

Shetland NHS Board

Minutes of the Shetland NHS Board Meeting held at 09.30am on Tuesday 27th August 2024 via Microsoft Teams

Present

Mr Gary Robinson	Chair
Dr Kirsty Brightwell	Medical Director
Mr Colin Campbell	Non-Executive Board Member
Prof Kathleen Carolan	Director of Nursing & Acute Services
Mr Lincoln Carroll	Non-Executive Board Member
Mr Brian Chittick	Chief Executive
Mrs Natasha Cornick	Non-Executive Board Member (Vice-Chair)
Mrs Lorraine Hall	Director of Human Resources & Support Services
Mrs Kathy Hubbard	Non-Executive Board Member
Mrs Gaynor Jones	Non-Executive Board Member
Mr Colin Marsland	Director of Finance
Mr Bruce McCulloch	Employee Director

In Attendance

Ms Lucy Flaws	Planning, Performance and Projects Officer
Ms Edna Mary Watson	Chief Nurse (Corporate)
Dr Katie MacMillan	Project Officer, Public Health Department
Ms Lorraine Allinson	Human Resources Services Manager <i>[item 2024/25/62]</i>
Mrs Carolyn Hand	Corporate Services Manager
Ms Laura Farrell	Communications Officer
Ms Amy Gallivan	Communications Officer
Ms Donna Rigby	Senior Auditor, Audit Scotland (External Audit)
Ms Evelyn McPhail	Board Member, Healthcare Improvement Scotland
Mrs Pauline Moncrieff	Board Business Administrator (minutetaker)
Mrs Erin Seif	PA to Director of Finance

2024/25/48 Chair's Announcements

Mr Robinson advised Members that this year's Annual Review would be held on Monday 30th September at 4pm. The annual review is a key way for the public to hear about the Board's performance in 2023/24 and the key challenges faced moving forward. Members of the public also have the opportunity at the meeting to ask questions. It will be on Teams and the joining link will be on the Board's website shortly.

There had been the opportunity to hear from members of the public at the Cunningsburgh and Walls shows where there had been an NHS staff presence. There had been some valuable feedback from the conversations on matter related to delivering health and care services.

The Board's annual Speak Up week will run from 30th Sept to 4th Oct and is linked to the Board's delivery of national whistleblowing standards. Through the week there will be a variety of ways to raise awareness of the importance of speaking up and how best to go about it.

Members were pleased to note there had been 18 individuals from NHS Shetland who had been nominated for awards in this year's Scottish Health Awards. Nominations can be from colleagues or from the community and it was good to see so many people put forward as recognition of their service to our community. The nominations will be shortlisted and judged by the judging panel, chaired by John Harden, Deputy National Clinical Director. The Health Awards will take place in Edinburgh on 7th November.

NHS Shetland had recently received more positive feedback regarding medical training. Internal Medicine Training Year 1 in the North of Scotland (of which the Board is part host) has the highest satisfaction rating for all Scotland's Internal Medicine Training schemes. This training is the primary entry point and initial stage of training for those trainees who wish to follow a career in medical specialties. This is a great achievement for the North and goes against the trend of decreased satisfaction for the training more generally in Scotland.

2024/25/49 Apologies for Absence

Apologies were received from Joe Higgins, Dr Susan Laidlaw, Emma Macdonald and Jo Robinson.

2023/24/50 Declarations of Interest

There were no declarations of interest

2024/25/51 Draft minutes of the private Board Meeting held on 25th June 2024

The draft minutes were approved as an accurate record with no amendments.

2024/25/52 Draft minutes of the public Board Meeting held on 25th June 2024

The draft minutes were approved as an accurate record with no amendments.

2024/25/53 Board Action Tracker

The Board Action Tracker was noted.

2024/25/54 Matters Arising

There were no matters arising from the previous minutes or Action Tracker.

2024/25/55 Quality Report

(Board Paper 2024/25/27)

Prof Carolan presented the paper and highlighted the key points from the last 6 months for Members attention.

Discussion

Mrs Hubbard commented that it was good to read the spotlight on Estates and Facilities staff and hoped it would be possible to learn more about other teams of support staff in future and showcase the roles within the organisation. Mrs Hand replied that the Communications Teams were working with HR colleagues to consider how best to expand this to other work areas of the organisation, highlighting the importance of different roles, and also the best ways to reach different types of staff and the best platforms.

