#### **APPROVED**

#### **NHS GRAMPIAN**

Minute of Meeting of Performance Governance Committee held at 10am on Tuesday 20<sup>th</sup> November 2018 in the Seminar Room, Summerfield House, Aberdeen

Present Professor Stephen Logan Chairman

Mrs Rhona Atkinson
Mrs Luan Grugeon
Ms Rachael Little
Councillor Shona Morrison
Non-Executive Board Member
Non-Executive Board Member
Non-Executive Board Member

Attending Professor Amanda Croft Interim Chief Executive

Mr Paul Bachoo Acute Medical Director

Mrs Fiona Francey Deputy Director of Acute Services

Mr Alan Gray Director of Finance

Ms Caroline Hiscox Acting Director of NMAHPs

Mrs Jenny McNicol Acute Director of Nursing and Midwifery

Ms Emma Pettis Senior Communications Officer
Ms Anne Ross Head of Performance and Quality

**Improvement** 

Dr Tara Shivaji Consultant – Public Health

Ms Else Smaaskjaer PA/Minute Taker

#### **Apologies**

Apologies were received from Professor Nick Fluck, Mrs Laura Gray and Mrs Susan Webb. Professor Logan welcomed Ms Little and Councillor Morrison to their first meeting of the Committee.

# 1 Minute of Meeting held on 23<sup>rd</sup> August 2018

The minute was approved as an accurate record.

## 2 Matters Arising

**Delayed Discharge** – The Performance Governance Committee in August had noted an increase in the number of delays. Professor Croft reported that this is discussed at individual IJB performance review meetings and significant progress had been achieved in recent years. She assured members that this is a priority issue for all IJBs as winter pressures approach. Ms Grugeon also asked if there is comparative data around delayed transfers and increase in repeat admissions. Professor Croft advised that the day of care audit provides information regarding delays but does not reflect the whole patient experience. It was agreed that Chief Officers should be invited to attend a future meeting to discuss further.

Members asked that this be kept under review.

## 3 Performance Report

#### 3.1 Mental Health Action Plan

The Committee had received a draft version of NHS Grampian Mental Health Services – Delivering For The Future which had been prepared in response to a letter received in August from the Chief Nursing Officer. Concerns had been raised following the closure of wards at Royal Cornhill Hospital (RCH) and Professor Croft assured the Committee that, although there had been a change in bed numbers, there was still access to RCH and there had been no diminution of service. A Strategic Plan will be prepared for consideration by Grampian NHS Board and this will include recommendations for the future delivery of hosted mental health services.

Ms Grugeon asked if key messages had been communicated to staff. Mr Gray confirmed that there had been effective engagement with staff, both individually and collectively. He also informed members that the Mental Health Programme Board for Grampian will be led by Sandra Ross, Chief Officer of Aberdeen City IJB and it will keep the Committee fully briefed of developments. The importance of the 3<sup>rd</sup> Sector in the redesign of mental health services was acknowledged.

#### 3.2 Acute Sector

Mrs Francey provided a presentation giving an overview of acute sector performance. Waiting time breaches continue to be reported but no significant concerns had been highlighted regarding the safety of patients on waiting lists. It is anticipated that increased activity at Dr Gray's Hospital and some additional sessions at Stracathro will result in improvements. Mr Gray reported that clinical leads are working closely to identify scope for increased theatre capacity. The Committee was assured that initial feedback indicates that patients are willing to travel across the region if it reduces the waiting time for treatment.

Cancer performance remained below standard and an action plan had been developed, including the appointment of a Senior Manager – Head of Cancer, a clear focus on identifying areas for improvement and a revised system and database to improve the tracking of individual patients.

Performance relating to unscheduled care had been steady with breaches in the four hour standard reflected by peaks in the number of admissions. Mrs Francey informed the Committee that work is ongoing around the unscheduled care pathway which should result in improvements.

Mr Francey reported an overspend of £1M for the six month period to the end of September mainly resulting from expenditure on locums and agency staff and an overspend on supplier costs in the Women and Children's Division which is being reviewed.

The Committee acknowledged the scale of the challenges and Mrs Francey reported that regular weekly meetings ensure that the performance is closely monitored. The range of improvements underway indicate that NHS Grampian will be in a better position to meet the needs of the National Waiting Times Improvement Plan October 2018.

The Committee thanked Mrs Francey for her comprehensive and helpful presentation and noted the welcome inclusion of Quality Metrics in providing a more rounded overview across the sector.

## 3.3 Improving Health/Preventions

Dr Tara Shivaji, Public Health Consultant, attended to provide a presentation outlining the purpose of public health practice. She explained that one aspect of the work is to gather critical information and undertake comparative analysis through keeping an eye on national and local trends. The information can be used in providing support and leadership across a range of projects in Grampian. She noted the emphasis on improving health and reducing health inequalities and how this contributes to meeting the key strategic themes of NHS Grampian. Dr Shivaji highlighted a number of initiatives delivered locally including childsmile, community kitchens, Big Noise Torry and Making Every Opportunity Count. She noted the positive impact across a number of areas including screening uptake in national programmes, a rise in the breastfeeding rate and that NHS Grampian has one of the most effective smoking cessation services in Scotland.

Dr Shivaji also reported some challenges including the low levels of achievement for child immunisation which increases the risk of outbreak of preventable diseases. Members asked why screening programmes were effective but immunisation had not shared the same success. Ms Shivaji observed that screening is generally perceived as something positive and attracts engagement whereas there had been particular challenges in allaying public concerns regarding immunisation programmes.

