

NHS Western Isles Board Meeting



Minutes of Meeting 25 August 2021 at 11.00am Via Microsoft Teams

Members Present:

Debbie Bozkurt	Director of Finance and Procurement	Gillian McCannon	Board Chair (Meeting Chair)
Abdul Elghedafi	Non-Executive Director	Jocelyn McConnachie	Non-Executive Director
Tim Ingram	Non-Executive Director	Dana Murray	Employee Director / Non-Executive Director
Gordon Jamieson	Chief Executive	Dave Rigby	Chair of ACF / Non-Executive Director
Avril Keen	Director of Human Resources and Workforce Development	Uisdean Robertson	CnES Representative / Non-Executive Director
Fiona C. MacKenzie	Nurse / AHP Director and Chief Operating Officer	Sheena Wright	Whistleblowing Champion & Non-Executive Director
Francis McAuley	Medical Director		

In Attendance:

Nick Fayers	Chief Officer, Integration Joint Board
Lise Hertel	Ass. Medical Director – Primary Care Lead
Maggie Jamieson	Head of Communications, Claims and Patient Information
Michelle McPhail	Corporate Business Manager

1. WELCOME

The Chair, welcomed everyone to the meeting, advising them of the meeting etiquette.

2. APOLOGIES AND ACKNOWLEDGEMENTS

No apologies noted.

3. INTRODUCTION

3.1 Chair's Report

The Chair updated members a discussion point noted within the National Chairs meeting, advising that all Boards are asked to liaise with NHS National Education for Scotland on holding awareness sessions on "Active Governance". The Government have recently initiated their consultation on National Care Services in Scotland, with a closing date of the 18 October.

Decision: The Board formally noted the verbal update.

Action: No action required.

4. DECLARATION OF INTEREST

Members did not advise of any conflict with the agenda items, in relation to them making a declaration.

5. MINUTES

5.1 Minute of 23.06.21 - DA

Board Members approved the Minutes of the meeting held on 23 June 2021, as a correct record of the discussion.

Decision: The Board formally approved the Minute of the meeting of 23 June 2021.

Action: No action required.

5.2 Matters arising from previous Minutes

No issues were raised.

5.3 Action Points

Members reviewed the Action Points, noting the following updates and actions:

29.05.19 – 11.2 Performance Report ~ Dr. Watts reflected on the original request and the changes in new Board Members. Members agreed to expand upon this at the September development day and therefore the action is complete and remove from the Action Points. **REMOVE**

18.12.19 - 7.2 Community Cohesion Strategy ~ Dr. Watts agreed to recirculate the actual strategy. Due to Covid, the Outer Hebrides Community Planning Partnership have not fully remobilised and therefore the Action Plan from the Strategy needs to be explored. Members approved to remove this item from the Action Points and Dr. Watts will advise when the relevant documents are available for noting by the Board. **REMOVE**

13.03.21 – 10.3 Area Clinical Forum ~ Dr. Rigby advised that the national collective data has yet to be completed and therefore the report will be circulated as soon as available. Members approved the removal of this item from the Action Points. **REMOVE**

31.03.21 – 11.1 Independent Review Adult Social Care in Scotland ~ Mr. Jamieson reflected that the Scottish Government are currently undertaking their consultation process to review the NHS Care, taking cognisance from the Derek Feeley report on Adult Social Care in Scotland. The Board has taken the decision to hold a collective seminar on individual's views of the consultation to provide a collective Board response.