DECISION the Board noted the Quality Report.

2024/25/56 Annual Feedback and Complaints Report 2023/24 *(Board Paper 2024/25/xx)*

Carolyn Hand presented the report which details the ways people can provide feedback to the Board about their care, including anonymously through the Care Opinion website.

Alongside the primary aim of helping patients or carers who make complaints, the Board is required to monitor its complaint handling performance against 9 key performance indicators which are reported to the Board and Clinical Governance Committee on a quarterly and also an annual basis. Once considered by these groups, the report is submitted to the Scottish Public Services Ombudsman and the Scottish Government at the end of September.

Mrs Hand reported the statistics for numbers of feedback and complaints handled by the service in 2023/24 and commented on the emerging themes and improvement measures and actions the organisation had taken as a result of complaints and feedback received. Members noted that only 11% of the Stage 2 complaints were closed out within the 20 working day target. Although these can be complex and span a number of departments, the 20 working day timeline has always been an increasing challenge for the team in the last year due to system pressures and the capacity of complaint investigators.

Mrs Hand commented that it was important to keep the number of complaints received in context and there were several thousands of healthcare interactions every year and these are a very small proportion of those where things have gone wrong for people. The Board also receives lots of kind and thankful feedback too which many departments receive directly making it more difficult to capture for reporting purposes.

Mrs Hand thanked Katherine Cripps, Feedback and Complaints Officer, the clinical directors and senior managers who support the Feedback and Complaints service.

Discussion

Mrs Cornick asked what public messaging would be offered to explain how people can access dental services, given the increase in complaints around access to dental treatment.

Mrs Hand said that the Board was mindful that it needed to do more to communicate and the Communications Team work with the Dental Director to ensure that the information provided to the public is accurate and up-to-date.

Mr Chittick added that communication had been both universal and targeted for communities, for example through interactions via community councils. There have also been successful campaigns for Oral Cancer Awareness Week, and the Childsmile programme. Unfortunately, the situation regarding access to the Public Dental Service has not changed and remains primarily for emergency care and special needs category of patients only.

Mr Chittick added that the Board was in discussion with Scottish Government regularly around ways to move things forward including the newly established national Dental Reference Group and it was hoped to be able to report the product of these conversations in due course.

Mr Chittick said it was important for Members to note the volume of positive feedback from patients that staff receive and to formally express the Board's appreciation also.

DECISION: The Board noted the Annual Feedback and Complaints Report 2023/24.

2024/25/57 Healthcare Associated Infection Report *(Board Paper 2024/25/29)*

Professor Carolan presented the report and informed members that there were no exceptions to report to the Board. The Board noted that feedback from Scottish Government was that they were very content with NHS Shetland was progressing with the delivery of the HAI strategy in Shetland. SGov were content that there were a number of ways in which the Board delivers the standards which are different from other boards due to our context. In particular, that the medical workforce around HAI was particularly fragile and NHS Shetland is working with NHS Grampian to explore ways of working together to deliver microbiology services in the future.

DECISION: the Board noted the Healthcare Associated Infection Report

2024/25/58 Medical Director Annual Report 2023/24 *(Board Paper 2024/25/30)*

Dr Kirsty Brightwell presented the report which sets out the position with regard to medical staffing and key points highlighted to members included:

- a successful year of appraisals which can provide assurance around the appraisal process for doctors which is part of the GMC requirement for all medical doctors
- there remains a gap in medical leadership for community and primary care, but the Partnership is working to find a sustainable solution including career paths for GPs
- the Clinical Governance and Risk Team were commended for their hard work in 2023/24 and who continue to support the Board to focus on governance and learning as part of normal processes.
- Appendices by Dr Pauline Wilson provide assurance of the governance around junior doctors, medical students and medical education.

- ACT funding (for junior doctor and medical student education): governance structures are being put in place to provide additional places for medical students.
- Two courses were provided to support senior doctors to provide education to junior staff – ‘Performance Support’ and ‘Leadership and Learning Environment’ courses were undertaken in September by 10 senior doctors.
- Duty of Candour: a significant rise in the number of cases reviewed showing increased awareness and a positive effort to report adverse events and seeing the benefits from doing so. The number of cases is consistent with NHS Shetland being a small board.

