revised arrangements, the business of the Committee has been focused on the key matters in relation to performance governance relevant to the Board’s response during the period of the COVID-19 remobilisation plan. Mrs Atkinson provided assurance to the Board that the Committee was looking into performance of services in significant detail and that what could be done was being done well.

## **5.4 Audit Committee (16 February 2021)**

Mr Riddell highlighted:

- Practitioner Services - National Service Audit Reports
- Brexit
- Annual Internal and External Audit Plans

The Committee had discussed partnership work between Integration Joint Boards and NHS Grampian to adapt in a changing environment and to develop assurance systems.

## **The Board noted the Reports.**

### **6 Remobilisation Plan 2021-2022**

Mr Gray confirmed that in response to the requirement from the Scottish Government Health and Social Care Directorate for re-mobilisation plans covering the period to the end of March 2022 NHS Grampian had submitted its draft Remobilisation Plan on 1 March 2021 and final comments on the plan were expected from Scottish Government shortly.

Professor Hiscox had previously shared informally with the Board a vision for the future of NHS Grampian. Board members and partners from other organisations were scheduled to meet in April to launch the development of the NHS Grampian strategy 2022-28, for implementation at the start of 2022. This strategic plan would provide the framework for the delivery of services over the coming years and would build on the work in the Clinical Strategy and this Remobilisation plan.

Whilst the process of recovery and remobilisation would be complex and required further significant effort from our staff and partners, the Remobilisation Plan had six key focus areas:

- Continue to minimise the spread of infection and impact of COVID and support vulnerable individuals who were most at risk
- Support our staff to recuperate, recover and maintain good health and wellbeing
- Gradually build up services based on reducing harm and prioritising people in the greatest clinical need
- Work together to reduce the waiting times for services which had been temporarily paused or reduced to deal with the waves of COVID
- Work together to create services which were more sustainable and better meet needs to improve the health of the population and reduce inequalities.
- Continue to communicate as things changed and create opportunities for everyone to be actively involved

The Remobilisation plan also set out the details of the Board's infrastructure plan of £348m over the next five years, which included the significant investment in the Baird Family Hospital and ANCHOR project.

The formal plan was to be taken to the June 2021 Grampian NHS Board meeting.

The Board discussed the following aspects:

- Equality impact
- People powered health
- Communication and engagement with partners and public
- Locality engagement group

It was confirmed that work was in progress to pull together data from a wide range of sources to:

- Understand what was already in place
- Share use of language as to what was to be achieved
- Milestones

Post COVID locality engagement had commenced. Remobilisation of services offered an opportunity to think and work differently. Engaging with the public at an early opportunity to manage expectations for returning to 'normal' was a priority.

Mr Gray confirmed that the Remobilisation Plan would not be distributed to staff or the public until feedback had been received from Scottish Government. The plan would then require to come back to the Board for formal approval.

Mr Humphreys advised that a number of different communication channels would be used to highlight the Remobilisation Plan including digital and non-digital.

#### **The Board:**

- **Noted the current position regarding the status of the re-mobilisation plan which had been developed in consultation with our staff, partners and feedback provided throughout the process of planning for next financial year.**
- **Noted the key elements reflected in the plan, the high level approach and priorities and that the plan would be presented for formal approval at the June 2021 Board meeting following feedback from colleagues in the Scottish Health and Social Care Directorate.**
- **Noted that the re-mobilisation plan was based on a financial budget which was projected to be balanced in 2021/22 (including the provision of non-recurring COVID and remobilisation funding) and details of the five year capital investment plan of £348m.**

## **7 Performance Report**

Mr Gray highlighted that as a result of reducing community transmission of COVID and reduction in the number of patients in a hospital setting with COVID, combined with the steady relaxation of the national lockdown measures, the Board had exited from Operation Snowdrop to a transition period.

He highlighted the COVID 7 day positivity rate was 2.6% nationally. In City (1.7%) and Aberdeenshire (1.5%) it showed a lower level of transmission. Moray had a more variable position (2.1%). As of 31 March 2021 there had been 250,202 first doses of COVID vaccinations provided in NHS Grampian which was over 51% of the population. Test and Protect would continue to remain an important part of the response in the next financial year. 95% of contacts reached within 72 hours of test being undertaken and more than 80% of contacts reached within 24 hours of test result being issued.

Mr Gray discussed the key elements of the Winter Surge Approach which included:

- COVID Demand high during December 2020 and January 2021 and this had gradually reduced. Overall winter demand was lower than in prior years (emergency admissions)

- Flow out of main hospital sites in January 2021 was constrained by community capacity (community hospitals and care homes). The position had significantly improved, helped by the joint working between care homes and our staff

Mental Health Services were experiencing a higher demand with longer lengths of stay. There had been a greater impact due to Covid. Child and Adolescent Mental Health Services (CAMHS) was performing at 95% within the 18 week standards. Mental Health Services would continue to be given a high priority. Mr Gray agreed to provide an update on Community Mental Health Service for June 2021 Board.

