



Minister for Public Health, Women's Health and Sport
Maree Todd MSP

Board Meeting 30.11.22
Agenda Item: 8.1
Purpose: For Awareness

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Gillian McCannon - Chair
NHS Western Isles

Via email: wi.chair@nhs.scot

Our Reference: NHS Western Isles Review – Key Points

10 June 2022

Dear Gillian,

NHS WESTERN ISLES ANNUAL REVIEW: 19 MAY 2022

1. Thank you for attending NHS Western Isles Annual Review with Gordon Jamieson, the Board Chief Executive, on 19 May via video conference. I am writing to summarise the key discussion points.
2. In the same way as last year, in-person Reviews have not proved possible as a result of the Covid-19 pandemic and associated pressures. Nonetheless, Annual Reviews remain an important part of the accountability process for the NHS and, as such, we have arranged for Ministers to hold appropriate sessions with the Chair and Chief Executive of each Board via video conference. I was supported in the meeting by John Burns, NHS Scotland's Chief Operating Officer.
3. The agenda for this year's round of Reviews has been split into two sections to cover: a look back over 2020/21, including the initial response to the pandemic; and a look forward, in line with the current Board resilience and mobilisation plans.

Look back: including the initial response to the pandemic

4. You provided a helpful overview of the Board's initial response to the pandemic from late February 2020. This required an unparalleled, immediate and radical restructure of both services and ways of working across the NHS in Scotland, including in NHS Western Isles.

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The Board's response and recovery planning process involved the rapid reconfiguration of local health and care services across acute, primary and community settings, including a significant increase in the use of technology, such as *Near Me*, to deliver care outside hospitals or clinic settings, alongside effective, whole system working.

5. Staff at every level have consistently performed above and beyond the call of duty to support both local services and the national effort: for instance, with the unprecedented *Test & Protect* and vaccination programmes, as well as the crucial support and clinical oversight provided to local care homes. An example of this had been the medical physics staff who had worked innovatively and tirelessly in the initial stages of the pandemic to bolster vital critical care capacity by converting anaesthetic machines to ventilators; alongside other largely unsung heroes, such as those who had been instrumental in establishing the new community pathways; and ensuring that key services, such as district nursing and health visiting, had been maintained throughout. Indeed, it is through the consistent dedication and commitment of local health and social care staff, under largely unrelenting pressures, that we have ensured that the NHS has not been overwhelmed at any point during the pandemic, to date. As such, I would want to formally record our deep appreciation to all local health and social care staff for their outstanding work, and give them an assurance that we will continue to do all we can to support them.

6. In terms of the impact of Covid-19 and associated activity, during the financial year 2020/21, NHS Western Isles had: delivered 20,674 Covid-19 vaccinations; carried out 9,245 telephone and video consultations; 33,986 outpatient attendances; 1,291 emergency and elective procedures; 4,801 attendances at the Emergency Department; and 6,612 urgent dental appointments. You confirmed that this activity, and the remarkable service adaptations undertaken at pace, such as the increased use of technological innovations, had been delivered via a highly effective local, whole system command structure: ensuring appropriate oversight and governance alongside delivery.

7. The need to establish capacity to meet the Covid-19 demands placed on health and social care required significant changes in the level of planned care available during 2020/21. Emergency surgical care provision and urgent suspicion of cancer care and treatment was provided throughout the first wave of the pandemic. Staff sickness and isolation compounded a challenge the Board have faced for a number of years with medical/nursing vacancies across the specialties. There were also challenges to service delivery with release of visiting medics from mainland Boards to undertake clinical sessions. NHS *Near Me* had been used to support outpatient activity across specialties.

8. NHS Western Isles consistently performed well against the 4-hour emergency access standard. All Health Boards had seen unscheduled care pressures fall in the first phase of the pandemic, with the restrictions having a significant impact on attendances. As restrictions were eased following the initial lockdown, attendances had risen; and Boards faced new pressures in A&E Departments and receiving wards due to the higher acuity of some presentations, alongside the maintenance of appropriate infection control measures and streaming of patients. NHS Western Isles continues to perform well against the 4-hour standard with performance regularly at or above 95%.

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9. With cancer service delivery remaining a priority, the Board's performance against the 31-Day standard was consistently strong whilst performance against the more challenging 62-Day standard had been largely maintained. It is recognised that, given the overall small number of patients, just one patient breaching the waiting times standard can significantly impact the Board's overall performance.

10. Mental health services in NHS Western Isles continued to be provided throughout the pandemic, prioritised on the basis of need and using remote methods of delivery where possible. NHS Western Isles has consistently met, and exceeded, the CAMHS standard. Performance against the Physiological Therapies (PT) exceeded the standard in the first half of 2021; however, a gap in Consultant Psychology cover meant no patients started PT treatment between July and November. A newly appointed Consultant Psychologist has been working through the long waits, and we were assured that performance is likely to improve over the next reporting quarter.

11. In terms of financial management, NHS Western Isles delivered a balanced position in 2020/21 and 2021/22, following the receipt of funding from the Government to meet the additional pressures arising from the Covid response.

12. All Boards will need to learn from the pandemic experience and adapt; ensuring that the remarkable innovation and new ways of working demonstrated underpin the local strategy for a sustainable future. You pointed out that NHS Western Isles has continued to roll out *Near Me* across local specialities, thereby reducing unnecessary patient travel to mainland Boards.