Discussion

In response to a question from Mrs Hubbard regarding vacant Consultant Anaesthetist posts, Dr Brightwell explained that despite not having substantive Consultants in post, the Board had a good, safe and consistent team in place (who were not on substantive contracts with NHS terms and conditions). Consultant Anaesthetists in remote and rural areas have wide ranging, specialist job descriptions compared to mainland boards which make it challenging to recruit.

Mrs Cornick asked if the increase in reported Duty of Candour cases was due to increased awareness or an increase in incidences of adverse events. Dr Brightwell said there were a number of explanations for the increase. The Safer Staffing legislation which came in 2024 had increased awareness and reporting, staff are conscious of Duty of Candour as a means to report cases originating in other mainland hospitals, plus there is greater recognition amongst staff that reporting aspects of health systems helps the Board identify areas of improvement work in conjunction with partners such as the Scottish Ambulance Service.

DECISION: The Board noted the Medical Director Annual Report 2023/24.

2024/25/59 Finance Monitoring Report 204/25 at Month 3 (Board Paper 2024/25/31)

Mr Marsland presented the report and informed Members that at the end of June, the Board was £1.5 million overspent. The report outlines the 3 key performance indicators in terms of assumptions in the Financial Plan which the Board is required to achieve in order to reach the position of breakeven. The Board was currently behind target on all 3 KPIs adverse and all three of those plans so behind target and the challenge for Directors over the remaining 8 months of the year was to bring the Board back into financial line and develop efficiency savings for 2024/25 and over the next 2-3 years.

Mr Marsland said that the UK government had stated that public sector restraint on expenditure would continue for the foreseeable future, which will also impact on the Scottish Parliament's budget and therefore challenging for the NHS. NHS Shetland has an obligation to take responsibility for managing the Financial Plan alongside the risks associated with the underlying causes for the overspend.

Discussion

Members discussed the paper and Mr Marsland said that the efficiency savings from Endowment funded MRI travel was non-recurring because in the first year, the running costs of the MRI scans was funded from the Board's Endowment Fund. From year 2, the Board will take responsibility for the cost of running the MRI scanner. There may be some cost pressures due to changes in prices and circumstances since the plan was originally agreed in 2018.

Funds held in reserve are funds not yet allocated to services, for example one of the major funds currently is the fund awarded for AfC potential non-pay costs. There are also inflation reserves held awaiting confirmation of cost increases for 24/25 in order to calculate the non-pay inflation to reflect underlying cost. The Board has no underlying reserve in terms of carrying forward and the revenue for the NHS is on a year-to-year basis.

DECISION: the Board noted the Finance Monitoring Report 204/25 at Month 3.

2024/25/60 Performance Report Quarterly Update (Q1) *(Board Paper 2024/25/32)*

Lucy Flaws presented the report and commented that the data and information contained was largely the same as previously reported and the organisation was experiencing the same challenges across the system.

The 7 functional areas focussed on in the report are:

- Creating the Conditions for a Sustainable Organisation
- Scheduled Care
- Preventative and Proactive Care
- Urgent and Unscheduled Care
- Support Systems
- Effective Partnerships
- Shifting the Balance of Care

Discussion

In response to a question from Mr Carroll regarding the pressure on staff to manage the significant increase in the Freedom of Information requests since 2021, Ms Flaws said this was a similar position in the Local Authority and explained the ways the team was working together to developing systems to organise and manage requests and responses including signposting to published sources where possible.

Mr Marsland added that the Board had been in contact with the Scottish Parliament Information Resource Centre (SPICe) regarding training for researchers to reinforce that some information is publicly available. Some FOIs requested submitted by the media in connection with news reporting are handled by the communications team as an urgent request. Members noted there would be an Internal Audit report on FOIs being present to the Audit & Risk Committee in September including recommendations for the organisation to streamline the process.

Mrs Hall informed Members that work was underway to establish a method of reporting progress with AfC pay reform as requested by SGov. It was hoped it would be possible to begin reporting progress at the next Board Meeting in October.

In response to a question from Mrs Jones regarding the delivery of adult psychological therapies and the relationship with NHS Orkney to help provide the service, Ms Flaws explained it was too early to tell with the agreement being put in place in April and the service beginning in June. The next report for Q2 will focus on psychological therapies including from the perspective of a remote clinician.

DECISION: the Board noted the Performance Report Quarterly Update (Q1).

