Board Meeting 07.10.21 Open Session Item 15.05

NHS Grampian (NHSG) Minute of the Performance Governance Committee Thursday 16th June 2021 14.00-16.00 Microsoft Teams Meeting

Present

Mrs Rhona Atkinson, Non-Executive Board Member, NHS Grampian (Chair) Ms Luan Grugeon, Non-Executive Board Member, NHS Grampian Cllr Shona Morrison, Non-Executive Board Member, NHS Grampian Mr Derick Murray, Non-Executive Board Member, NHS Grampian

In Attendance

Mr Paul Bachoo, Medical Director, Acute Ms Sarah Duncan, Board Secretary Mr Alan Gray, Director of Finance Mr Alan Sharp, Depute Director of Finance (Item 3.5) Ms Else Smaaskjaer, Minutes

Item	Subject	Action
1	Welcome Mrs Atkinson thanked everyone for attending. She welcomed Mr Murray to his first meeting as a member of the Committee and Ms Duncan attending to observe in her role as Board Secretary. Mrs Atkinson also recorded her thanks to Ms Rachael Little, Employee Director for her attendance and useful contribution to discussions during her tenure as a member of the Performance Governance Committee. Apologies from Committee Members Ms Joyce Duncan, Non-Executive Board Member, NHS Grampian	
2	Professor Lynda Lynch, Chair, NHS Grampian Minute of Meeting Held on 21st April 2021	
	The minute of the previous meeting was approved as an accurate record.	
	Matters Arising	
	None	
3	Items Discussed	
	3.1 NHSG Health System Situation Report	

Item	Subject	Action
	Mr Gray presented the System Wide Situation Report. He explained that the report provided information regarding the health system across Grampian and had generated useful discussion and feedback when presented at the Senior Leadership Team. Mr Gray highlighted some of the key messages in the report.	
	Covid Position – the level of activity across all sites, and positivity rates across Grampian, indicate that impact from a 3rd Covid wave had commenced. Public Health colleagues would be committed to targeting outbreaks, and public messaging regarding the benefits of vaccination will be increased. Mrs Atkinson asked if the Delta variant would have an adverse influence on the system. Mr Gray advised that staff are working through modelling data but expectation is that the system is in a position to step up if required. The vaccination programme and effective contact tracing will result in different outcomes than experienced during the first and second Covid waves with less hospitalisation and a greater impact on community based services. The main risk would be the effect of high transmissibility on case numbers which would impact on contact tracing and self-isolation with resultant disruption in the workplace due to staff absences. Mr Bachoo noted that planning would also consider how to manage tensions between maintaining performance, staff wellbeing and capacity to deliver services in a combined Covid and Non-Covid hospital. Councillor Morrison asked if public messaging will include information regarding access to GP services as there had been increased pressure from the public to reinstate face to face appointments. Mr Gray confirmed ongoing discussions regarding steps to build up access to GP services.	
	Grampian Incident Management Team – main focus to encourage ongoing compliance with FACTS guidance to suppress transmission as much as possible whilst increasing protection through vaccination programme. Mr Gray reported that encouraging positive behaviours over the summer would help minimise negative impact on services. Mrs Atkinson noted the importance of ensuring public messaging is clear and effective. Mr Murray asked if the number of hospital admissions would rise if the rate of infection increases. Mr Bachoo responded that a range of scenarios had been considered, and had included the impact of the vaccination programme. It is expected that high levels of community	

