

NHS WESTERN ISLES

BOARD MEETING

MINUTES OF MEETING
13 DECEMBER 2023
HELD AT 2.30PM
MICROSOFT TEAMS



Members Present:

Jane Bain	Employee Director / Non-Executive Director	Fiona C. MacKenzie	Nurse / AHP Director and Chief Operating Officer
Debbie Bozkurt	Director of Finance and Procurement	Gillian McCannon	Board Chair (Meeting Chair)
Julia Higginbottom	Non-Executive Director	Annetta Smith	Non-Executive Director
Gordon Jamieson	Chief Executive	Sheena Wright	Whistleblowing Champion & Non-Executive Director (link via Teams)
Karen MacLeod	France Chair of ACF / Non-Executive Director		

In Attendance:

Nick Fayers	Chief Officer, Integration Joint Board
Maggie Jamieson	Head of Communications, Claims and Patient Information
Michelle McPhail	Corporate Business Manager

1. WELCOME

The Chair, welcomed everyone to the meeting.

2. APOLOGIES AND ACKNOWLEDGEMENTS

Diane MacDonald	Head of Human Resources
Francis McAuley	Medical Director
Jocelyn McConnachie	Non-Executive Director
Paul Steele	Non-Executive Director

3. INTRODUCTION

3.1 Chair's Report

The Chair provided an update on:

1 – National Care Service ~ primary legislation stage 1 is moving at pace and seeking approval by end of January 2024. The agreement taken place was addressed through the Verity House Agreement between the NHS and COSLA.

2 – Nursing & Midwifery Taskforce ~ The Chair is part of the group, which is directly responsible to the Cabinet Secretary for NHS Recovery, Health and Social Care, Mr. Michael Matheson. The aim of the group is around recruitment and retention as well as education pathways. Recommendations from the group have been shared with the Cabinet Secretary.

3 – IJB Executive Group ~ The Chair advised that she has attended, in her capacity as Vice-Chair of the IJB, the IJB Network. Now she is part of the IJB Executive Group, which is directly linked to the Scottish Government. In addressing the rural support, the Chair is also on the Remote, Rural and Islands Sub-Group which forms part of the national IJBs.

Decision: Board Members formally noted the verbal update.

Action: No actions required.

4. DECLARATION OF INTEREST

Members did not declare of any conflict(s) with the agenda items, in relation to them having a conflict of interests.

5. MINUTES

5.1 Minute of 30.08.23 - DA

Board Members approved the Minutes of the meeting held on 30 August 2023 as a correct note of the discussion. The Chair remarked on the robust discussion which took place.

Decision: The Board formally approved the Minute of the meeting of 30 August 2023.

Action: No action required.

5.2 Matters arising from previous Minutes

No matters arising were raised.

5.3 Action Points

The Chair advised Members that the actions points had been reviewed and updated appropriately.

- ✚ **26.10.22 7.3 Performance Monitoring Report** – Seeking DNA information. Fiona MacKenzie noted that the newly appointed Patient Services Manager will undertake a review of the appointment process to support the reduction in the number of DNAs. In the initial reviews undertaken within other NHS Boards, a number use NetCall which sends texts to the person's mobile to remind them of their appoints, approximately 80% is undertaken this way with 20% being supported via a formal letter.

Currently the Board uses Docmail which is a centralised national system, located on the mainland, which has electronic transfer of data that is imported onto the letter template and posted. However there is an issue as a number of patients have indicated that they did not receive their letters in time for the appointment, which is of concern.

It was suggested to undertake a cost based analysis as to NetCall costs compared with Docmail in relation to having information received in time to support clinical appointments and reduce the high level of DNAs.

The Chief Executive, noted his concern at the bad performance if letters are not being received in time to support a clinical appointment. He will discuss this the Nurse Director.

UPDATE

ACTION: To review possibility of undertaking a cost review of NetCall and Docmail.

- ✚ **30.11.22 6.1 Finance Performance** – seeking update on the work to appoint to Psychiatry to reduce the financial expenditure on locums - Nick Fayers noted that there is a level of reliance on locums to support the Psychiatry service. It was noted that very early discussions are underway with 2 people who have noted their interest in the role of Psychiatrist. If successful this would work towards reducing costs but increasing a greater level of stability of service.