2024/25/62 Workforce Report 2023-24 *(Board Paper 2024/25/33)*

Ms Allinson presented the report which provides a snapshot of the workforce data collected at the 31st March 2024. The data in the report had already been reviewed and discussed through the appropriate governance routes of Area Partnership forum and Staff Governance Committee. The format of the report is aligned with the Staff Governance Action Plan and the National Workforce Strategy, which identifies the five pillars of the workforce journey (plan, attract, train, employ and nurture).

Discussion

Mr McCulloch said it was very encouraging to see the trend in numbers for completion of statutory mandatory training was improving and it was hoped with the introduction of additional protected learning time that this would continue. It was acknowledged that there were some challenges around staff attending training depending where that training was being hosted.

In response to a question from Mr Campbell regarding the possibility of screening out ineligible candidates in order to make the online application process more efficient, Ms Allinson explained that this was a national issue and Jobtrain were working on adjustments to the system but there was currently to completion date.

Mr Carroll said to would be helpful to have more data from exit interviews and asked what could be done to encourage more staff to participate. Ms Allinson explained there was a member of the HR Team currently carrying out a project on exit interviews and once the results are analysed it would be possible to look at improvement targets which will be included in the Staff Governance Action plan for 2025/26.

DECISION: the Board noted the Workforce Report 2023-24.

2024/25/63 Health and Care Staffing Act Q1 Report *(Board Paper 2024/25/34)*

Ms Watson presented the report and explained the Act had been enacted on 1st April 2024 and the purpose of which was to provide a statutory basis for the provision of appropriate staffing within health and care services and it's applicable to staff across all clinical areas of practise within NHS Shetland. The Act applies to all clinical staff and senior leaders within all healthcare profession ie. nursing and midwifery, allied health professionals, medical staff, dental staff, pharmacies, psychology and the healthcare scientists. The Act must be must be applied consistently across all the roles within the scope, with the intent to enable the delivery of safe, high quality care and to improve outcomes for people as well as support the health, well-being and safety of patients and staff. In additional to the guidance principles of the Act, there are 10 duties which are now placed on NHS boards, one of which is the introduction of a quarterly compliance report to the NHS Board.

Ms Watson explained the governance route for the work since March 2022 to implement the Act through the Health and Care Staffing Programme Board reporting through Clinical Governance Committee and Staff Governance Committee on a quarterly basis.

Ms Watson described in detail the key highlights in terms of real time staffing and the implementation and monitoring of the Essentials of Safe Care package of guidance. Members noted that no issues of concern had been raised by Scottish Government or Healthcare Improvement Scotland following submission of the Board's quarterly return.

The Board is required to report on any agency spend in excess of 150% of a substantive staff member. In Q1 the Board had reported no staff employed that exceeds that barrier, but Members noted this sum did not include travel and accommodation costs for these individuals as it was very variable across the postholders employed. Scottish Government had been made aware and feedback was awaited as to whether this was acceptable.

Discussion

In response to a question from Mrs Hubbard regarding any unexpected findings from the work to implement the Act, Ms Watson said that perhaps the only point was the positive response from SGov that NHS Shetland had been too critical on a few parts of its self-assessment (compared to other boards in Scotland). Mr Robinson said the Board recognised the huge effort made by staff to put in place new systems to offer Safe Care including Allocate.

Members complimented Ms Watson and her team on their hard work to produce such a comprehensive report whilst carrying out other roles in their jobs. Ms Watson and the Board gave their thanks to Michelle Hankin, Clinical Governance Team Leader who had acted as Programme Manager for eRostering and had been able to progress this work in a relatively quick period of time.

DECISION: the Board noted the Health and Care Staffing Act Q1 Report.

2024/25/64 NHS Shetland Annual Delivery Plan 2024-25 (Board Paper 2024/25/35)

Ms Flaws presented the report which was an updated version of the Annual Delivery Plan (ADP) 2024/25 from that previously discussed by the Board in private session on 30th April 2024 and at that time was awaiting feedback from Scottish Government. SGov have now approved the Plan in May 2024 with no particular concerns other than some areas for improvement and inclusion now incorporated.

There is a considerable amount of work underway but there are also a number of challenges and uncertainties that remain as for all Boards, for instance availability of resources and relationships with regional partners.

Members were asked to approve the ADP on the basis that they feel assured that it is aligned to the Board's Strategic Delivery Plan and recognised it as the first step in the strategic direction of the organisation. It was noted that the content of the Plan was subject to some change as the programmes of work for the Board's Strategic Delivery Plan become fully developed. As work progresses, updates will be presented to the Board on the key areas of Urgent and Unscheduled Care, Preventative and Proactive Care, Elective and Specialist Services etc.

