Minute of Meeting of GRAMPIAN NHS BOARD held in Open Session
on 3 December 2015 from 11am
in Curl Aberdeen, Eday Walk, Aberdeen

Present
Professor Stephen Logan  Chairman
Mr David Anderson  Non-Executive Board Member
Mrs Rhona Atkinson  Non-Executive Board Member
Mr Raymond Bisset  Non-Executive Board Member
Cllr Stewart Cree  Non-Executive Board Member
Ms Amanda Croft  Director of Nursing, Midwifery and Allied Health Professions
Mrs Sharon Duncan  Employee Director
Dr Nick Fluck  Medical Director
Mr Alan Gray  Director of Finance/Deputy Chief Executive
Professor Mike Greaves  Non-Executive Board Member
Cllr Martin Kitts-Hayes  Non-Executive Board Member
Mrs Christine Lester  Non-Executive Board Member
Dr Lynda Lynch  Non-Executive Board Member
Mr Terry Mackie  Non-Executive Board Member
Dr Helen Moffat  Non-Executive Board Member
Mr Jonathan Passmore  Non-Executive Board Member
Mr Eric Sinclair  Non-Executive Board Member
Mr Malcolm Wright  Chief Executive

By invitation
Mrs Laura Gray  Director of Corporate Communications/Board Secretary
Dr Annie Ingram  Director of Workforce
Mr Graeme Smith  Director of Modernisation
Mrs Susan Webb  Acting Director of Public Health

Attending
Ms Lisa Allerton  MCN Manager, Sexual Health and Blood Borne Viruses
Dr Michael Bisset  Regional Medical Director, North of Scotland Planning Group
Professor Duff Bruce  Consultant and Clinical Lead, General Surgeon
Mr Jim Cannon  Director of Regional Planning, North of Scotland Planning Group
Mrs Isabelle Laing  Head of Civil Contingencies
Mr Gary Mortimer  Interim General Manager, Acute Services
Mr Shay Nanthakumaran  Consultant, General Surgeon
Mrs Alison Wood  PA/Minute Taker

Item  Subject

1  Apologies

Apologies were noted from Cllr Barney Crockett.
Item 2  Declarations of Interest

Mr David Anderson declared an interest relating to Agenda Item 5.2 and advised he would not be voting on this item.

3  Chairman’s Welcome and Introduction

The Chairman welcomed everyone to the meeting.

He reported on the health and social care integration seminar organised by the Aberdeenshire Shadow Integrated Joint Board (IJB) at Curl Aberdeen on 30 October. More than 50 specialists had attended to help plan the finances and budgets of the new partnership.

NHS Grampian had held a stakeholder seminar on 5 November at the Hazlehead Cafe where the sustainability of secondary and tertiary services had been discussed together with the case for change and national strategic direction.

The Chairman had hosted the fourth GRAFTAS awards ceremony on 12 November. He paid tribute to the winners, those shortlisted, everyone nominated and everyone who had helped make the evening a success.

He had spoken at the inaugural NHS Grampian Medical Education Symposium at King’s College, Aberdeen University on 20 November. This had been organised by Dr Richard Coleman, Associate Medical Director, and more than 100 health professionals had attended to hear about the latest advances in medical education and training.

The Chairman advised that he had accepted an invitation to join the economic leadership Board of ONE (Opportunity North East. This was a new private sector-led body, chaired by Sir Ian Wood with a focus on ensuring a sustainable economic future for North-east Scotland.

Two helpful meetings had been held with Grampian MPs and MSPs since the last Board meeting. Topics discussed included waiting times, Child and Adolescent Mental Health Services, the proposed Elective Care Centre and winter planning.

