

Minutes of Meeting

19th December 2018

Lecture Room, Education Unit, Western Isles Hospital, Stornoway

Members Present:

Chris Anne Campbell	Nurse Director	Angus McKellar	Medical Director
Gordon Jamieson	Chief Executive	Diane McPherson	Non-Executive Director
Margaret MacKenzie,	Chair of ACF / Non-Executive Director (Chairing the meeting)	Dana Murray	Employee Director / Non-Executive Director
Murdo MacMillan	Non-Executive Director	Uisdean Robertson	CnES Representative / Non-Executive Director
Gillian McCannon	Non-Executive Director	Maggie Watts	Director of Public Health / Caldicott Guardian

In Attendance:

Debbie Bozkurt	Head of Finance, Procurement and Chief Finance Officer of the IJB
Michelle McPhail	Business Manager
William Findlay	Nurse/AHP Director / Chief Operating Officer

1. WELCOME

Mrs. MacKenzie took the Chair and welcomed those in attendance to the meeting. She acknowledged that this was the last meeting for Mrs. Campbell who would retire at the end of the month. It was noted that a formal presentation would be made to Mrs. Campbell later in the session.

Mrs MacKenzie specifically welcomed Mr. William Findlay to his first meeting of the Board. Mr. Findlay would be taking over the role of Nurse/AHP Director / Chief Operating Officer and she and Board colleagues wished him well in this new venture.

Mrs. MacKenzie expressed the Board's great sadness at the recent death of the Chair, Mr. Neil Galbraith. Mrs. MacKenzie acknowledged the work Mr. Galbraith had undertaken over many year, not only the 8 years of service to the Board but also the contribution he had made over many decades to both Education and the Port Authority and his wider contribution to the church and his community. She noted that the Cabinet Secretary for Health and Sport, Ms. Jeanne Freeman had written to Neil Galbraith's family noting her and Scottish Government colleagues' condolences at their loss.

2. APOLOGIES AND ACKNOWLEDGEMENTS

Rosemary Bugler	Non-Executive Director
Ian Burgess	Non-Executive Director (Vice Chair)

3. INTRODUCTION

3.1 Chair's Report

No report provided in the absence of the Chair and Vice-Chair.

Decision: No decision

Action: No formal action required.

4. DECLARATION OF INTEREST

No declarations of interest were raised in relation to any items on the agenda.

5. MINUTES

5.1 Minutes of 24.10.18 - DA

The Minute of the meeting of the Board held on 24th October 2018 was approved as an accurate record of the meeting subject to the following amendments:

- Items 8.1 – Mental Health Service Redesign Project Report –
 - 1st paragraph, 2nd sentence insert "... advising that admissions were suspended and this will enable the model would be tested fully. The last patient..."
 - 2nd paragraph replace "Realistic Medicines" with "Realistic Medicine".
- Item 11.1 Corporate Risk Register – 5th paragraph, 2nd sentence should read "... more specific detail of the 3 levels of assurance should be..."

Decision: The Board formally approved the Minutes of 24th October 2018.

Action: No formal action required.

5.2 Matters arising from previous Minutes

Members did not raise any questions pertaining to the previous minute.

Mrs. MacKenzie enquired if the property adjacent to Leverburgh Clinic was being declared as surplus to requirement. Mr. Jamieson advised that the property is being used to provide locum GPs with accommodation and without this it would prove more challenging to attract people to the post. However he recognised the need to re-assess the use of existing property and the worth to the Board.

Action: Mr. Jamieson noted that he would discuss with the Estates Manager and assess the property review, reporting back to the Board.

5.3 Action Points

The following updates were noted to the Action Points:

- 29.08.18 – 6.3 Patient Escort Funding Process ~ As the Board Development session was cancelled in November 2018, the session on “Near Me” will be presented in Jan/Feb ‘19 **UPDATE**
- 29.08.18 – 8.1 – Mental Health Service Redesign Project Report – the latest information was presented to the Board 19.12.18. **REMOVE**
- 24.10.18 – Surplus Property – The item has been completed. **REMOVE**

Decision: The Board formally noted the updates.

Action: The action points will be updated to reflect the above outcomes.

