

**APPROVED**

**NHS GRAMPIAN**  
**Minutes of Meeting of Grampian NHS Board on**  
**Thursday 1 June 2023 at 10.00am**  
**(virtually by Microsoft Teams)**

**Present:**

**Board Members**

Mrs Alison Evison (Chair)	Chair/Non-Executive Board Member
Mrs Amy Anderson	Non-Executive Board Member
Cllr Ann Bell	Non-Executive Board Member
Professor Siladitya Bhattacharya	Non-Executive Board Member
Cllr Tracy Colyer	Non-Executive Board Member
Mrs Kim Cruttenden	Chair of Area Clinical Forum/Non-Executive Board Member
Mr Albert Donald	Non-Executive Board Member/Whistleblowing Champion
Ms Joyce Duncan	Non-Executive Board Member
Professor Nick Fluck	Medical Director
Mrs Luan Grugeon	Non-Executive Board Member
Professor Caroline Hiscox	Chief Executive
Mr Steven Lindsay	Employee Director/Non-Executive Board Member
Mr Derick Murray	Non-Executive Board Member
Mr Dennis Robertson	Vice-Chair/Non-Executive Board Member
Dr John Tomlinson	Non-Executive Board Member
Mrs Susan Webb	Director of Public Health/Portfolio Lead Population Health

**Attendees**

Mr Paul Bachoo	Portfolio Lead Integrated Specialist Care
Mrs Louise Ballantyne	Head of Engagement
Mr Simon Bokor-Ingram	Chief Officer, Moray Integration Joint Board and Portfolio Lead Moray
Ms Jackie Bremner	Baird and ANCHOR Project Director (Left 10:27)
Dr Adam Coldwells	Director of Strategy/Deputy Chief Executive
Ms Sarah Duncan	Board Secretary
Mrs Jane Ewen	Nurse Director
Ms Geraldine Fraser	Portfolio Lead Integrated Family Services
Ms Pam Lowbridge	Senior Specialist Analyst, Health Intelligence
Mrs Sandra MacLeod	Chief Officer, Aberdeen City Integration Joint Board/Portfolio Lead Medicine and Unscheduled Care and Mental Health Services (Left 10:57)
Mr Gavin Payne	General Manager, Facilities and Estates
Mr Tom Power	Director of People and Culture
Mr Alan Sharp	Assistant Director of Finance
Mrs Alison Wood	PA/Minute Taker

**Apologies**

Mr Paul Allen	Director of Infrastructure and Sustainability
Dr June Brown	Executive Nurse Director
Mrs Kate Danskin	Chief of Staff
Miss Lesley Hall	Assistant Board Secretary
Mr Stuart Humphreys	Director of Marketing and Communication
Ms Pamela Milliken	Chief Officer, Aberdeenshire Integration Joint Board/Portfolio Lead Aberdeenshire
Mr Sandy Riddell	Non-Executive Board Member
Mrs Lorraine Scott	Director for Planning, Innovation and Programmes

Mr Alex Stephen  
Cllr Ian Yuill

Director of Finance  
Non-Executive Board Member

Mrs Evison, Chair, welcomed everyone to the meeting. It was noted that the meeting was being recorded for publication on the NHS Grampian website.

## **1 Apologies**

Apologies were noted as above. The meeting was quorate.

## **2 Declarations of Interest**

There were no declarations of interest.

## **3 Chair's Welcome**

Mrs Evison thanked NHS Grampian staff and the public who had taken part in Grampian Pride on 27 May 2023. She acknowledged NHS Grampian's participation in the world-wide Daisy Awards which recognised the efforts of nurses for patients and families during their careers. The Chair welcomed the launch of ONE BioHub on the Foresterhill site, Aberdeen which brought scientists, innovators and investors together to turn research into businesses capable of tackling modern health challenges.

Mrs Evison advised that the Baird and ANCHOR Project Team and Infection Prevention and Control colleagues continued to work with the Performance Assurance, Finance and Infrastructure Committee and NHSS Assure to address the issues previously reported on ventilation and water systems issues. Site visits with elected officials were underway to showcase what had been achieved to date for the complex, modern facilities which would meet the needs of the population.