4  Chief Executive’s Report

Mr Wright presented his report which highlighted a range of issues, some of which were not covered elsewhere on the agenda. He provided details of important meetings and events he had attended. He reported that there had been significant improvements in the last 12 months and highlighted the following points:

- A letter had been received from Shona Robison, Cabinet Secretary for Health, Wellbeing and Sports which summarised the main points discussed and actions raised from the Annual Review on 10 August 2015.
- The First Minister had announced the allocation of capital funding for a new Elective Care Centre in Aberdeen as part of a package of measures aimed at improving elective care across Scotland. The centre would be an integral part of Aberdeen Royal Infirmary.
The Care Inspectorate had carried out an inspection of multi-agency services to children and young people in Aberdeenshire from April to June 2015. Meetings had been held with Mr Wright, Mrs Webb and the Chief Executive of Aberdeenshire Council to discuss outcomes.

An unannounced inspection of Older People in Acute Hospital (OPAH) had been carried out by Health Improvement Scotland (HIS) in August 2015 with the findings welcomed by NHS Grampian.

The Workforce Directorate continued to be involved in managing organisational change with the IJBs, including staff governance and partnership working.

Face to Face meetings had taken place with staff which had given Mr Wright and senior colleagues the opportunity to listen to concerns and communicate with staff.

5 Minutes of Meeting

5.1 Minutes of Meetings held on 1 October and 5 November 2015

The minutes were approved subject the following amendments to the 1 October 2015 minute:

Page 1, List of those present - Cllr Martin Kitts-Hayes to be added to list of members present.

Page 6, Item 10.1 Audit Committee Report – third paragraph to be amended to read: “The Board noted the report and ratified the constitution.”

5.2 Proposed amendment to Minute of NHS Grampian Board Meeting of 6 August 2015: Infrastructure Investment

The Board was requested to approve changes to the wording of Appendix 1 of the minute of the meeting on 6 August 2015 as detailed in the paper presented and proposed amended Board minute extract. The amendments were as follows:

- More specific about the sites covered
- Named the investment vehicle
- Specified that licences to occupy land were granted by Scottish Ministers and executed on their behalf by the Board
- Corrected job titles

Mr Gray confirmed to the Board that these changes were standard and had been included in other contracts used by NHS Grampian.

The Board approved the revised wording to Appendix 1 summarising the agreement of the Board to be reflected in the Board meeting minute of 6 August 2016, as requested by AVIVA, the Investment Fund providing the finance for the project.
Item Subject
6 Matters Arising

There were no matters arising.

7 Improvement Programme

Mr Gray presented the progress report on the implementation of the recommendations highlighted in the three reports issued in December 2014. He assured the Board that formal weekly meetings continued to be held by the Executive Team to review progress. He also had monthly meetings with Scottish Government colleagues to report on progress with the implementation of the agreed recommendations. The covering paper highlighted significant Winter Planning work to ensure preparedness of services, progress with actions to implement the recommendations of the Royal College of Surgeon’s report, and the areas identified for improvement from the Older People in Acute Hospitals (OPAH) unannounced follow up inspection in August 2015.

The Board noted the progress in respect of the implementation of the recommendations highlighted in the three reports.

The Board went on to consider the following specific section of the Improvement Programme:

Improvement Programme— General Surgery

Mr Mortimer, Interim General Manager, Acute Services, introduced Professor Duff Bruce, Consultant and Clinical Lead, General Surgery and Mr Shay Nanthakumaran, Consultant, General Surgery who provided an update on this part of the improvement programme. Following the publication of the reports the previous year and in response to the General Medical Council (GMC) visit, there had been changes in leadership within General Surgery which had resulted in improvement across the system. Professor Bruce advised that the first thing the team in General Surgery had done was ask for help and various areas of the organisation had assisted them in the changes that had occurred in the past 12 months with management development. This assistance had come from clinical and support teams. Development events had been held including an Away Day in January which had provided colleagues with an opportunity to discuss the situation. This also enabled colleagues to take a step back from day to day work and look at strategic aspects rather than purely operational matters. Engagement with patients, clinicians, nursing staff and management had taken place. The position of workforce recruitment and retention had improved and the importance of this was emphasised. The cultural behaviour had changed and there had been improvements in the education of the workforce which Mr Nanthakumaran expanded to the Board. Mr Mortimer emphasised the importance of the Leadership Framework for Medical Staff. Guidance had been provided and there had been buy-in from the medical trainees. There had been rewarding feedback following a recent Deanery visit. Morale and confidence in the department had increased as a result of the improved leadership arrangements and team-building

The initial stage of the process would be concluded in January 2016 when a meeting was to be held. Professor Bruce and Mr Nanthakumaran answered questions from Board members who
congratulated them and their team for the performance and changes in the last 12 months. Professor Bruce advised the Board that ongoing Project management support would help General Surgery progress and a short-life working group was in place to ensure delivery of the development plan for the department.