6. FINANCIAL PERFORMANCE

6.1 Financial Performance Monitoring Month 7

Issue: *The Board was asked to note for assurance purposes the Report presented by Ms. Debbie Bozkurt, Head of Finance, Procurement and Chief Finance Officer of the IJB.*

Discussion: Ms. Bozkurt informed the Board of the financial position at month 7, which denotes an in-year overspend of £2,308k and a projected year-end position of an overspend of £1,500k after all the contingency fund has been applied.

During Ms. Bozkurt’s presentation she advised that the long term issues, which will have financial concern in the coming years:

- Service Level Agreements with mainland Boards
- Off island placements for both adult and CAMHS provision
- Patient Assess Scheme drugs (PAS drugs) for Haematology and Oncology treatment.

The Board discussed the short term to medium term challenges highlighting:

- Laboratory services are projecting an overspend at the year-end of £407k. The overspend is partly related to the Blood Transfusion Service.
- GP prescribing is projecting a year-end overspend of £172k. The level could increase depending upon whether the anticipated saving on the tariff comes to fruition.

Ms. Bozkurt drew colleagues' attention to the section in the report on Delayed Discharges. She advised that there is a high risk that the level of the number of delayed discharges will continue which will require higher bank costs to cover the staffing of contingency beds. It was indicated that at month 7 the projected overspend will be £251k. As at September 2018 the total delayed occupied bed days was 3,528 at a cost of £1,009k.

Board Members were encouraged by the work of the Directors aiming to achieve a year-end balance. Ms. Bozkurt directed Members to the information from the Government noting that all Boards should wherever possible get to a balanced year-end budget, there is no facility in 2018/19 to carry forward any overspends. To date it was noted that 4 NHS Boards in Scotland would be seeking brokerage.

Mr. Jamieson reiterated to Members the real challenges the Board faced in being able to deliver a breakeven position for the past 10 years. He noted that NHS Western Isles was the only Board in Scotland that met the 31 day cancer target and A&E 4 hrs waits. It was recognised that some of the targets not met, 62 day cancer target, are reliant on other mainland hospitals providing the diagnosis and treatment, which requires patients to travel to the mainland. The Scottish Government are informed of both our progress as well as challenges, ensuring that they are updated at all points.

Board members deliberated over the report. The vacant post for a Director of Human Resources was discussed and Mr. Jamieson confirmed that the post would be advertised soon. Board Members welcomed the update.

Decision: The report was formally noted for assurance purposes.

Action: No formal action required.

6.2 Capital Performance 2018/19

Issue: *The Board was asked to note for assurance the report presented by Ms. Debbie Bozkurt, Head of Finance and Procurement.*

Discussion: Ms. Bozkurt drew colleagues' attention to the report. The allocation for 2018/19 was £1,230m plus an additional reward of £0,1m for the installation of the CT scanner. She advised that it was anticipated that by the end of December all relevant costs associated with CDU and the Endoscopy washers will be in place and as a result the capital working group will resume and identify priority 1 projects which could be achieved before the end of March 2019 utilising the remaining £111k.

The Chair thanked Ms. Bozkurt and all concerned for their work in progressing the deployment of the capital allocation.

Decision: **The Board formally noted the report.**

Action: **No formal action required.**

7. CORPORATE DEVELOPMENT

7.1 Adverse Event Framework

The report was not available for discussion and will be presented in Feb/Mar 2019.

Decision: **The report was not presented.**

Action: **Present the report in Feb/Mar 2019**

William Findlay

8. SERVICE DEVELOPMENT

8.1 Mental Health Service Redesign Project Report

Issue: *The Board was asked to note for assurance purposes the report presented by Dr. Maggie Watts, Director of Public Health.*

Discussion: Dr. Watts provide further update to Board Members on the work of the Mental Health Redesign Steering Group, which met on the 24th October 2018. She advised that there is now separation of the work involving Clisham Ward and that relating to APU.

Dr. Watts highlighted the following:

- Admissions to Clisham Ward were suspended in October 2018.
- All Clisham Ward staff have been deployed, redeployed or appointed into posts across the NHS system in line with the Board's employment policies.
- One member of staff has been redeployed into the new health liaison post and spent time in Raigmore Hospital with a member of staff.