UPDATE

- ✚ **22.02.23 7.1 Corporate Risk Register** – Noted as completed.

REMOVE

- ✚ **22.02.23 10.3 Climate Emergency & Sustainability Report 2021/22** - Noted as completed.

REMOVE

- ✚ **29.03.23 38.2 Performance Monitoring** – Noted that this is complete.

REMOVE

- ✚ **28.06.23 3.2 Cancer Service Update** – Normal service has resumed and therefore the action is completed. **REMOVE**
- ✚ **28.06.23 3.2 Cancer Service Update ~ assess the Chemocare system across other NHS Boards.** Dr. McAuley is unable to attend the meeting and therefore carry forward to the next meeting. **UPDATE**
- ✚ **28.06.23 – Cancer Service Update ~ review the Boards position in relation to the service level agreement with single handed consultant and contingencies.** Fiona MacKenzie advised that Dr. McAuley is progressing the discussions with mainland Boards. It was noted that a number of smaller Boards are looking towards NHS GG&C for support and therefore NHSGG&C services are under pressure. No resolution as yet. **UPDATE**
- ✚ **28.06.23 7.2 Financial Budget 23/24** – Complete. **REMOVE**
- ✚ **28.06.23 9.2 Childcare Provision – An Cotan** - Update Board Members on progress. On the agenda, 13.12.23, for discussion. **REMOVE**
- ✚ **30.08.23 – Effect of Demographic Change on the Western Isles ~ present the information to the next OHCPP** ~ Ms. Bozkurt advised that the previous OHCPP was cancelled due to the Comhairle's cyber-attack. **UPDATE**
- ✚ **30.08.23 – Effect of Demographic Change on the Western Isles ~ raise the issue of demographics at the CoHI.** Retain and obtain an update from Paul Steele at the next meeting. **UPDATE**
- ✚ **30.08.23 – Effect of Demographic Change on the Western Isles ~ Following CoHI, seek agreement to produce a letter to Scottish Government.** Retain and obtain an update from Paul Steele at the next meeting. **UPDATE**
- ✚ **30.08.23 – 12.2 Sustainability ~ quarterly reports to be presented.** Set for presentation at the February 2024 Board Meeting. **UPDATE**

Decision: The Board formally noted the updates.

Action: No action required.

6. FINANCIAL PERFORMANCE

6.1 Financial Performance Monitoring Report Month 7 (Oct'23)

6.1.1 Appendix 1 – Narrative Report

6.1.2 Appendix 2 – Report of Legionella

6.1.3 Appendix 3 – Report of Travel Logistics

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

Discussion: Debbie Bozkurt advised that as part of her remit, she is responsible for the Patient Travel System, which includes the logistics of transport, vehicles etc. Elements of all of this are included in the appendices presented.

As at 31 October 2023, the Board is showing an in-year overspend of £1.150m with a project year-end overspend of £2m.

Ms. Bozkurt advised that for many months, she has been projecting an overspend of £2m. Recently the Scottish Government have awarded the Board with the correction to the national pay award resulting in £1m being allocated. This does reduce the projected year-end position slightly.

Scottish Government have reviewed the outcome of the GMS allocation and anticipate that the £700k previously recouped by the Scottish Government will be handed back in Month 8, however this has still to materialise.

Ms. Bozkurt advised that she is hopefully of bringing the Board's financial position to an overspend of approximately 1% of the Boards baseline allocation which is seen to be the best case scenario when anticipating an overspend.

The financial position is due in part to the level of island elderly population who have complex conditions. In the 10 years it is estimated that an additional £5m pressure is seen in Health and a further £3m is reflected in Social Care needs. This level of increase is not matched in the Scottish Government's allocation.

Controls are in place, and any additional expenditure, above department budgets, request approval by the Chief Executive. Close review of all budgets is addressed via the Chief Executive performance reviews.

An additional expenditure in-year is with eRoserting system, which requires an upfront funding level of £250k. Comparing this with other NHS Boards, Island Board costs are similar however the larger Boards such as NHS Greater Glasgow and Clyde have been required to pay £450k.