Dr Fluck emphasised the importance of the Clinical Lead role in the overall coordination and implementation of the actions within the department which Professor Bruce had undertaken to a high standard.

The Board acknowledged and thanked Professor Bruce, Mr Nanthakumaran and the General Surgery team for all their hard work to implement the actions, together with the other areas of NHS Grampian that had assisted in progressing the improvement actions.

8 Patient Story

Ms Croft explained the reason there was not a specific patient story at this meeting and took the opportunity to make the Board aware of a different form of feedback that was available for patients and relatives to use. She advised that Patient Opinion was a real-time feedback platform for health services. A patient could share their story on their health service experience and the NHS had the ability to respond to their comments. Other people would be able to see the information as well as the patient. The Patient Opinion system would normally provide 30/40 comments a month on NHS Grampian. The Scottish Government had encouraged the use of Patient Opinion and NHS Grampian was preparing a plan on how to use Patient Opinion more widely in the future.

Ms Croft read out an example of a positive feedback from a current NHS Grampian patient on their experiences of procedures and the care provided by staff.

The Board noted the information on Patient Opinion.

9 Strategic Items

9.1 Director of Public Health Annual Report 2014/2015

Mrs Webb presented the Director of Public Health Annual Report 2014/2015 to the Board. She explained that it was an independent annual report designed to inform local people and decision-makers about the health of their community. She introduced Ms Allerton, the editor of the report, and emphasised the change of style to make the report more readable to partners and the public. The Board noted that the report was available in paper format or could be downloaded from the NHS Grampian website. Mrs Webb highlighted areas of the report and encouraged members to promote the report to other areas in the community. She stressed the importance of the preventing the preventable by working with communities and supporting individuals. Colleagues from Public Health were presenting the report at IJB meetings and other groups and forums when they were invited to do so. Mrs Webb answered questions on the report.

The Board noted the Director of Public Health Annual Report 2014/2015.
9.2 North of Scotland Planning Group Report 2014/2015

Mr Jim Cannon, Director of Regional Planning, North of Scotland Planning Group (NoSPG), introduced Dr Michael Bisset who had taken up post this year as the first Regional Medical Director for the NoSPG. Dr Bisset’s role would be central to developing a consistent approach to clinical governance and providing a structured support framework for a range of clinical leads across the North area.

The Board noted that the NoSPG represented the NHS Boards of Grampian, Tayside, Highland, Orkney, Shetland and the Western Isles and enabled them to collaborate on a wide range of services and issues of common interest. Regional planning was regarded as a high priority by the Scottish Government and the North of Scotland region was recognised as a planning entity together with the West region and the South East region. Effective planning and working in the North region was extremely important for NHS Grampian as a critical mass of population was required to sustain a range of tertiary services and the region provided unique challenges.

Mr Cannon presented the report which set out the wide range of work that had been taken forward by the NoSPG. These included:

- Regional Clinical Strategy
- Child Health
- North of Scotland Public Health Network
- Regional Workforce Group
- Workforce Planning Learning and Development Network
- National Delivery Plan funding for Specialist Children’s Services
- Oncology
- Specific surgical specialty work

He reported that it had been a challenging year with organisational change. The group would refocus around the changing landscape. Mr Cannon confirmed that he had engaged with the Chief Officers of the IJBs but direct links were not yet in place. He was preparing a summary of the governance arrangements and the current priorities.