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		transmission would not result in higher rates of hospitalisation. • Remobilisation and Recovery – Ms Grugeon asked if the plans for remobilisation remain realistic and deliverable in the event of a 3 rd Covid wave. Mr Bachoo reported the expectation that, against a very challenging background, health boards will return to pre-Covid performance levels. Mr Gray highlighted the need to have clarity regarding what the expectations are, in relation to what can be achieved. The value of all parts of the system working together had been recognised. Members noted the report.	
	3.2	 Performance Against National Standards A snapshot of the current performance position and comparisons with national standards had been circulated prior to the meeting. CAMHS – reported a more challenging position reflecting increased volume of referrals. Additional funding had been confirmed by the Scottish Government and management will consider how this can be best used to increase capacity and access. Mr Gray confirmed that CAMHS will continue to work in partnership in upskilling school based staff to work with pupils and seek early resolution when appropriate. Cancer – 31 day performance remains positive and although 62 day performance had been above prior years this had been impacted during the last quarter due to increasing referrals. Mr Bachoo confirmed that although some patients had a more advanced presentation there is still confidence that those breaching are relatively safe. Ms Grugeon asked if Grampian would be included in the Scottish Government plans for Early Diagnostic Centres. Mr Bachoo informed the Committee that it will be included in the second phase of the programme. 	
		Surge and Flow – there are ongoing challenges related to the impact of reduced bed base across sites and high levels of bed occupancy related to non-elective care. There are also continuing pressures around the front door at ARI. Mr Gray reported that the Chief Executive is in regular contact with SAS and had briefed them on the action plan endorsed by the	

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		Chief Executive Team to address immediate issues including reducing waiting times for transfer from ambulances and improved arrangement for discharge of patients. Mr Bachoo added that the next step would be to look at a redesign of the front door into ARI and a review of the patient pathway to improve flow between services.	
		Planned Care – outpatient waiting list had stabilised as remobilisation of services progresses. Protection measures for patients and staff restrict the number of patients who can be seen at onsite clinics.	
		Mr Bachoo informed the Committee about the work of the Centre for Sustainable Delivery (CfSD), led by a clinical team hosted at the Golden Jubilee Hospital in Glasgow. There had been an initial meeting with the NHS Grampian Chief Executive Team and agreement reached around working in partnership to realise improvements. Early work will centre on using the expertise and knowledge of both parties to maximise what can be achieved through existing programmes of work.	
		Mrs Atkinson noted that all the data indicates a system under pressure and asked if there was confidence that appropriate controls are in place to respond to emerging circumstances. Mr Bachoo advised there had been some benefit in working through a whole system approach to achieve resolution on individual items which may not improve the situation but does help in stabilising it.	
		The Committee noted the report.	
	3.3	Baird and ANCHOR – Director's Report Mr Gray presented reports on construction and project activities relating to the Baird and ANCHOR Project.	
		Construction – progress remains on schedule. Main challenge recently had been in the supply of materials, especially concrete. Recognised as a global problem and it is uncertain whether this could be an ongoing short or medium term problem. NHS Grampian will continue to work with Graham Construction to explore options across the whole supply chain.	
		Design Programme – work to finalise the design had slipped behind and the architects had increased capacity to take this	

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		The Committee noted the report and agreed that Mr Morgan's presentation should be used to frame a wider discussion regarding infrastructure projects.	AG
	3.4	Remobilisation – Governance Arrangements	
		Mr Gray informed members that the Chief Executive Team were	

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		reviewing management arrangements to effectively support remobilisation and transformation across the organisation. This will reflect the portfolio structure as it develops and progresses. During the transition phase management arrangements will be in place to support these activities. The Committee noted the update and asked for a fuller briefing on the portfolio structure when the position is more settled.	AG
	3.5	Financial Report and Budget 2021/22	
		Mr Sharp provided an overview of financial performance during April and May 2021 and reported a small overspend of £0.55 million. He noted the main areas of overspend related to medical pay budgets including spend on locums and banding payments. There had been some underspend in on other pay areas and a small underspend on non-pay items including drug costs. The first financial forecast for 2021/22 will be prepared at the end of July. Mr Sharp highlighted some key issues regarding Covid Funding:	
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		Covid funding will be allocated in July with some funding issued through policy teams rather than by the Health Finance Directorate.	
		Scottish Government messaging is to continue current workstreams relating to the vaccination programme, contact tracing, and test and protect.	
		NHS Grampian had incurred covid related spend of £11 million during April and May, mainly on vaccination programme and contact tracing. This is consistent with expenditure last year.	
		IJBs have their own reserves to meet Covid costs during 2021/22.	
		There are currently in the region of 1,100 posts charged to Covid funding and there will be discussions with mangers regarding the ongoing impact into 2022/23. Some activities, such as increased cleaning are likely to continue and there is still some uncertainty regarding the future level of vaccination activity.	