13. We also asked the local Area Clinical Forum and Area Partnership Forum to provide brief updates ahead of the Review and were pleased to note the ongoing positive engagement and contribution of both; the Board will need to harness this and ensure full staff support and engagement for the longer term recovery and renewal phase.

14. To summarise, we are most grateful for the outstanding efforts of local staff to adapt and maintain key services during 2020/21 and 2021/22 for the benefit of local people, in the face of unrelenting pressures. We must also recognise that the initial pandemic response, which necessitated the prioritisation of Covid, emergency and urgent care, meant that there has inevitably been a regrettable increase in non-Covid health and wellbeing harms, alongside a significant and growing backlog of non-urgent planned care; and that, despite the success of the vaccination programme, we face ongoing risks around the disease, alongside a range of other pressures that are likely to have a significant impact; both over the recent winter period and beyond.

Forward look

15. Ensuring that the NHS is not overwhelmed remains of paramount importance and, given the myriad of pressures facing us, Boards remained on an emergency footing until the end of April 2022. The Government had supported NHS Board planning for the most recent winter via the [Health and Social Care Winter Overview](#), published on 22 October. The approach was based on four principles: maximising capacity; supporting staff wellbeing;

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supporting effective system flow; and improving outcomes. It outlined how we would: protect the public from the direct impact of Covid-19 and other winter viruses; support our staff to deliver high quality care; increase capacity and maintain high quality integrated health and social care; support the public through clear and consistent messaging to make sure they access the right care, in the right place, at the right time; and use digital and financial enablers to achieve these objectives.

16. This approach, supported by the [Adult Social Care Winter Plan](#), is backed by £300 million of recurring funding, aimed at ensuring we have a well-staffed, well-supported and resilient health and social care system. The new multi-year funding will support a range of measures to maximise capacity in our hospitals and primary care, reduce delayed discharges, improve pay for social care staff, and ensure those in the community who need support receive effective and responsive care.

17. We noted that NHS Western Isles continues to participate and progress elements of work related to phase two of the Redesign of Urgent Care. Whilst the initial Flow Navigation Centre activity was managed through NHS Highland, you agreed that NHS Western Isles will continue to actively work with planning partners to help develop further pathways; ensuring patients continue to receive the right care, at the right place, at the right time.

18. NHS Western Isles continues to review discharge planning with a view to move to Daily Dynamic Discharge, with multi-disciplinary teams prioritising patients. The Board uses the Same Day Emergency Care approach to support early discharge, where appropriate. In terms of Intermediate Care, NHS Western Isles engages well with the HSCP Operations Team to ensure discharge to the most appropriate place for the patient.

19. Whilst our focus over the winter period has necessarily been on resilience (not least in response to the Omicron wave), we remain ever conscious of the backlog of elective care and associated harms. We continue to assist NHS Boards, including NHS Western Isles, with their plans for recovery, in light of the more than £1 billion of targeted investment driving the remobilisation of our NHS; as part of our [Recovery Plan](#), announced in August. Whilst the Board continues to be pressured for inpatient beds and access to theatres, we acknowledged that NHS Western Isles have a scoping exercise underway for a new 23 hour surgery service; to help reduce day case patients converting to inpatients. The Board has also recently appointed two substantive General Surgeons which has greatly stabilised the service, and approved an Arthroplasty Practitioner which is being advertised.

20. In terms of mental health services, NHS Western Isles was allocated just under £600,000 under Phase One of the Recovery and Renewal Fund in order to enable the Board to establish a 'critical floor' of services within CAMHS. Recruitment and retention remains a key challenge for the Board but we were assured activity is underway to try and address this in a sustainable way. In terms of Psychological Therapies, whilst I was encouraged to hear there is now a Consultant Psychologist in post locally, further recruitment is likely to be an ongoing challenge. Scottish Government officials will continue to work closely with the Board to support development of plans to strengthen and stabilise local services.

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21. We also remain very conscious on the cumulative pressures on the health and social care workforce and we are pleased to note the steps NHS Western Isles is taking in terms of the wellbeing and resilience of local staff. We note a Staff Wellbeing Group was setup to co-ordinate your approach to supporting staff across health and social care settings comprising of colleagues from Public Health, Mental Health Service, Spiritual Care, Occupational Health, Human Resources, Acute and Community nursing; as well as having staff side representation from the Area Partnership Forum.

22. For 2022-23, NHS Western Isles are forecasting a year-end financial breakeven position, following delivery of £3.9 million of savings. The key financial risks for the Board include drug cost pressures and service agreement costs increases with mainland Boards. The Scottish Government will continue to regularly engage with the Board.

Conclusion

23. I hope that by the time of the next Review we will be free of some of the more extreme recent pressures and able to focus fully on local service recovery and renewal. I am, nonetheless, under no illusion that the NHS has faced the most challenging winter in its history and am grateful for your ongoing efforts to ensure resilience. We will continue to keep both local activity under close review and to provide as much support as possible.

24. I want to conclude by reiterating my sincere thanks to the NHS Western Isles Board and staff for your sustained professionalism and commitment, in the face of unprecedented and unremitting pressures during both 2020/21 and 2021/22, for the benefit of local people.

Yours sincerely,



Maree Todd MSP

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