She highlighted this was the final Board meeting for Mrs Cruttenden who would be stepping down from her role as Chair of the Area Clinical Forum following her 4 year term. The Board thanked her for the significant contribution that she had made during her time in this role and wished her well for the future.

## **4 Minute of Meeting on 6 April 2023**

The minute of the meeting held on 6 April 2023 was approved as an accurate record.

### **4.1 Matters arising**

#### **Item 5 Chief Executive Report**

Professor Hiscox updated the Board on the timeframes for the Performance Assurance Framework. It will be on the agenda for the Performance Assurance, Finance and Infrastructure Committee on 28 June 2023.

#### **Item 6 How Are We Doing Performance Report**

The minute of 6 April 2023 stated that an updated brief would be provided to the Board on the Culture Collaborative. Mr Power advised that a full update on culture and staff experience had been provided at Staff Governance Committee on 18 April 2023. It was

agreed this provided the necessary assurance to the Board and no further briefing was required.

## **Item 7 Director of Public Health Annual Report 2022 – Delivering Change, Improving Lives**

Mrs Webb confirmed that the figure of 85% of income deprived population who did not live in the deprived areas was correct.

### **5 Chief Executive's Report**

The purpose of the Chief Executive's report was to update on priority issues since the previous Board meeting that were not covered in the main agenda.

Professor Hiscox highlighted that despite the continued pressures in the system, work was ongoing to improve, stabilise and move the system towards NHS Grampian's strategic intent. She advised there was continued engagement with Scottish Government and provided information about the review of the bed base capacity at Aberdeen Royal Infirmary (ARI). There was work ongoing to develop and embed system leadership in the organisation. The opening of the two ligature reduced wards at Royal Cornhill Hospital following refurbishment was positive for both colleagues and the public.

Board members discussed the following points:

The ARI Bed Base review was focused work to stabilise the system, to provide the best opportunity to reduce distress for patients and colleagues and to maximise access to services whilst maintaining safety. The review focused on the redesign projects and programmes of work currently underway for urgent care. Data analysis would consider the strategic intent and whole system working including Health & Social Care Partnerships and Primary Care. It would be the first step in redefining the inpatient bed base needs in relation to the change in demand profile. The review has considered all data over the last few years to consider the demand/ capacity gap. A modelling tool developed by Health Intelligence allowed for a large number of variables to be considered to determine the optimum number of staffed ARI beds required to maintain all of the objectives for unscheduled care and scheduled care. A multi stakeholder, co-production event would be held on 22 June 2023 to share and discuss the model. The review highlighted how hard staff had worked to provide the care to patients without the additional beds that the model indicated were required.

Engagement with Scottish Government included the opportunities and challenges for the new Delivery Plan. There was a mutual desire to focus on prevention and move towards self-directed preventative work in empowered communities consistent with NHS Grampian's strategic direction. There was a collective understanding of the financial challenges. The open dialogue and supportive relationship with Scottish Government colleagues was important.

Challenges across public sector including financial, workforce and population health required organisations to work collaboratively to achieve best outcomes for the population. The public considered their care experience as intertwined rather than through the lens of separate organisations. It was important for the partner organisations to consider how to reduce confusion, duplication and costs when working together on a whole system basis. There was significant diversity of both need and delivery of services across Grampian and one size would not fit all. Working with and empowering communities would help design systems as effectively as possible to move towards the strategic intent of improving

population health and addressing inequality. Cross boundary working, focus on prevention and clarity on the role of partnership in progressing issues in a collective way were discussed at a senior system leaders event held in May 2023 for NHS Grampian and Health and Social Care Partnerships colleagues to build system leadership capacity.

**The Board noted the Chief Executive report.**

## **6 How Are We Doing Performance Report**

Professor Hiscox presented the 'How Are We Doing' Board performance report which provided an overview against the deliverables contained in the annual Delivery Plan for quarter 4 – January to March 2023. She highlighted that the system remained very challenged and acknowledged the continuous pressures placed on colleagues and citizens as they waited to receive care.

Mrs MacLeod highlighted that performance for waiting over 12 hours in the Emergency Department (ED) was amber. It had been a challenging winter and the system continued to remain challenged. The ED at Aberdeen Royal Infirmary had been one of the busiest in Scotland over the previous weekend for attendances. She advised that improvement work was ongoing which would improve performance. However, there were some factors which were not within the control of NHS Grampian. The bed base review and other key work with partners within Health and Social Care would assist with the delayed discharges of patients. Overall, Unscheduled Care access was considered red in the grading system used in the HAWD report.