Mrs Atkinson asked if the new GMS contract, and the discontinuation of vaccination services by GPs, would influence uptake. Dr Shivaji advised that there are workforce challenges but it is hoped that community based vaccination teams and the school nursing service will enhance accessibility and improve uptake. Mrs Hiscox confirmed that this is recognised by the Transformation Board as an important area of work.

Ms Grugeon asked if sufficient emphasis is placed on engagement across the wider range of stakeholders with regard to initiatives in combatting health inequalities. Dr Shivaji confirmed there are challenges in preventative work but there are also statutory responsibilities and work is ongoing to develop a programme of activities.

The Committee thanked Dr Shivaji for her presentation and noted it had been helpful in highlighting the range of work covered by the public health team.

## 4 Other Performance Topics

# 4.1 Media Monitoring and Social Media report

Emma Pettis attended to provide an update on recent media activity which had mainly been dominated by service changes at Dr Gray's Hospital in Elgin. There had also been opportunities to report on some positive events including:

- The opening of refurbished wards at Royal Cornhill Hospital following ligature reduction works.
- A royal visit to Fraserburgh.
- A day celebrating the work of AHPs which had been very successful.
- The opening of the Major Trauma Centre by the Cabinet Secretary.

Professor Logan observed that challenging events can distract attention and thanked the media team for highlighting the range of positive activities which take place across the organisation. Ms Pettis confirmed that the team are planning some positive communication around bicentennial celebrations at Dr Gray's in 2019.

There was some discussion regarding the positive impact of social media and it was agreed that staff must be supported if they experience negative feedback and on-line comments but this could be a challenge.

## 4.2 CAMHS

The Director of Finance provided an update on matters relating to Child and Adolescent Mental Health Services. He informed members that the Mental Health Access Improvement Support Team (MHAIST) was providing advice and support to staff in reducing waiting times. The Clinical Director for the service will attend a Public Audit and Post-Legislative Scrutiny Committee meeting and will be in a position to demonstrate that NHS Grampian has the situation in hand. Ms Grugeon asked if it would be possible to reduce referrals to the service and Mr Gray confirmed that the investment planned on Tier 1/2 services will contribute to that.

# 4.3 Financial Report

The Director of Finance provided an update on the financial position for the financial year to October 2018 which he reported as being reasonably stable. Managing an ambitious capital programme for 2018/19 had been challenging and slippage had been anticipated on a couple of large expenditure items. To mitigate this colleagues are working together to bring forward the purchase of some replacement equipment and backlog maintenance items into the current financial year.

# 5 Assurance Framework: Reports from Governance Committees and Community Planning Partnerships

## 5.1 Staff Governance Committee

Ms Little reported that there had been some discussion regarding Brexit and the importance of providing staff with the advice and support they need.

#### 5.2 Clinical Governance Committee

Treatment Time Guarantees breaches resulting from the cancellation of theatre lists had been discussed. It was noted that work is ongoing to make improvements which will be reported to the November meeting. Mrs Hiscox advised that there had been some improvement in the rate of CDiff infections reported.

## 5.3 Engagement and Participation Committee

The Committee had discussed patient admission documentation and the changes to women and children services at Dr Gray's. The next meeting was scheduled for 21<sup>st</sup> November.

## 5.4 Improving Outcomes for Children Transformation Board

The Transformation Board had agreed that future meetings of Grampian NHS Board would be updated on the National Best Start Programme and the Corporate Parenting Action Plan. The Care Inspectorate had confirmed a joint inspection in Aberdeen City and a progress review in Moray.

# 6 Feedback from Integration Joint Boards

# 6.1 Aberdeen City

Ms Grugeon reported proposed changes to the management structure which will align services in three localities mirroring the community planning structure. The closure of Rosemount Medical Centre had been discussed. Mrs Atkinson noted concerns raised at the Audit Committee regarding longer term funding.

#### 6.2 Aberdeenshire

The IJB had discussed GP recruitment, the inspection of HMP Grampian and the appointment of a Chief Financial Officer. There had also been some discussion regarding the challenges of adopting a whole system approach and balancing performance and financial objectives.

# 6.3 Moray

The IJB had considered the decision to close Leanchoil Hospital and possible alternative uses for the building. It was agreed that engagement around the closure had been very positive and the case for change had been well made and well managed.

# 7 Dates of Future Meetings

The proposed dates for 2019 were agreed:

Friday 18 <sup>th</sup> January	11.00-13.30	Conference Room
Tuesday 12 <sup>th</sup> March	14.00-16.30	Seminar Room
Tuesday 14 <sup>th</sup> May	14.00-16.30	Conference Room
Tuesday 17 <sup>th</sup> September	14.00-16.30	Conference Room
Tuesday 19 <sup>th</sup> November	14.00-16.30	Conference Room

#### 8 Risk

# 8.1 Strategic Risk Register

Changes to the risk register and risk profile were noted.

#### 8.2 Infrastructure Risk

Mr Gray highlighted the challenges in managing infrastructure risks.

## 9 Content for Report to Board

- Mental Health Action Plan
- Acute Sector Performance Update

- Public Health Performance
- Media Monitoring

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# 10 AOCB

Members recorded their thanks to Professor Logan for his hard work and professional leadership during his tenure as Chair of the Committee.

# 11 Date of Next Meeting

Friday 18<sup>th</sup> January

11.00 - 13.30

Conference Room, Summerfield House