In referring to the two appendices, both submitted to the Scottish Government finance team:

- **Legionella** – replacement of the water tanks and water taps and shower filter have been installed in the Western Isles Hospital.

A decontamination issue in the Uists arose which required cleansing of the tanks and taps. This also impacted on a number of dental chairs, which as a result of the micro parts in the water, resulted in replacing the dental chairs as they will be required for service delivery in the new Hub service opening on 01.04.24.

- **Logistics report** – this addresses the flight and ferry issues highlighting the impact on costs. Patient travel equates to 18000 tickets between Loganair and Calmac for patients only. The transportation of food, medical supplies and general equipment is addressed up and down the islands, as well as transportation of staff is also a cost pressure to the Board. It is key to have an inter-island schedule to support delivery of services. Reduction of transportation causes great financial pressure as well as the impact on delays of patients traveling to the mainland for treatment.

Ms. Bozkurt noted that in addressing the inflationary costs, the Scottish Government provide a 2% uplift, however offsetting this against actual inflation means a continued cost pressure i.e. flights have increased by over 20% in the last two years which is offset against a Scottish Government uplift of 4%, resulting in the Board having to consume a 16% increase with no direct funding.

In addressing the impact of the flights on Chemotherapy service, the Board has made an additional expenditure of £190k to ensure that complex infusion of intravenous drugs are administered within the short life span of the drug cocktail.

In summary Ms. Bozkurt advised that the cost pressures seen in this fiscal year will continue, and increase, year on year.

The Board continue to discuss with Scottish Government and Council the impact of flight changes, however currently no formal response has been received.

The Chair, reviewing the Month 7 Financial report, enquired if the 1% overspend was an allowable level which the Board can make.

Ms. Bozkurt advised that the Scottish Government state that Boards are required to break-even, however if a Board achieves a level of overspend by 1% of the allocation, that 1% is carried forward and held by the Board in the following year as a financial pressure.

In reviewing the detail, the Chair remarked on the real concern that the impact on transportation has resulted with chemotherapy packs being written off, due to the drugs no longer being viable after a specific period of time. This has resulted in the Board having to invest in an alternative approach to ensure patients receive their medication timely and appropriately.

The Chief Executive, considering the points raised by Board Members pertaining to financial pressures, advised that at the corporate level colleagues will be reviewing all areas, assessing the level of grip and control and see what else can be done to ensure that front line services are retained. The cost of locum charges continues to be one of the highest financial pressures the Board incurs. The impact on treating elective patients appropriately is as a direct impact on delayed discharges, which also results in the delayed discharge patient not being treated at the right time in the right environmental location, the acute setting is not the right place for recovery or social care support.

Mr. Jamieson advised of the Scottish Government financial template, known as the 15 point grid, focuses on areas of spend. The 1st and 2nd draft of the template has been completed.

As part to the grip and control, the Scottish Government have advised that NHS Boards should stop all discretionary spends. Any anticipated discretionary spends will require the Chief Executive to review before any action or expenditure is taken.

The Chair expressed her thanks to Debbie Bozkurt for the report and to the Chief Executive and all Directors for their continued review and control on expenditure.

Decision: The Board formally noted the report.

Action: No actions required.

6.2 NHS Western Isles Annual Accounts 22/23

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

Discussion: The Annual Accounts were presented for awareness. It was confirmed that the Annual Accounts have been laid before Parliament and therefore the Board is able to present the report in public and will be added to the Board Website.

No questions raised.

Decision: The Board formally noted the report.

Action: The report should be added to the Board Website

7. PERFORMANCE

7.1 Corporate Risk Register – Dec'23

7.1.1 Appendix A – CRR Detailed Report

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

Discussion: The Chair advised that the report has been discussed in detail by the Healthcare Governance & Audit Committee.

Fiona MacKenzie presented the report, noting 3 additional risks which have now been added to the register:

- Depopulation
- Inpatient beds in WIH – bed spacing reduced in 4 bed bays to support 6 patients at times of increased pressure.
- Acute Psychiatry unit relating to access to mainland beds and or support. This relates to intensive mental health beds. The pressure is noted across all NHS Boards in Scotland.

