

NHS Western Isles Board Meeting



Minutes of Meeting 28 April 2021 at 10.00am Via Microsoft Teams

Members Present:

Debbie Bozkurt	Director of Finance and Procurement	Gillian McCannon	Interim Chair (Meeting Chair)
Chrisanne Campbell	Interim Nurse Director	Jocelyn McConnachie	Non-Executive Director
Abdul Elghedafi	Non-Executive Director	Dana Murray	Employee Director / Non-Executive Director
Tim Ingram	Non-Executive Director	Dave Rigby	Chair of ACF / Non-Executive Director
Gordon Jamieson	Chief Executive	Uisdean Robertson	CnES Representative / Non-Executive Director
Avril Keen	Director of Human Resources and Workforce Development	Maggie Watts	Director of Public Health / Caldicott Guardian
Francis McAuley	Medical Director	Sheena Wright	Whistleblowing Champion & Non-Executive Director

In Attendance:

Nick Fayers	Chief Officer, Integration Joint Board
Maggie Jamieson	Communications & Claims Manager
Michelle McPhail	Business Manager

1. WELCOME

The Chair, welcomed everyone to the meeting, advising them of the meeting etiquette. A special welcome was given to Abdul Elghedafi, Tim Ingram and Jocelyn McConnachie who were appointed as Non-Executive Directors earlier this month.

2. APOLOGIES AND ACKNOWLEDGEMENTS

Georgina Marczak Non-Executive Director

3. INTRODUCTION

3.1 Chair's Report

The Chair advised that there was no update to her report. However she indicated that a significant number of staff continue to participate in the Lateral Flow Device testing and work continues to increase this further.

Decision: The Board formally noted the verbal update.

Action: No action required.

4. DECLARATION OF INTEREST

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

5. MINUTES

5.1 Minute of 31.03.21 - DA

The Minute of the meeting of the Board held on 31 March 2021 was approved as a correct record of the discussion, subject to the following amendment:

- Page 3 – item 5.3 Action Points – third bullet point – 29.01.20 Safe Staffing update – This item was noted in 2020 but the development was put on hold by the Scottish Government due to the Pandemic. The paragraph should be removed and replaced with “Mrs. Campbell indicated that a real time workforce tool has been developed for wards purely for use during the pandemic. The tool allows for enhanced practices such as doffing and donning of PPE and additional enhanced cleaning.”
- Page 4 – item 6.1 Financial Performance Monitoring Month 11 – paragraph 10 add at the end of the paragraph the following sentence ~ “The Chair was reassured by Dr. Rigby that patients who have been triaged will have the ability, where appropriate, to have face-to-face consultations.
- Page 5 – item 6.2 Board Financial Budget 21/22 – 2nd paragraph the financial sums should read “£95.460m”, “£4.410m” and “£3.420m”.
- Page 7 – item 7.2 Section 22 Approved Medical Practitioner – 1st paragraph, 2nd line replace the word “roll” with “role”.

Decision: The Board formally approved the Minute of the meeting of 31 March 2021.

Action: No action required.

5.2 Matters arising from previous Minutes

- Item 10.3.1 – Area Clinical Forum Minute of 24.11.20 ~ The Chair enquired to Dr. Rigby if there was any development on the collation of GP consultation data. Dr. Rigby advised that the National Data Collection would be complete towards the end of April 2021 and with the screening and cleansing the data may be available by the end of May. The information should be available for presentation to the June Board.

5.3 Action Points

Members reviewed the Action Points, however no updates were reported, and the status remains the same.

Decision: The Board formally noted the updates.

Action: The action points will be updated, where appropriate, ahead of the next meeting.

6. FINANCIAL PERFORMANCE

6.1 Financial Performance Monitoring

Issue: *The Board was asked to note the verbal update presented by Ms. Debbie Bozkurt, Director of Finance and Procurement.*

Discussion: Ms. Bozkurt explained she is in the middle of closing the accounts and draft figures will be submitted to the Scottish Government. Currently the Board is reporting a £100k underspend before taking into consideration any late Month 13 invoices and expenditures.

