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Dear Ian,

NHS WESTERN ISLES: 2017/18 ANNUAL REVIEW

1. This letter summarises the main points discussed and actions arising from the Annual Review and associated meetings at Western Isles Hospital on 14 January 2019. I would like to record my thanks to everyone who was involved in the preparations for the Review and to those who attended the various meetings.

Meeting with the Area Clinical Forum

2. I had a constructive discussion with the Area Clinical Forum (ACF) and it was clear that the Forum feels it has effective links with the Board and can therefore make a meaningful contribution to the Board's work. I was reassured to hear that the ACF and the Integrated Joint Board (IJB) work together and that the Chief Officer is a regular attendee at ACF meetings; this offers the opportunity to contribute a clinical perspective to the work of the IJB. I heard how the Forum is supporting work on practising Realistic Medicine as well as the work being done to further develop the use of technology, such as using video conferencing for patient consultations thereby reducing the need for patients to travel for appointments. While the ambition is to have no unnecessary off island travel, there was a general consensus that clinical staff from mainland Boards need to support this concept more to enable this to happen. The ACF also spoke about the staffing challenges being faced by the Board, particularly in relation to difficulties with recruitment and retention and the Board's ageing workforce.

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3. I heard that some of the Professional Advisory Committees are not constituted. I recognise that the small numbers in some areas can make this difficult and later on in the private session it was agreed that you would consider how you can support engagement for clinical professional groups. Continued, meaningful engagement of local clinicians will be essential in taking forward both the critical health and social care integrations agenda and other service redesign programmes.

Meeting with the Area Partnership Forum

4. My meeting with the Area Partnership Forum (APF) was equally constructive and I heard from the attending members that local relationships remain sound and that there is generally a good attendance at meetings. I heard from the Forum of the work to address, where possible, the recruitment and retention challenges faced by the Board and the ageing workforce – areas which the APF told me are the biggest concerns to the Forum, particularly in light of the fact that vacancies across Health and Social Care in the Western Isles are at unprecedented levels. The APF is also looking at staff sickness absence levels and work is focussed on reducing sickness absence and keeping staff healthy. I also heard that the APF continues to engage on regional planning and I noted that the view of local staff is that NHS Western Isles does not fit into the North Region and would be better aligned with the West Region, because the majority of patients who have to travel off island for treatment go to Glasgow. The APF are also engaged in other areas of work including: local service redesign including the work on improving mental health services; the critical health and social integration agenda; and working to build a safe environment to report bullying and harassment concerns.

Patients/Carers Meeting

5. I would like to extend my sincere thanks to all the patients who took the time to come and meet with me. I greatly appreciated the openness and willingness of the patients and carers present to share their experiences. I heard that overall, patients appreciate the high quality of services and the excellent care provided by medical and nursing staff in NHS Western Isles. I was pleased to hear from a young diabetic patient talk about the positive impact the roll-out of the Freestyle Libre monitor system across the Board area has had for her and others living with a diabetic condition. I also heard that when patients do raise concerns about care received, the service needs to effectively respond to feedback and complaints, learning lessons and implementing change, where necessary. There was also a suggestion from a number of attendees that the Health Board needs to consider its patient travel policy. The general feeling was that it does not take into account a patient's condition, individual family circumstances, the distances and time needed to travel to appointments which are sometimes on the mainland and require overnight stays, and that the policy should be clearly available on the Board's web-site. I also heard how NHS services should be set up to recognise and provide mental health support to patients who suffer from long term health conditions; the need for timely access to appointments and how the use of video conferencing could improve this. These areas were supported by a number of attendees and were raised with the Board leadership in the private session.



Diabetes Care and Public Health

6. I was very pleased to visit the diabetes centre in the hospital and to hear from staff about the work being done locally to improve the lives of patients living with diabetes and the significant positive improvements brought about by the use of Continuous Glucose Monitoring Insulin Pump/digital technology, such as I heard about during the patients meeting. I was also very interested to see the video of two patients and hear their stories about how the technology has had such a positive impact, not just for the patients but also their families.

7. I also heard about the local work underway to improve public health and some of the initiatives to encourage health promotion locally, such as Move More Western Isles. This health improvement work is closely linked with diabetes care. I want to put on record my thanks to the local staff for their time in showing me around and for discussing the important work they do for the benefit of patients.

Annual Review – Private Session

Health Improvement and Improving Inequalities

8. NHS Western Isles is to be commended for exceeding its target in delivering alcohol brief interventions. A brief intervention is a short motivational interview, in which the costs of drinking and benefits of cutting down are discussed, along with information about health risks. These have been proven to be effective in reducing alcohol consumption in harmful and hazardous drinkers. The target for NHS Western Isles in 2017/18 was 317 interventions with 391 being achieved. The Board is also to be commended for its performance against the drug and alcohol treatment waiting times standard in 2017/18, achieving 95.2% against the 90% standard. The Board, however, has not performed so well in respect of the challenging 2017/18 smoking cessation standard, recording 37 successful post-3 month quits in the most deprived areas, falling short of the standard of 47 and I would like to see the Board improve performance going forward.