Discussion

Professor Carolan said that in the next iteration of the ADP it would be possible to include more emphasis on the improvement work being done around diagnostic services with drafts being presented to the Finance and Performance Committee where possible in order to consider how the SGov directives will influence the ADP and the Board's priorities.

DECISION: the Board approved the Annual Delivery Plan 2024-25.

2024/25/65 Procurement Annual Report 2023/24 (Board Paper 2024/25/36)

Mr Marsland presented the report which was one of the statutory obligations which arose from the Procurement (Scotland) Regulations 2016 legislation for public sector bodies. The report has previously been presented to all relevant procurement groups and approved by the Procurement Steering Group. Mr Marsland described the five key performance measures outlined in the report.

Discussion

Mr Carroll asked for clarification if under the legislation, organisations were obliged to pay the Scottish Living Wage or the UK Real Living Wage. Mr Marsland explained that it was the Scottish Living Wage which Scottish Government adopted is the figure set by the Living Wage Foundation, as opposed to the UK Parliament set Real Living Wage (officially the living wage). The legislation was implemented before the UK government rebranded the Minimum Wage as the Real Living Wage.

In response to a question from Mrs Jones regarding whether the Board received any feedback on procurement processes within the NHS from the local business community, Mr Marsland said use of local food suppliers was a question often asked through FOIs. It was worth acknowledging that although the Board may use a local food wholesaler, they will in turn be using a national supplier so not everything can be bought entirely locally. Due to locality, the majority of Estates procurement is done using local suppliers who again will purchase from their suppliers which are external to Shetland.

DECISION: the Board approved the Procurement Annual Report 2023/24.

2024/25/66 Standing Committee Membership

(Board Paper 2024/25/37)

Mrs Hand presented the paper and explained there were a number of reasons why the Board had not considered committee membership holistically for some time, namely having vacancies on the membership of the Board, and changes to governance arrangements through the pandemic. The result was that the Board was now off track in terms of the two year cycle of reviewing committee membership. Mrs Hand said the paper had been written with some confidence that all Board Members would be present at this meeting to participate in the discussion, but the likelihood was that not all committee vacancies could be agreed now and it would be revisited at the October Board meeting when it would be finalised in its entirety.

Mr Robinson summarised the current position and proposed committee membership changes.

- Audit & Risk Committee
Colin Campbell steps down as Chair and leave the committee
Joe Higgins becomes Interim Chair
Natasha Cornick leaves the committee
Kathy Hubbard joins as a member (Mr Robinson supports this)
- Finance & Performance Committee
Kathy Hubbard joins as IJB representative

Membership of the Clinical Governance Committee and Staff Governance Committee would be considered at the October Board Meeting. Changes to the Chair of Audit & Risk Committee would also mean they join Remuneration Committee and would require induction.

Mrs Hand pointed out it could still be a challenge for some standing committees to be quorate due to availability where some Non-Executive Directors can represent more than one role on a committee. The role of Area Clinical Forum Chair is also still vacant on the Board.

DECISION: the Board approved the Standing Committee Membership **and noted** this would be considered further at the October meeting.

2024/25/67 Remuneration Committee Terms of Reference *(Board Paper 2024/25/38)*

Mrs Hall presented the paper and said in line with standing instructions, the Board is required to review the terms of reference of the board standing committees on an annual basis. The Remuneration Committee has reviewed its terms of reference and they are in line with the best practise guidelines issued by Scottish Government.

DECISION: the Board approved the Remuneration Committee Terms of Reference.

2024/25/68 Remuneration Committee Annual Report *(Board Paper 2024/25/39)*

Mrs Hall presented the report which informs the Board on the work the Remuneration Committee has undertaken over the course of 2023/24. As Chair of Remuneration Committee, Mrs Cornick stated that it has been a busy year for the Committee, and a number of additional meetings had been held.

DECISION: the Board noted the Remuneration Committee Annual Report.

2024/25/69 Approved Committee Minutes for Noting

Members noted the committee minutes.

2024/25/70 The next meeting of Shetland NHS Board will be held on Tuesday 8th October 2024 at 9.30am via Microsoft Teams.

The meeting concluded at 11:30