From the 10 May 2021, external Auditors will require our draft Annual Accounts for review, including the long narrative annual report document.

Ms. Bozkurt confirmed that all Covid-19 allocation has been utilised with possible £30k overspend which the Board can absorb.

The Annual Accounts process for all NHS Boards has been extended by the Scottish Government however NHS Western Isles will continue to meet the existing timeline.

The Chair thanked Ms. Bozkurt for her verbal report.

Decision: The Board formally noted the verbal report..

Action: No actions required.

7. CORPORATE GOVERNANCE

7.1 Covid 19 update

Issue: *The Board was asked to note the verbal update provided by Mr. Gordon Jamieson, Chief Executive.*

Discussion: Mr. Jamieson, and colleagues, advised Members of the current position of Covid:

- No new positive cases.
- Vaccination programme continues with 3486 people remaining to obtain their first vaccine.
- Awaiting further detail on the covid booster which will be required later in the year, as well as completing the normal flu vaccination programme.
- As of 26.04.21, Scotland is at level 3 and the island is open to travellers, which may possibly increase the number of positive cases.
- Travellers upon booking their flight or ferry are directed to obtain Lateral Flow Device test kits (LFD) and take these 3 days before travel and again on the day of travel. If a positive result is obtained they should cancel their travel and obtain a fuller PCR test. The kits arrive by mail within 24 hours.
- Employer based testing is being reviewed for larger companies and they're obtaining or purchasing Lateral Flow Device tests for their employees. This is the Goathill Construction Company and Harris Tweed.
- NHS Board employees continue to take twice weekly LFP tests, this is a voluntary testing process but always advising that the results need to be posted onto the portal the same day.

The Chair thanked Mr. Jamieson for his verbal presentation and the discussion with colleagues.

Mr. Jamieson wished to acknowledge the work staff have done to ensure that clinics run smoothly and efficiently. This includes staff from all departments who continue to support the programme. The Chair expressed her and the Boards thanks.

Decision: **The Board formally noted the verbal update.**

Action: **No actions required.**

8. STAFF GOVERNANCE

8.1 Workforce Report

8.1.1 – Appendix A – HR Workforce Report

Issue: *The Board was asked to note as information the report presented by Mrs. Avril Keen, Director of Human Resources and Workforce Development.*

Discussion: Mrs. Keen provided Members with an overview of the data presented noting the level of absences during the period of March 2021.

The following points were highlighted:

- Headcount is 1014 (position at Feb'21 was 1016) which equates to 829.5 whole time equivalents (Feb'21 noted 837.3). The level of turnover is reported as 13.02% compared with 12.28% in Feb'21.
- Sickness absence, split into job families, advises that the Board performance is standing at 3.85% compared with 3.92% in Feb'21.

Mr. Ingram enquired as to the sickness level of “Other Therapeutic” reported as 9.42%. Mrs. Keen advised that the departments equate to small numbers and therefore any sickness results in high percentages.

Mr. Elghedafi indicated that he would like to see more specific detailed information with greater breakdown e.g. more detail of fixed term contracts and how they impact on the overall figures as well as information on those staff expecting or indicating their retirement by age, date, department and location within the islands.

The Chair welcomed this suggestion and the need to have a greater understanding of the impact of the information provided with projections as to when these issues may impact on service delivery. It was also noted that in historical reports presented to the Board there was greater level of detail noting, for example, long and short sickness absences, age demographics and trajectory. The Chair also commented upon the need to have greater level of narrative giving more detail and understanding behind the basic data.

Mr. Jamieson commented upon the Covid 19 special leave, seeking more information and narrative explaining about what's in this category without breaking data protection rules.

Mrs. Keen indicated that the points raised have merit and indicated that she is working on workforce planning reports, which could take the comments on board.

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

Action: **As noted above, greater detail to be presented at future Board meetings.** **Avril Keen**

9. PERFORMANCE

9.1 Corporate Risk Register

9.1.1 Appendix A – CRR Detailed Report

9.1.2 – Appendix B - dashboard

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

Discussion: Mrs. Campbell drew colleagues' attention to the report advising that the majority of the risks have been updated but the actual scoring of the risks have not changed from previous reports.