Board Members agreed to remove this item from the Action Points, noting that the item will be presented to the Board in due course. **REMOVE**

23.06.21- 6.3 MRI Scanner ~ Ms. Bozkurt advised that the Scottish Government capital group are reviewing the business case and initial reviews are favourable however, the case is still moving through the Government process. It was agreed that the action would be removed from the Action Points, as any update on the capital agreement will be included in the Financial Monitoring reports. **REMOVE**

23.06.21 – 7.1 Remobilisation Recovery Plan ~ Ms. MacKenzie advised that the RMP4 development is underway and, in line with the Scottish Government templates and toolkits, the Board revised submission will include winter planning as well as Mental Health. **UPDATE**

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 Report Month 3

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

Discussion: Ms. Bozkurt advised Members that as at June 2021 the Board is projecting an in-year overspend of £410k; however at the year-end it is showing a break even position assuming that the Board receives all the covid funding. The Board has received to date £266k for Test and Protect, £232k for Covid and extended flu vaccination and a further £436k for Q1 covid funding.

Ms. Bozkurt highlighted the main cost pressure:

- Out of Hours (OOH) service identifying £200k overspend due to supporting St. Brendan's Hospital as well as GP OOH service.
- An emerging position within Acute Nursing is due to known pressures within renal service where previously 8 patients were utilising the service, however this has increased to 14 and therefore more staff need to be added to the renal department to meet the demand. It was also noted that Uist & Barra Hospital have a high level of sickness and again a need to bring in agency staff to continue to deliver services.

Members discussed the Boards identified savings, equating to £4.410m of which £0.990m was noted as unidentified. Ms. Bozkurt indicated that by the time of reporting the Month 5 position she hopes to have reduced the unidentified level further, although potentially will not be recurring savings.

The Capital Resource Limit (CRL) of £1.233m was the allocation for 2021/2022 with additional allocations being made in July of £400k as additional capital in replacing the scope service in Uist & Barra Hospital.

At the beginning of the fiscal year the capital programme was overcommitted by £400k; although still a significant amount, the Board was able to address some key capital risks and reduce the ongoing pressures on capital requirement. In 2020/2021, in order to balance the capital fiscal position £410k of projects were placed on the deferred list and should additional resources in year become available they would been taken forward, however now of the projects on the deferred list are classed as critical level of risk in terms of patient safety or continuation of services.

Ms. Bozkurt indicated that the Board has made a number of capital bids to the Scottish Government Capital Investment Group seeking additional resources to address:

1. Boiler replacement in the Western Isles Hospital
2. MRI Scanner for the Western Isles Hospital
3. Dental redesign for Uist & Barra Hospital

The Chair thanked Ms. Bozkurt for the very informative presentation and the level of assurance as to the known position as at June 2021.

Mrs. Keen arrived at the meeting – 11:52

In reflecting on the report, the Chair enquired if workforce data would be forthcoming.

Ms. Bozkurt advised that the workforce issues would be produced by Mrs. Keen and included within the HR workforce report. Ms. Bozkurt indicated that she is producing a detailed fiscal and workforce report for the IJB, as at Month 3. In reviewing a number of different factors, from school leavers to credit unions and those on the unemployment register, all this information has been given to the Chief Officer, Nick Fayers, to address the need for staff. Mr. Fayers indicated that a detailed report is scheduled to go to the Integrated Corporate Management Team addressing the challenges and potential ways forward.

The Chair enquired as to the issues of reduced activity in mainland hospitals and level of payment being made to mainland NHS Board in line with the Service Level Agreement.

Ms. Bozkurt indicated that nationally an agreement has been reached where NHS Board will continue to pay the expected SLA payments in 2020/21 and within 21/22. However within 2022/23 it is recognised that the payment will be reduced taking into cognisance of the reduced

activity levels over the previous 2 years. Dr. McAuley indicated that further work is ongoing to reset the activity levels within the SLAs for NHS Greater Glasgow & Clyde as well as with NHS Highland, in line with recognised patient pathways.

The Chair thanked everyone for their input into the discussion.

Decision: The Board formally noted the report.

Action: No actions required.

7. CORPORATE GOVERNANCE

7.1 Freedom of Information Policy

Issue: *The Board was asked to note as assurance the report presented by Dr. Maggie Watts, Director of Public Health / Caldicott Guardian.*

Discussion: The revised Policy was presented to Members as assurance of process by Dr. Watts. Board Members were advised of the obligation placed on the Board to undertake a review of the Policy every 3 years, assessing whether the process needs to change in light of any local or national learning.