The following points were discussed:

The team were congratulated on the work with the Flow Navigation Centre (FNC), Cardiac Catheter Lab and Hospital at Home which prevented additional patients requiring to attend ED.

There were a number of projects to support vulnerable residents in the community rather than attending ED. There had been an analysis of those attending ED which highlighted attendances from specific geographic areas for mental health and substance misuse issues. Navigators in ED now worked with alcohol and drug partnership colleagues. Postcode analysis has also been used to target interventions eg a community led pilot on gritting pavements in some of the areas with the greatest number of falls.

Cancer performance targets had not been met. However, analysis showed that no harm was caused as a result, with support provided to those waiting for treatment. Initiatives to support patients on waiting lists had been introduced over the last few years through non-core funding, but future funding was unknown. This has been identified as an issue for the planning and development of these services. Work was ongoing with Scottish Government about sustainable services, including core and non-core funding split and separation of pathways for cancer and non-cancer to avoid blockages in areas common to a number of pathways.

Work continued to build system leadership capability for the future, including work with King's Fund and planning for the Year of the Manager, and the approach to the issue of inequalities. The content of national programmes provided by NHS Education for Scotland (NES) would require to be considered. Grampian Area Partnership Forum (GAPF), HR and other colleagues will agree the appropriate way to take this forward.

It was acknowledged that further work was required by partners to provide joined up governance which satisfied complex, overlapping governance and regulatory requirements. Clinical Governance colleagues were considering how governance could be integrated in a different way for collaborative governance.

Maintaining a sustainable workforce would be assisted if Scottish Government funding was received on a recurring basis in a planned way. There were several initiatives to widen awareness of health and care as a career, including extensive work with schools and colleges through the NHS Academy, reinstating work experience opportunities. There was also work with the Robert Gordon University to align undergraduate student nurses and midwives in their final year to preferred areas for their first role as a new graduate. National and local discussions were ongoing for roles difficult to recruit to. For longer term planning, the joint workforce planning forum with University of Aberdeen will resume and consider diversification of the roles required in the future.

Improving recruitment and retention of staff would reduce the cost of supplementary staffing. This may require changing assumptions about work/life balance and role and working pattern flexibility. National dialogue had taken place that the training offered for doctors would require to be modified for the younger generation as they would require to work longer prior to retirement. There had been an increase in the number of nurses and midwives who were working part time hours which also included those using the retire and return policy. This resulted in more colleagues requiring to provide the same capacity with more part time workers.

#### **The Board:**

- **Reviewed and commented on the performance data and information in each section of the How Are We Doing (HAWD) Report attached as Appendix 1 to the Report.**
- **Confirmed that the HAWD report had provided sufficient detail and assurance about performance to the Board about system performance for the quarter January – March 2023.**

## **7. 2022/23 Year End Financial Position**

Mr Sharp provided an update on the finalised financial position for 2022/23. It was noted that NHS Grampian had achieved the three key financial targets:

- To operate within the Revenue Resource Limit.
- To operate within the Capital Resource Limit.
- To operate within the Cash Requirement.

This was subject to external audit which was currently ongoing. NHS Grampian was reporting a small underspend against the revenue resource limit for 2022/23 of £0.637 million against a total budget of £1.4 billion. The revenue position had improved significantly during March 2023 compared to the £14.9 million overspend projected at the end of February. This was due to funding received in March 2023 from the Scottish Government for a range of Grampian-specific system pressures, including funding to support planned care programme, staffing costs and the drug costs relating to vaccination programmes. There had been a reduction in the level of the accrual for untaken annual leave of £5.6 million as staff had used up leave carried forward from the 2021/22 financial year as a result of the Covid pandemic.