10 The Board noted the North of Scotland Planning Group Report 2014/2015.

Regulatory

10.1 Civil Contingencies Annual Report 2014/15

Mrs Webb introduced Mrs Laing, Head of Civil Contingencies, who presented the comprehensive report to the Board. She explained that the Civil Contingencies Annual Report formed part of the NHS Grampian governance arrangements and assurance programme for Civil Contingencies.

The purpose of the report was to:

- Provide assurance to the Board that NHS Grampian had fulfilled its statutory duties under the Civil Contingencies Act 2004 (CCA 2004) and had arrangements to meet requirements under the associated regulations.
Item Subject

- Provide the Board with an overview of resilience activities over the period
- Highlight key elements of the Civil Contingencies work programme to meet the requirement of the framework of Scottish guidance.

The report provided a summary of significant incidents over 2013/2015; and the planning, training and exercises that had taken place over the period. It highlighted the Civil Contingencies/Resilience priorities for 2015/2016 and provided a high level overview of partnership working under the new Resilience Partnership arrangements in Scotland. Mrs Laing explained the work undertaken for the Commonwealth Games and Ebola preparedness which included Personal Protective Equipment (PPE) and levels of training.

The Board:

1. Noted the Civil Contingencies Annual Report 2014/2015 (including 2013/14 highlights)
2. Noted the work undertaken and the progress made across NHS Grampian in Civil Contingencies.
3. Confirmed its continued support to the work of the Civil Contingencies Unit, Sector and Service based staff in achieving organisational resilience goals to ensure that NHS Grampian was as prepared and resilient as it could be.

11

Operational Business

11.1 Performance Report

Mr Gray presented the Performance Report for November 2015 and highlighted the actions being taken to address those areas where performance was not in line with agreed trajectories and the plans to improve the position.

The areas highlighted in the performance report included:

- Winter Planning including delayed discharge.
- Cancer Access standards
- New outpatients 12 week target and 12 week Treatment Time Guarantee (TTG)
- A & E 4 hour standard (Grampian wide)
- Access to psychological therapies
- Access to child and adolescent mental health services (CAMHS)
- New outpatient Did Not Attends (DNAs)
- Carbon emissions and energy consumption
- Financial Performance
- Sickness absence
- Breastfeeding
- Complaints
- Staff vacancies and recruitment
- Other intelligence from Information Services Division (ISD) publications

The Board noted the Performance Report for November 2015 and the actions being taken to address those areas where performance was not in line with agreed trajectories.
Dr Ingram presented the Workforce Update for September 2015 to the Board.

She highlighted that the overall headcount and whole time equivalent (WTE) had increased to 14,439 and 11,957 WTE respectively from a headcount of 13,263 and 11,818 WTE the previous quarter. This represented an increase of 176 people and 139 WTE respectively and a percentage increase of 1.2%.

The year to date (April 2015 to September 2015) nursing agency spend was £885,000 which was approaching the total for the previous year of £944,000. The year to date bank spend on Nursing and Midwifery had increased to £6.5m compared to £6.4m at the same point the previous year.

Medical agency locum spend was over £7.5m in comparison to last year`s total spend of around £9m.

The total sickness absence for August 2015 was 3.99% which was lower than the same point last year of 4.44%. The September 2015 rate was 4.38% which was lower than at the same point last year of 4.57%. The ISD annualised sickness absence rate (August 2015) had increased slightly to 4.63% compared to 4.62% at the same point last year. NHS Grampian continued to perform better than the other large territorial Boards in terms of absence, with a particular difference in relation to long term absence. This can be attributed to helping staff back into the workplace on supported rehabilitation programmes.

Over the past year there had been 1634 starters and 1313 leavers. Turnover had decreased to 11.03% in September 2015 from 12.14% in April 2015.

The number of Consultant vacancies had decreased from 79.0 WTE to 43.7 WTE as at September 2015. Nursing and Midwifery vacancies had increased in September to 397 WTE. Nursing and Midwifery vacancies were being given high priority and work was ongoing with a senior nurse identified to move this work forward. It was highlighted that NHS Grampian had 31% of the nursing vacancies of NHS Scotland.