The Chair noted the Policy and noted that Board Members were content with the review.

Decision: The Board formally noted the report.

Action: No actions required.

7.2 Access to Health Records

Issue: *The Board was asked to note as assurance the report presented by Dr. Maggie Watts, Director of Public Health / Caldicott Guardian.*

Discussion: Dr. Watts presented the updated Access to Health Records Policy in line with GDPR, General Data Protection Regulation. The Policy has been reviewed by the Information Governance Steering Group and approved by the Corporate Management Team.

Members were content to note for assurance the revised updated Policy.

Decision: The Board formally noted the Policy

Action: No actions required.

8. STAFF GOVERNANCE

8.1 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 as at May 2021, providing Members with assurance.

The following points were highlighted:

- Headcount is 1044 that equates to 831 whole time equivalents. Noting a turnover of 7.93%.
- Sickness absence, groups have been divided up into sub-department with monthly report noted as 4.82% and the calendar year reporting 4.19%.
- The number of staff on long term sick leave has increased equating to 73.83% of the total number of hours, 6624.18, being long term.
- The reasons for absence was report with 18.88% being absence due to musculoskeletal problems and 25.88% due to anxiety/stress/depression.

As Members deliberated the report, Mr. Elghedafi enquired as to what support is being provided to staff who requiring Carers leave, reporting as 40.87% of special leave being for Carers.

Mrs. Keen advised that the 41% is of the total special leave reporting at 0.27%, so it's a very small number of people. All staff have the ability to take paid carers leave, as they have entitlement to paid emergency leave and parental leave all being agreed nationally and noted within Terms & Conditions.

Mr. Elghedafi was reassured that staff are protected and well supported.

The Chair acknowledged that staff have a level of anxiety, as reflected in the reason for sickness, however the reason noted as Unknown causes / not specified is high at 10.83%, and requested clarification.

Mrs. Keen indicated that the classification is for a level of confidentiality when a member of staff does not wish to divulge their reason for being off. It's not something we want to encourage as with any reason for sickness the Board would want to support that individual in their recovery.

Mrs. Keen explained to Members about the interim Workforce Plan which has been presented to the Scottish Government, and this will be presented to Members in due course. The feedback will be taking into the revision of the Plan before the final submission is due in March 2022.

Mr. Fayers specified that Ms. MacKenzie, Dr. McAuley and he are looking at a peripatetic workforce and how this may work for an island community.

The Chair thanked Mrs. Keen for the report.

Decision: The Board formally noted the report.

Action: No actions required.

9. PUBLIC HEALTH

9.1 Expansion of Community Testing

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

Discussion: Dr. Watts advised, that the Board had placed a bid with Scottish Government to fund the extended community testing for Covid-19 infection, in response to the Governments invitation to submit bids. The Board has received £626,506 until the end of 21/22.

The allocation will be used to reinforce the expansion of access, particularly to those groups that are more difficult to reach out to and encourage asymptomatic testing. The funding will support:

- the identification of 3 hubs, Stornoway, Uist & Barra and Castlebay managing testing 7 days
- purchase of mobile testing units.
- increase in laboratory testing and staffing

The Chair acknowledged the work and commitment staff have given, including the communication team for their support in advising staff of FACTS as well as the general reinforcement of the information that goes out to both staff and the wider public.

Decision: The Board noted the report.

Action: No actions required.