The Chair opened the floor to Members.

Mr. Ingram commented upon the number of very high risk levels (those marked in Red) and the lack of trend information and narrative advising of the actions taken and expectation of the likely outcome.

Mrs. Campbell commented upon risk 004 – waiting time and capacity, currently noted as very high risk level. It was noted that within the outpatient clinic numbers are restricted due to increased cleaning and social distancing. To overcome this additional clinics may need to be held. Mrs. Campbell clarified that the Treatment Time Guarantee is reviewed by clinical priority rather than the length of time someone is on a waiting list.

Dr. Watts expanded upon risk 002 pertaining to civil contingencies advising that these will always be high level risk and it's more about the Board's risk appetite and the level of risk the Board is willing to accept.

Mr. Jamieson explained that the Board has noted its risk appetite however given the learning from the pandemic and the changes made to address this, the Board should consider reviewing this at a future Board Development, thinking about the headings we are currently using and the element of likely "v" severity rather than frequency "v" impact. The Chair agreed that to hold a development session to take this forward.

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

Action: **Review the CRR and the Board level of risk appetite in a future Board Development session.**

9.2 Healthcare Associated Infection Report Feb – Mar’21

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

Discussion: Mrs. Campbell advised colleagues on the following:

- 1 SAB – community infection
- 1 CDI – healthcare associated
- Surgical Site Infections – Zero
- Hand Hygiene – Feb ~ 100% & Mar ~ 89.6%, this reduced level of compliance is attributed to the new incoming medical staffing.
- Cleaning Compliance – Feb ~ 97.3% & Mar ~ 97.05%
- Estate Compliance – Feb ~ 99.3% & Mar ~ 98.4%

The Chair thanked Mrs. Campbell for the report, raising concern at the level of hand hygiene compliance in March. Dr. McAuley indicated that discussions with the new medical staffing has taken place, raising awareness of the need to comply with reducing infections where possible, including the need to wash their hands. The Infections, Prevention and Control Team has his full support to challenge any member of the medical staffing, raising awareness or concern.

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

Action: **No actions required.**

9.3 Performance Monitoring Report Q3

9.3.1 Appendix A – detailed report

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

Discussion: Mrs. Campbell presented the report to Members advising that a number of targets were off trajectory due to the pandemic, specifically noting that the 12 week Treatment Time Guarantee for inpatients was not met, however urgent and emergency surgery were undertaken.

The Chair commented upon the time period of the report being presented, October to December 2020, which does not provide the most up-to-date information. As previously noted, the Chair iterated the benefit in having additional narrative to support the data and ensure clarity in the interpretation of the position.

Mrs. Campbell explained the need to have cleansed data for Board Members, which does entail a delay in reporting.

The Chair asked if Members could be presented with the data dashboard. Mrs. Campbell advised that unfortunately not all the standards have single data source reporting on the dashboard and are more complex and have multiple strands to each target.

The Chair thanked Mrs. Campbell for the report.

Decision: The Board formally noted the report for assurance.

Action: No actions required.

10. BOARD SUB COMMITTEE MINUTES

10.1 Remuneration Committee

The Chair gave Members a verbal update, advising that the Committee have met three time this fiscal year. The Chair delivered assurance that the Committee have met to discharge its duties and during this time they have revised, and agreed, the Terms of Reference as well as carrying out the appraisal of the Executive Directors who are applicable to review by the Committee.

Further updates on the work of the Committee will be reported at future Board meetings.

Decision: The Board formally noted the verbal update.

Action: No actions required.

11. ANY OTHER COMPETENT BUSINESS

No issues were raised.

12. EVALUATION

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

13. Invoking of Standing Order 5.22 – Resolution to take items in closed session.

The Chair advised that the item would be presented following the public meeting.

14. DATE AND TIME OF NEXT MEETING

Scheduled Board Meeting

Date: 26/05/21

Time: AM

Location: TEAMS

The Chair called the meeting to a close at 12:30pm, thanking everyone for their contribution.

END