Dr Ingram advised that in some specialties all NHS Boards in Scotland were having difficulty with recruitment.

It was noted that the total number of employees on the Redeployment Register was 16 as a result of staff being managed into new roles.

The Board noted the content of the Workforce Summary Report.

An update was provided to the Board on the progress of the Nursing Resources Group (NRG) which had been established by the Board to ensure that there were robust governance structures in place to support safe, effective and efficient use of nursing and midwifery resources. NRG had made considerable progress against the action plan agreed in December 2014. Some progress highlighted included:
There were more nurses and midwives employed in NHS Grampian. Between September 2014 and September 2015 there were 134.5 WTE more nurses in the workforce and many current staff had increased their hours.

- All areas had established workforce governance groups or were in the process of doing so.
- All sectors had run the workload and workforce tools where available.
- There was an agreed methodology for validating workforce establishments and to identify risk.
- NHS Grampian had developed and run the first Return to Practice programme in collaboration with the Robert Gordon University with 19 nurses completing the course.

The paper proposed the transfer of executive leadership for the NRG from the Director of Workforce to Ms Croft as Director of Nursing, Midwifery and Allied Health Professions. It was noted that Dr Ingram would remain as a member of the group.

The Board noted the progress made by the Nursing Resources Group and the proposed change of executive leadership.

11.4 Healthcare Associated Infection (HAI) – Bi-monthly Report

Ms Croft, as Director of Nursing, Midwifery and Allied Health Professions, had taken over as executive lead for HAI. It was noted that a new style of report would be presented at the next Board meeting.

Ms Croft presented the current format bi-monthly report and highlighted that hand hygiene self audit results for August and September 2015 showed that compliance remained at or over 95% across Grampian. Clostridium difficile infection (CDI) case numbers for August and September had been 10 and 11 respectively. There had been 7 *Staphylococcus aureus* bacteraemias (SABs) in August and 10 in September.

The Board noted the content of the summary bi-monthly HAI Report.

12 Committee/Forum Reports

The Board noted the following reports, with the following exception points highlighted:

12.1 Clinical Governance Committee

Dr Lynch advised that the committee had requested that prescribing and medication safety issues relating to kardexes and immediate discharge letters be escalated to the Board. It was noted that the Pharmacy team identified and resolved most prescribing errors and risks. Dr Fluck reassured the Board that prescribing errors were very low but that medication safety was a very important issue which featured on the Patient Safety Executive Group.

12.2 Performance Governance Committee
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Mr Mackie highlighted the items on iMatter implementation and Occupational Health Service to the Board.

| 12.5 | Area Clinical Forum |

Dr Moffat highlighted the new ways of working in Primary Care and the referral pathways from primary to secondary care.

| 12.6 | Grampian Area Partnership Forum |

Mrs Duncan highlighted the Scottish Government`s #FlyTheFlag campaign as a contribution to the objectives of Scotland`s National Action Plan for Human Rights.

| 12.7 | Operational Management Board |

| 12.8 | Endowment Committee |

13 Items for Noting

Approved Minutes

The following approved minutes were noted:

13.1 Clinical Governance Committee – 14 August  
13.2 Endowment Committee – 1 September  
13.3 Performance Governance Committee – 9 September  
13.4 Patient Focus and Public Involvement – 19 August  
13.5 Spiritual Care Committee – 10 September  
13.6 Area Clinical Forum – 16 September  
13.7 Grampian Area Partnership Forum – 27 October  
13.8 Staff Governance Committee – 4 August  
13.9 Operational Management Board – 26 August and 30 September

14 Any Other Competent Business

The Chairman highlighted the success of the Pharmacy team in Grampian, having won five trophies in the recent 2015 Scottish Pharmacy Awards. The Board congratulated the winners on their success.

15 Dates of Next Meetings

Board Meeting – Thursday 4 February 2016, CLAN House, Westburn Road, Aberdeen.

Signed .................................................. Date ................................
Chairman