9.2 Annual Influenza and Covid-19 Booster Vaccination 2021

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

Discussion: Dr. Watts informed Members on the way the Board will deliver on the annual influenza vaccination programme as well as the Covid-19 booster vaccination. This year's vaccination programme has been extended by the Scottish Government to include, as an example:

Influenza

- 50 years and above
- Those from 6 months to 49 years with an underlying health condition which are at risk
- Pregnant women
- Children 2-5 years
- Health and social care staff
- Unpaid and young carers
- Teachers, nursery teachers and support staff in close contact with pupils

Covid-19 booster

- Stage 1
 - 16 years and over who are immunosuppressed
 - Live in residential care homes for older adults
 - Adults 70 years and above
 - Frontline health and social care workers
- Stage 2
 - Adults 50 years and above
 - 16 years to 49 years what are "At Risk" category
 - Adult household contacts of immunosuppressed individuals

Dr. Watts advised that the Influenza programme should be completed by the 06 December. The timeframe for the covid booster vaccination has still to be confirmed by the Joint Committee on Vaccinations and Immunisation, JCVI, however individuals need to wait 6 months from their 2nd vaccination before they can be given the booster.

The Chair acknowledged the amount of work in progressing and supporting the vaccination programme by staff.

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

Action: **No actions required.**

10. PERFORMANCE

10.1 Corporate Risk Register

10.1.1 Appendix A – CRR Detailed Report

10.1.2 Appendix B - dashboard

Issue: *The Board was asked to note for assurance the report presented by Ms. Fiona MacKenzie, Nurse / AHP Director and Chief Operating Officer.*

Discussion: Ms. MacKenzie drew colleagues' attention to the report advising of four updates to risks relating to:

- Risk 006 – No formal arrangements for professional direction or clinical consultant report for laboratory services. Dr. McAuley expanded on the information provided, advising that the service is fragility due to a national position on the lack of clinical scientists, however the laboratory within the Western Isles Hospital supported a 24/7 service. The Blood Transfusion service is a hub & spoke with the Scottish National Blood Transfusion Service (SnBTS) being based at Gartnavel Hospital.

Dr. McAuley indicated that as discussions within NHS Highland have been unsuccessful there is a need for the Board to update its laboratory systems in line with the new national Laboratory Information Management System (LiMS) system workstream that will bring the organisation in line with many other Board in Scotland, but not with NHS Highland.

- Risk 002A – Civil Contingencies Business Continuity
- Risk 002B – Civil Contingencies Major Incident Responses
- Risk 039 – Unscheduled Care of Children and Neonates

The Chair thanked colleagues for the update, however it was noted that all risks need to be updated timely and any adjustment to the existing weighting needs to be reported clearly with supportive evidence as to the rationale for the change and more outcome focussed.

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

Action: **No actions required.**

10.2 Freedom of Information / Subject Access Request Report

Issue: *The Board was asked to note as assurance the reports presented by Dr. Maggie Watts, Director of Public Health / Caldicott Guardian.*

Discussion: Dr. Watts drew colleagues' attention to the summary report on the activity as at 11 August 2021. It was noted that the Subject Access Requests (SAR) have increased three fold to date in 2021 compared with the full year of 2020. This has been due to the pandemic and people asking for copies of their records including that of their covid vaccination status due the Government app not being accessible.

To date the cumulative number of FOI requests received is noted as 222 FOI. The majority of responses are made within the 20 day timeframe, however given that the staff who support this process are also part of the Public Health Team, the impact of Covid can prove challenging to meet the deadline timeframe.

The Chair thanked Dr. Watts for the information

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

Action: **No actions required.**

11. BOARD SUB COMMITTEE MINUTES

11.1 Staff Governance Committee Minute 13.05.21

The Chair presented the Minute from 13 May 2021, for information, in the absence of Cllr. Robertson.

Members did not raise any questions.

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

Action: **No actions required.**

12. ANY OTHER COMPETENT BUSINESS

No issues were raised.

13. 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?	✓		
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?	✓		
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	✓ ✓ ✓		

14. DATE AND TIME OF NEXT MEETING

Scheduled Board Meeting

Date: 27.10.21

Time: AM

Location: TEAMS

The Chair called the meeting to a close at 1:00pm thanking everyone for their contribution.

END