The underlying financial position continued to be very challenging. The financial plan for 2023/24 had been presented to the NHS Grampian Board in April 2023. It projected a significant revenue overspend of £60 million after assuming a 3% savings achievement. The gap was driven by multiple factors including inflationary pressures which was a significant contributor to the financial challenges including costs of energy, drugs and medical supplies. Balance had been achieved by using a number of one off measures which would not be available in the current financial year. The local Value and Sustainability Group would take forward the delivery of the efficiency programme. However, it was not anticipated that NHS Grampian would achieve a revenue break-even position with an overspend against the revenue budget for 2023/24.

The planned infrastructure investment programme for the year of £108.8 million had been fully invested, with the capital resource limit target being achieved. This was the largest capital total in a single year for NHS Grampian with a large amount of the programme incurred on the construction costs for the Baird Family Hospital and ANCHOR Centre.

The following points were discussed:

The underspend of £0.637 million would be carried forward into the current financial year.

Discussions were taking place at national and Scottish levels on the cost of drugs. A national UK-wide scheme regulated the costs of some very high-cost hospital drugs and this was being reviewed by the UK Government who were negotiating with the pharmaceutical companies. Significant pressures on drug costs in Primary Care, including the inflationary pressures, were noted.

The NHS Grampian financial plan for 2023/24 projected a significant revenue overspend of £60 million after assuming 3.0% savings. The financial plan would be reviewed to strike a balance between financial constraints and operational pressures because the one-off measures to reduce the overspend would not be available in the current financial year. The financial position must be a critical context for decision making by the Board. It was recognised that financial balance would not be achievable for a number of years. It was important that NHS Grampian was transparent and open with the public in Grampian of the financial position and the challenges faced including why and how decisions were being taken going forward. It was noted that other areas in the public sector were also experiencing significant financial challenges including IJBs and local authorities. Joint working of finance officers across the partner organisations would be important to ensure that savings achieved in one part of the system did not have consequences in other areas.

**The Board:**

- **Reviewed the information provided in the paper and confirmed that it was assured that the Board had achieved the three key financial targets for the 2022/23 financial year**

**8. Forum and Integration Joint Boards (IJB) Reports**

The following reports were noted:



## **8.1 Area Clinical Forum (ACF)**

Mrs Cruttenden highlighted the challenges of staffing particularly in paediatric anaesthetic dentistry and general practice. An update was provided to the Clinical Governance Committee which detailed the steps being taken to mitigate the risks. Grampian Area Partnership Forum and ACF Staff Attraction and Retention Group were making progress. Colleagues in Primary Care had worked collectively across the partnership areas to consider how to build resilience and sustainability and consider what the longer term future could look like. There were shared objectives for the 3 IJB Chief Officers to develop a primary care strategy and implementation plan that would address longer term sustainability issues.

The process was underway for the election of the new Chair for ACF. Mrs Cruttenden thanked the Board for their support to her during her time as chair.

## **8.2 Grampian Area Partnership Forum (GAPF)**

Mr Lindsay highlighted that the Industrial Action Short Life Working Group (SLWG) continued to meet regularly and the outcome of the member consultation on the junior doctors' pay offer was awaited.

## **8.3 Integration Joint Boards (IJBs)**

Mr Bokor-Ingram highlighted the breadth of business carried out at IJBs through the lens of system working and leadership. The time lag between the approved minutes was noted. However the latest IJBs meeting papers were available to access online.

## **9. Approved Committee, Forum and IJB Minutes**

The following approved minutes were noted:

### **Committees**

9.1 Audit and Risk Committee – 14 March 2023

9.2 Endowment Committee – 27 January 2023

It was noted that whilst Endowments had been rebranded as NHS Grampian Charity in March 2023, the Endowment Committee name would continue and work would be done to determine how to formally alter the name.

9.3 Performance Assurance, Finance & Infrastructure Committee – 22 February 2023

9.4 Staff Governance – 24 February 2023

9.5 Clinical Governance Committee – 21 February 2023

9.6 Population Health Committee – 23 February 2023

### **Forums**

9.7 Area Clinical Forum – 1 March 2023

9.8 Grampian Area Partnership Forum – 16 March 2023

### **Integration Joint Boards (IJBs)**

9.9 Aberdeen City IJB – 31 January 2023

9.10 Aberdeenshire IJB – 1 and 29 March 2023

9.11 Moray IJB – 26 January 2023

**10 Any Other Business**

There was no other business.

**11 Date of next meeting**

- Thursday 3 August 2023