The Chair thanked Ms. MacKenzie for the report. It was suggested that the impact from delayed discharges should be added to the Board's Corporate Risk Register.

Ms. MacKenzie advised that delayed discharges are incorporated in risk 047 relating to system pressure and winter plans, where delayed discharges are noted specifically as a hazard.

The Chief Executive advised that risk 047 should be explored further in relation to the gaps and controls relating specifically to delayed discharges. The discharges are almost entirely out of the Boards control because the status of the obligations sits with the Local Authority. The Chair welcomed the approach providing the Board with assurance of any unintended consequences.

The Chair welcomed the additional information to support the Board assurance level and thanked colleagues for the discussion.

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

Action: **No actions required.**

7.2 Information Governance Performance Summary

7.2.1 Appendix 1 – Narrative Report

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

Discussion: The Chef Executive, Gordon Jamieson, presented the standard report to Members, which advises of the number of FOI requests, Subject Access request as well as Environmental requests. The following points were noted:

- In the first 9 months 114 Subject Access requests have been received.
- FOI requests are sitting at 625 for the first 9 months of the year. The highest level of requests are relating to clinical services with 125 request, followed by HR with 67 requests.
- Compliance responding to the individual within 20 working days is sitting at 95%.
- Data breaches are currently at 12, which are always reviewed as a significant issue.

The Chair thanked Mr. Jamieson for the report.

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

Action: **No actions required**

7.3 Whistleblowing Quarterly Report 23/24

7.3.1 Appendix 1 – Q1 Report (Apr-Jun'23)

7.3.2 Appendix 2 – Q2 Report (Jul-Sept'23)

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

Discussion: Fiona MacKenzie drew colleagues' attention to the report which indicates no concerns raised. Work continues to promote the Whistleblowing process with staff, as well as advising on how issues can be addressed at an early stage or as business as usual. As part of the schedule of visits, the Whistleblowing Champion visited the Uists in August along with Louise Sullivan, Head of Clinical Governance and Professional Practice.

Mrs Wright, Whistleblowing Champion provided colleagues with additional information noting a detailed report on the work of the Whistleblowing Champion will be presented to the Staff Governance Committee on the 8th of January 2024, advising of the areas visited to date. A schedule of meetings is being prepared for Spring 2024 which will include visits to the Isle of Harris.

The Chair thanked Fiona MacKenzie for the report. The Chair expressed her thanks for the notable involvement and commitment Mrs. Wright has shown to the role, commending her for the positive way in which Whistleblowing is being directed in the Western Isles.

Decision: The Board formally noted the report.

Action: No actions required.

7.4 Complaints Report

7.4.1 Appendix 1 – Summary Report Apr-Jun'23

7.4.2 Appendix 2 – Summary Report Jul-Sept'23

7.4.3 Appendix 3 – Complaints and Feedback Annual Report 22/23

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

Discussion: Debbie Bozkurt, in providing a level of perspective, advised that she manages the administration of the Complaints process on behalf of the Chief Executive, with the Chief Executive having final sign-off on all responses.

In reviewing the report the level of complaints made in Quarter 1 and Quarter 2, in comparison with the previous year have almost halved. Complaints being made have reduced which may be a result of better service delivery, or a more smoother handling of complaints where resolution is being found quicker and therefore removing the need to raise a formal complaint.

The Chair, picking up on an earlier conversation with the Healthcare Governance and Audit Committee, enquired if the complaints report could also advise of complaints being raised by our residents relating to the care within another NHS Board. This would provide a level of information as to the quality of the service being provided by our Service Level Agreement.

Ms. Bozkurt advised that she would discuss this with the Complaints Officer to ascertain what information is available.

The Chair thanked Ms. Bozkurt for the report.

Decision: The Board formally noted the report.

Action: No actions required.

7.5 Western Isles Performance Monitoring Reports

7.5.1 Performance Summary Report Apr-Jun'23

7.5.2 Appendix 1 – Summary Report Apr-Jun'23

7.5.3 Performance Summary Report Jul-Sept'23

7.5.4 Appendix 1 – Summary Report Jul-Sept'23

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

Discussion: The Nurse Director presented the report, drawing colleagues' attention to the report, specifically focussing on the quarter 2 report, going through a number of targets.