Item	Subject	Action
Item	Mr Sharp outlined some of the main financial issues for 2021/22 including: - realignment of budgets to support the portfolio structure - covid funding exit strategy - development of a Medium Term Financial Strategy (MTFS) Ms Grugeon asked how finances will be aligned to the portfolio structure. Mr Sharp informed the Committee that currently NHS Grampian financial accounts reflects the organisational structure from previous years. There is still some uncertainty regarding placement of specific budgets and as that is clarified the budget will be rebuilt.	Action
	Mr Murray asked if there would be potential to budget for flu vaccinations and Covid booster vaccinations together. Mr Sharp confirmed that these are currently separate but there are plans to develop a composite vaccination service including schools, Covid and flu. There has been no clinical guidance to date on whether Covid and flu vaccinations can be administered at the same time.	
	Mr Murray also noted that the development of the MTFS would be essential to future financial forecasting. Mr Sharp explained that NHS Grampian currently looks across three to four future years. This had allowed for the cost of staff and facilities at the Baird Family Hospital and the ANCHOR Centre to be built into future projections. The main gap in future planning is the lack of confirmation from the Scottish Government regarding its future financial planning.	
	Mrs Atkinson noted that although the situation appears fairly positive there will be a range of increasing demands on the system and cautioned that there are likely to be changes resulting from Covid which will remain in place but will not be fully supported by the Scottish Government.	
	Mr Gray highlighted the benefits in having Mr Sharp working with finance teams across Scotland and supporting policy teams at Scottish Government level. The Committee thanked Mr Sharp for the briefing	
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	3.6 Audit Scotland – Recent Relevant Publications	

Item	Subject	Action
	Mr Gray presented a report which provided detail of recent Audit Scotland Reports which would be of interest to the Committee. These included: - Local Government - Overview 2021 - Equalities Outcomes 2021 – 2025 - Social Care Reform - Cybercrime (a serious risk to public services)	
	~ NHS Scotland in 2021 ~ Following the Pandemic Pound Mrs Atkinson thanked Mr Gray for pulling the information together. She observed that it had been useful to have sight of the reports as Committee members can sometimes have a narrow focus and it helps to take a wider view and have assurance that attention is paid to wider issues. Mr Murray agreed that the reports had been interesting and had provided a wider picture regarding social care reform. Ms Grugeon asked if there would be a plan for addressing health inequalities and Mr Murray agreed this should be progressed but in the wider context of community planning rather than limited to health care provision.	
	Ms Duncan noted that there will be further consideration of where assurance reports should be reported and asked if there was scope to have email briefings to aid understanding rather than formal Committee reports. Mrs Atkinson advised that Board Members would like to be aware of what information is circulated, and would be open to suggestions regarding how this could be done electronically.	
	The Committee noted:	
	 the recent reports from Audit Scotland the NHS Grampian response to the recommendations made in Audit Scotland: NHS in Scotland 2020 report relevant to NHS Boards; and the proposed approach adopted by Audit Scotland to COVID-19 (and following the pandemic pound) and the NHS in Scotland Overview 2021 report 	
4	Items to Highlight to NHSG Board	
	The Committee agreed that the following items would be of interest to all	

Item	Subject	
	 Update on Performance Financial Position Baird and ANCHOR Project Assurance Audit Scotland Reports 	
	Mr Gray will draft a report for Mrs Atkinson's review.	AG/RA
5	AOCB	
	None.	
	Date of Next Meeting	
	Thursday Wednesday 18 th August 2021 14.00-16.00 Microsoft Teams	