9. In respect of the Board's performance in improving waiting times for access to psychological therapies and child and adolescent mental health services (CAMHS), I am pleased to note that the Board has performed well against the 90% CAMHS standard, however meeting the 90% standard for psychological therapies has been more challenging for the Board, largely due to an increase in demand and capacity has not increased to meet local demand. There is work underway to address this, including a re-design of mental health services led by the Integrated Joint Board, and there has been additional Government investment of £551,993 from 2018/19 to 2021/22 for Western Isles to recruit additional staff in key settings.

Patient Safety and Infection Control

10. Rigorous clinical governance and robust risk management are fundamental activities for any NHS Board, whilst the quality of care and patient safety are of paramount concern. I know there has been a lot of time and effort invested locally in effectively tackling infection control; this is reflected in the Board delivering an 89% reduction in cases of C Difficile infection in those aged 65 and over since 2007 and a 100% reduction in cases of MRSA over the same period.

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11. The Health Environment Inspectorate carried out an unannounced inspection at Western Isles Hospital in October 2017. This resulted in two requirements and one recommendation; an improvement plan was developed by the Board to address the requirements and the recommendation.

Improving Access: Waiting Times Performance

12. I want to take the opportunity to congratulate the Board and your staff for consistently achieving performance at or above 95% for the 4-hour unscheduled care target, with performance usually around 98% - 100%. Performance for the year to October was 98.5%.

13. The Board is to be commended for its performance against the 31-day cancer access standard, with a performance of 100% for the previous five quarters, and while performance against the 62-day standard was 100% for the last quarter, performance has been below the 95% standard in the four previous quarters. It is recognised, however, that the small number of patients treated means that if only one patient breaches the standard then this is likely to result in an overall performance below the 95% standard.

14. NHS Western Isles, along with other Boards, have continued to experience challenges in delivering the suite of elective access standards during 2017/18 particularly within diagnostics. It should be noted, however, that the Board have been performing well against the 12 week Treatment Time Guarantee with no patients currently waiting over 12 weeks to be seen within the Western Isles. It is recognised that the Board's performance in various specialities is linked to the performance of the mainland Boards who treat patients on behalf of NHS Western Isles, being unable to provide the capacity needed. I would expect the Board to continue to work with mainland Boards on potential breaches.

Health and Social Care Integration

15. There are five localities: Barra and Vatersay; the Uists and Benbecula; Harris; Rural Lewis; and Stornoway and Bradbay. Key activities include progressing with mental health re-design, with a new model of care being developed; the development of a £25 million capital development project which will transform residential care in Lewis; and the development of an integrated model of care in Barra in support of a potential £18 million integrated health and social care hub.

16. In relation to the replacement of St Brendan's Hospital in Barra, you raised the ongoing work the Council and the Integrated Joint Board, with support from the Scottish Futures Trust for delivery of the hospital project along with replacing Castlebay Community School and other Comhairle services in Barra. While the Scottish Government has been clear that we are supportive of NHS Western Isles exploring this opportunity, we do not want this to create any delay in the timeline for the submission of the full business case for the hospital.

17. In terms of delayed discharge, there have been significant reductions in the last two years, but the discharge from Western Isles Hospital of several long-stay patients who did not need hospital care into the community, has limited place availability in care homes.



Finance

18. It is vital that NHS Boards achieve both financial stability and best value for the considerable taxpayer investment made in the NHS. I am therefore pleased to note that NHS Western Isles met its financial targets for 2017/18. The need for strong financial performance is essential as the demands on health and care services continues to grow. Nonetheless, you confirmed that the Board continues to actively monitor the achievement of all local efficiency programmes and, whilst the position is challenging, NHS Western Isles remains fully committed to meeting its financial responsibilities in 2018/19 and beyond.

Annual Review: Public Session

19. I am looking forward to returning in the coming weeks to hold the Board's public session on Barra. This will include a presentation from the Chair on performance during 2017/18 as well as a Q&A session. A detailed account of the specific progress the Board has made in a number of other areas is available to members of the public in the self-assessment paper which the Board prepared for the Annual Review. This should be available on the NHS Western Isles website.

Conclusion

20. I want to record my thanks to the Board and local staff for their generally strong performance in 2017/18. NHS Western Isles is making progress in taking forward a challenging agenda on a number of fronts. I have been assured that the Board understands the need to improve performance in some key areas, whilst maintaining the quality of frontline services and demonstrating best value for taxpayers' investment. We will continue to keep progress under close review and I have included a list of the main performance action points in the attached annex.

Best wishes


Joe FitzPatrick



NHS WESTERN ISLES ANNUAL REVIEW 2017/18

MAIN ACTION POINTS

The Board must:

- **Continue to deliver on its key responsibilities in terms of clinical governance, risk management, quality of care and patient safety**
- **Keep the Health & Social Care Directorates informed on progress towards achieving all access targets in line with agreed improvement trajectories, including the 62-day cancer target and mental health access targets**
- **Continue to review, update and maintain robust arrangements for controlling Healthcare Associated Infection**
- **Continue to achieve financial management targets**
- **Continue to work with planning partners on the critical health and social integration agenda**
- **Keep the Health & Social Care Directorates informed of progress with its significant local health improvement activity**
- **Keep the Health & Social Care Directorates informed of progress with local service redesign plans, in line with the national policy**

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