- In early 2019 looking to establish a nurse led model which would free up consultant time, as well as seeking to appoint to the second consultant post.

Dr. McKellar advised that the bays within Clisham Ward would be kept free at this point in time to allow for any winter planning but primarily to enable the model to be tested in full.

The Chair thanked Dr. Watts for the update and noted the Board's thanks for the work achieved to date.

Decision: The report was formally noted.

Action: No formal action required.

9. STAFF GOVERNANCE

9.1 Human Resources Workforce Report November 2018

Issue: *The Board was asked to note for assurance the report presented by Mr. Gordon Jamieson, Chief Executive.*

Discussion: Mr. Jamieson presented the Report to colleagues advising that sickness levels in October had risen to 6.06%, which equates to £211k loss in time.

In discussing the age groups, graphs noted in section 3 of the report, Mr. Jamieson remarked that he will be working with Ms. Bozkurt to review the potential direct correlation between the age of the staff and the level of sickness absence. Mrs. McPherson observed that if there is a proven link between the age of staff and the level of sickness within that age, the Board may have to accept the level of sickness absence against the Government's target. Mr. Jamieson also advised that he will be reviewing the age demographic for specific groups, 01-19 / 20-24 and 25-29 year olds over the last three years to see if there is any trends over the previous 3 years.

Mr. Jamieson, with the support of Ms. Bozkurt, will review the "Age v Sickness" data to ascertain any potential correlation.

Mr. Jamieson advised that he would present a paper on the work he and Ms. Bozkurt would undertake, reporting back in April/May 2019.

Mrs. Murray enquired as to the benefits and value the EASY system provides. She added that initially at the start of using EASY the level of sickness absence fell close to the 4% target, however it would be difficult to attribute the drop solely due to EASY as there were other training events undertaken at the same time with Managers on the use and implementation of HR policies. It was noted that the only two Boards in Scotland using the EASY system were NHS Western Isles and NHS Lanarkshire, both organisations were unable to achieve the Government's performance target. Mr. Jamieson stated that the Board needs to see what the alternative process would be, if the EASY system was withdrawn. A paper should be presented

noting how to strengthen the process and other areas of support and what this would look like, how would management and staff obtain advice on absence. It was agreed that this should be discussed between the Co-Chairs of APF and presented to the Board in due course.

The Chair thanked Mr. Jamieson for the update.

Decision: The Board formally noted the report.

Action: Report presented on “Age v Sickness” in April/May 2019

Gordon Jamieson /
Debbie Bozkurt

A report on an alternative system or process to the EASY system presented in due course

Gordon Jamieson /
Dana Murray

10. CLINICAL GOVERNANCE

10.1 British Sign Language Plan 2018-24

Issue: The Board was asked to note for information the report presented by Mrs. Chris Anne Campbell, Nurse Director.

Discussion: Mrs. Campbell informed Members of the development of the draft British Sign Language (BSL) Plan for 2018-2024, which sets out actions the Board will take over the next six years in line with the BSL (Scotland) Act 2015. Mrs. Campbell advised that the local Plan was developed with the support of staff who have hearing difficulties. The local plan follows the BSL National Plan which was published in October 2017 and denotes the six aims.

The Chair thanked Mrs. Campbell for the Plan, noting that she was seeking approval to enable the Plan to be circulated to the Public for a period of consultation, which Members approved. The Chair asked that the revised Plan, following consultation, is presented for formal approval.

Decision: The Board formally approved the Report for a period of public consultation.

Action: The final version of the Plan to be presented for approval.