Key areas of focus for Critical and Protect Services – Planned Care:

- Capacity Building –dedicated capacity at Albyn Hospital for cancer patients, increased the urology service at Dr Gray’s Hospital and established additional clinics in the Breast service
- Prioritisation – Clinical priority to target urgent and priority patients (ESCatS 0 and 1 including cancer) and to address long waiting patients.
- Patient Engagement

As a result of the action being taken during March 2021 there had been a reduction in the numbers of patients waiting for ESCatS 1 & 0 surgery. Cancer performance against 31 day was 98.4% and the 62 day performance had decreased as the additional capacity had been utilised and patients on the backlog, who had already breached, were treated.

The launch of “We Care” emphasising the importance staff health and wellbeing was highlighted. This would raise awareness and encourage re-connection with colleagues. Further details were provided on work in the following areas:

- Staff Resilience
- Remote Working
- My Healthy Life
- Safer Workplaces
- Psychology Support
- PPE Use and Supply

A discussion was held on aspects of home and remote working for staff including those shielding. There was continued progress on new ways of working.

Mrs Webb advised that work was progressing to analyse groups/areas with lower than expected uptake of the offer for vaccination.

**The Board reviewed and scrutinised the Performance Report with covered each of the key elements of Operation Snowdrop.**

## **8 Implementation of National Whistleblowing Standards**

Dr Coldwells advised that the Board had a useful development session on this topic at its seminar in March 2021.

The National Whistleblowing Standards came into effect from 1 April 2021 and applied to any organisation which provided an NHS service in Scotland. The

Standards replaced any existing whistleblowing arrangements.

Previously all NHS Boards had internal Whistleblowing Champions and a whistleblowing policy available for staff with an employment contract with the Board. All Boards now had a dedicated Non-executive Board Member with responsibility for whistleblowing in place, and the new Standards meant that anyone who provided services on behalf of the NHS Board could raise a whistleblowing concern:

- All employees (current and former)
- Students, Trainees and Apprentices
- Agency Staff and Volunteers
- Non-Executive Board Members
- Primary Care and other Contracted Service Providers and
- Anyone who worked alongside NHS staff such as in Health and Social Care Partnerships

The Standards required all NHS Boards, Health and Social Care Partnerships, Primary Care and Contracted Service Providers, Third Sector Organisations (TSOs) and Healthcare Education Institutes (HEI) to familiarise themselves with the Standards and to have implemented them in full.

It was noted that Mr Bert Donald was NHS Grampian's Non-executive Board Member with responsibility for whistleblowing and Miss Louise Ballantyne was the key lead officer for whistleblowing. Board members acknowledged their role in the governance oversight process and to actively encourage anyone with a concern to come forward. Reports would come to the Board on a quarterly basis.

Mrs Anderson advised that she had completed the National Whistleblowing Standards training on Turas and commended this to colleagues.

**The Board noted that:**

- **New National Whistleblowing Standards (referred to as 'the Standards') came into effect for all Scottish Boards on 1 April 2021; and**
- **The Standards replaced Board's local whistleblowing arrangements, which had applied only to NHS employed staff, meaning now anyone who was providing care or services on behalf of the Board, had the protection of raising whistleblowing concerns using the Standards.**

## **9 Forum and Integration Joint Boards Reports**

The Board noted the following reports:

**9.1 Grampian Area Partnership Forum (GAPF) (18 February and 18 March 2021)**

**9.2 Area Clinical Forum (ACF) (10 March 2021)**

**9.3 Integration Joint Boards (IJBs)**



## **10 Approved Committee, Forum and IJB Minutes**

The Board noted the following approved minutes:

Committees:

- 10.1.1 Staff Governance Committee (11 December 2020)
- 10.1.2 Staff Governance Committee (15 January 2021)
- 10.2 Clinical Governance Committee (13 November 2020)
- 10.3 Performance Governance Committee (16 December 2020)
- 10.4 Audit Committee (8 December 2010)

Forums:

- 10.5 Area Clinical Forum (13 January 2021)
- 10.6.1 Grampian Area Partnership Forum (17 December 2020)
- 10.6.2 Grampian Area Partnership Forum (18 February 2021)

Integration Joint Boards (IJBs):

- 10.7.1 Aberdeen City IJB (1 December 2020)
- 10.7.2 Aberdeen City IJB (27 January 2021)
- 10.8 Aberdeenshire IJB (9 December 2020)
- 10.9 Moray IJB (26 November 2020)

## **11 Dates of Next Meetings**

Seminar – Thursday 6 May 2021

Meeting - Thursday 3 June 2021