William Findlay

11. PERFORMANCE

11.1 Corporate Risk Register

11.1.1 Corporate Risk Register Electronic Version

Issue: *The Board was asked to note for assurance the Corporate Risk Register report presented by Mrs. Chris Anne Campbell, Nurse Director.*

Discussion: Mrs. Campbell discussed the report noting the following updates:

- Risk 006 relating to **Laboratory Services** was updated on the 30th November 2018. Dr. McKellar advised that professional direction is in place for Microbiology only with the long term quality controls required from a mainland laboratory provider and these discussions continue.
- Risk 18 relating to **GP OOH** was updated on the 30th November 2018. Dr. McKellar advised that as of Jan 2019 A&E and Children on-call service will be provided by a rota of 4 Speciality Doctors with the rota being managed within secondary care. Recruitment process has resulted in 2 candidates being offered positions. Mrs. MacKenzie enquired as to the support from Junior Doctors. Dr. McKellar updated Members on the appointment process of Junior Doctors stating that they have a contract with NES but could be with the Board for a period of 4 – 6 months, so reliance on their input cannot be guaranteed. The OOH service within Lewis & Harris for the unscheduled care service is carried out by enhanced GP hours. It was noted that nationally and locally there are fewer GPs and the GPs in post will not necessarily support the OOH service. The new GP contract removes OOH function from the agreement. So therefore NHS24 is supported by GPs and A&E and CODS is provided by specialty consultants.
- Risk 11 - **Non-Compliance with blood safety and quality regulations** was updated on the 30th November 2018. It was noted that MHRA inspection in November 2018 revealed little progress being made in terms of incident management and quality systems. However a Lab Manager and Quality Manager are now in post which should mean that progress can now be made. The risk remains high and careful and constant support is still required.
- Risk 15 relates to **Lab Vacancy** updated on 30th November 2018. OOH lab cover has not been secured. Continue to rely on contingency arrangements in the event of a major incident occurring. Staff training need to take place as soon as possible to allow reintroduction of limited lab OOH services.

The Chair thanked Mrs. Campbell for the report.

Decision: The Board formally noted report.

Action: No formal action required.

The Chair noted that Mr. Jamieson had withdrawn from the meeting to take a telephone call and item 11.2 would be discussed upon his return.

11.3 Performance Monitoring Report 2018/19 Q2

Issue: *The Board was asked to note for assurance the report presented by Mrs. Chris Anne Campbell, Nurse Director.*

Discussion: Mrs. Campbell provided an update on the second quarter report in 2018/19 (July to September 2018). The Board discussed the position of:

- Cancer targets – 31 & 62 days
- Dementia register
- Antenatal presentations
- Dementia Post Diagnostic support

Mrs. McCannon enquired if the use of E-cigarettes have reduce the number of people coming forward to stop smoking. Dr. Watts advised that she is not aware of any impact on the numbers.

The Chair reflected on the information noting the challenges of meeting some trajectories remains around the same areas as previously reported.

Decision: **The Board formally noted the report.**

Action: **No formal action required.**

Mr. Jamieson returned to the meeting. The Chair asked for item 11.2 to be presented.

11.2 Complaints Report July – September 2018

Issue: *The Board was asked to note for assurance the Report presented by Mr. Gordon Jamieson, Chief Executive.*

Discussion: Mr. Jamieson presented the report to Members noting that the Stage 2 investigations turn-around time is not at a satisfactory level due to the investigating office not returning the paper work until after the deadline. Further discussions as to what can be done to support officers in returning the information timeously is underway.

Mrs. McCannon asked who the investigating officers are. Mr. Jamieson stated that there are only a few people, approximately 4 or 5, in the organisation who undertake the reviews all of whom are at senior management level.

Mrs. McPherson noted at the last meeting of the Healthcare Governance & Audit Committee, Mr. Roddy MacKay, Complaints Officer, attended the meeting advising Members of the challenges in obtaining a higher compliance report.

Decision: **The Board formally noted the Report.**

Action: **No formal action required.**

12. REPORTS / APPROVED OR DRAFT AGREED MINUTES FROM BOARD SUB COMMITTEES FOR NOTING

12.1 Area Clinical Forum

12.1.1 Area Clinical Forum Minute of 24.07.18 - A

Mrs. MacKenzie presented the Minutes for information.

Dr. McKellar advised of the establishment of the Acute Care Forum which will feed into the Area Clinical Forum. The Forum will comprise of senior clinicians and stakeholders to design, engage, influence and support research, quality improvement and promote safe and effective care. The Forum will meet monthly.

Mrs. McPherson noted within the Minute that under section 4 it refers to the “new” Patient Escort Travel Policy. Mrs. McPherson advised that the policy is not new but merely how the policy is being implemented on a more equity basis across the islands. Mrs. MacKenzie noted this.

Decision: **The minutes were formally noted.**

Action: **No formal action required.**

12.2 Area Partnership Forum

12.2.1 Area Partnership Forum Minute of 06.07.18 – A

Mrs. Murray presented the Minute for information.

No questions were raised.

Decision: The Board formally noted the Minute

Action: No formal action required.

12.3 Healthcare Governance & Audit Committee

12.3.1 Healthcare Governance & Audit Committee Minutes of 27.06.18 – A

12.3.2 Healthcare Governance & Audit Committee Minutes of 19.09.18 – A

Mrs. McPherson advised that the Members of the Committee raised their concern at not being told about the unannounced inspection and the associated recommendations. Mrs. Campbell indicated that from the initial inspection there was only a number of weeks between it and the unannounced inspection and therefore little changes had been made to the recommendations.

Decision: The Board formally noted the Minutes

Action: No formal action required.

12.4 Staff Governance Committee

12.4.1 Staff Governance Committee Minute of 20.08.18 – A

12.4.2 Staff Governance Committee Minute of 27.09.18 - A

Mrs. McCannon provided an update on the Minutes. She indicated that she met with a member of the H.R Department, Ms. Sammi Allan, who demonstrated the Turas system, which is the NHS Education for Scotland's new single unified digital platform for Health and Social Care.

Mrs. McCannon provided assurance that the approved Action Plan for Staff Governance noted a lot of good work being undertaken, however there were a number of issues being escalated pertaining to the lack of uptake on training ~ moving & handling, Fire Safety, as well as the lack of Health & Safety training records for Junior Doctors who move between Boards and Hospitals.

In relation to the support for Staff Governance meetings, Mrs. McCannon raised the concerns of Committee Members at the lack of attendance at meeting by an appropriate Human Resource staff member to provide professional guidance. The Committee recognised the void with the lack of a Director or Head of Human Resources and she wished to make the Board aware, however she noted the update from the Chief Executive on the imminent advert for a Director of HR.

The Chair commented upon the Minute of 20.08.18, seeking clarification on why the meeting was postponed after starting. It was advised that the meeting started with all Members present, however the meeting started while awaiting the arrival of management and staff side, but this did not take place and

therefore the Chair took the decision to cancel the meeting as no-one was present to provide update on the discussion papers.

Decision: The Board formally noted the Minutes.

Action: No formal action required.

12.5 Health and Safety Committee

12.5.1 Health and Safety Committee Minutes of 24.05.18 – A

Mr. Jamieson presented the Minutes for information.

No questions were raised.

Decision: The Minute was formally noted.

Action: No formal action required.

13. ANY OTHER COMPETENT BUSINESS

No matters were raised.

14. EVALUATION

The Board considered their response to the following:

	YES	NO	COMMENTS
Were you satisfied that the agenda items presented covered the current significant areas?	✓		No further comments.
Was there sufficient time to review the papers between receipt and the meeting date?		✓	A few papers were presented late.
Was there sufficient time allocated to all agenda items?	✓		No further comments.
Were the Executive Summaries an accurate reflection of the detailed paper?	✓		No further comments.
Were you able to reach a satisfactory conclusion from the information presented on each item?	✓		No further comments.
Were you able to contribute to the discussions and have your views considered?	✓		No further comments.
Did you consider that the Board discharged its duty in respect of • Proper scrutiny • Relevant questioning • Constructive challenging	✓ ✓ ✓		No further comments.

Board Meeting 19.12.18

Agenda Item: 5.1

Paper No:

Purpose: For Approval

15. DATE AND TIME OF NEXT MEETING

Public Board Meeting

Date: 30.01.19 Time: All day

Location: Balcony, Town Hall, Stornoway

Board Development Meeting

Date: 27.02.19 Time: All day

Location: Lecture Theatre, Clinical Skills, Western Isles Hospital, Stornoway

The Chair called the meeting to a close and thanked everyone for their contribution.

END