Ms. MacKenzie discussed the following:

- Cancer targets
- Inpatient and day case waiting times – noting that the Boards position is better than in other NHS Boards, however due to financial reduction the Scottish Government have not supported any specific waiting times initiatives. Currently no patients are waiting over 1 year for treatment.
- The level of delays is being assessed where repetitive do not attends have 3 chances before being referred back to their GP.
- Travel arrangements for those consultants moving between Highland and the islands has had an impact on outpatient activity as well as visiting service inpatient and day case procedures.

Annetta Smith considering the performance for post diagnostic dementia, enquired if there was any specific intervention happening to improve this area.

Ms. MacKenzie advised that post diagnostic comes under mental health and that she has had a discussion with Gail Allan who line manages the service and looking to establish a detailed action plan to address the staffing and the way forward to support patients and families. No timescales can be identified at the moment.

Reflecting on the response from Ms. MacKenzie, the Chair acknowledged the challenges, but with the new Scottish Government Dementia Strategy the needs to ensure that it is compliant with the way forward. The impact for Scotland and for the Board's residents this condition is a growing issues in the elderly population. Mental Health is part of the delegated services to the Integration Joint Board, and there should be movement with utilising the newly built, dementia friendly environment of Goathill, should be utilised better and in a different way if it cannot be staffed to support its pre-set services.

The Chair thanked Ms. MacKenzie for the report, commenting on a number of areas where progress has been made to support the overall service delivery to the island population.

Decision: The Board formally noted the report.

Action: No actions required.

8. CORPORATE GOVERNANCE

8.1 Annual Delivery Plan 2024/25

8.1.1 Appendix 1 – 24/25 Narrative Report

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

Discussion: Fiona MacKenzie presented the report advising that the updated reports have been submitted to the Scottish Government, with good performance noted.

Ms. MacKenzie indicated the timescale of submissions required noting that the 3-year Annual Delivery Plan (ADP) was submitted at the end of September 2023. In December 2023 new guidance was circulated to NHS Boards for the 2024/25 Annual Delivery Plan, noting a deadline submission date of 07 March 2024.

There are 10 drivers which form part of the NHS Recovery and these have changed slightly in the revised guidance with new or updated drivers within Health Inequalities, Digital Services, Technology and Innovation and Women and Children's Health.

In assessing the presentation of the ADP within other Boards, it was noted that the Board has sight of the report at the beginning and then via appropriate reports specific to the drivers, the Board are provided with assurance. Consideration on this matter is required.

Ms. MacKenzie indicated that the Value Based Health and Care Action Plan was published in November 2023 and further work will be required to assess the how the Board faces very difficult decisions in line with financial controls. This will be presented to the Board in the next few months.

The Chair thanked Ms. MacKenzie for an update on the report.

The Chief Executive welcomed the focus on inequalities, advising that that a third of the total annual healthy life years are lost due to ill health. This needs serious focus to improve the position.

Further consideration by the Scottish Government is required to ensure that a refreshed approach to prevention is linked to the inequalities agenda. To ensure that everyone can understand the Value Based Health and Care Action Plan further review of the format is required to ensure that the report is an easy read, user friendly report, before placing it in the public domain.

Ms. Higginbottom agreed with the Chief Executive in that the report must be reviewed prior to publishing it wider. In discussing innovation, it was noted that it is unlikely that any additional funding will be available to support innovation development nor sustainability, which is of great concern.

The Chair thanked all colleagues for their input into the discussion.

Decision: The Board formally noted the report.

Action: Present the completed Value Based Health and Care Action Plan at a future Board meeting.
Fiona MacKenzie

8.2 Childcare Provision – An Cotan

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

Discussion: Gordon Jamieson provided Members with a verbal update.

Communication has been received from Scottish Government, confirming the position is unchanged, in that the Board has the power to provide 0-3 years' childcare.

The Central Legal Office (CLO) continue to seek clarity from the Scottish Government in relation to the power the Board has in generating income from those parents who are not directly employed by the NHS Board in obtaining childcare service.

The Chief Executive anticipated that formal final advice from the CLO will be available in late December early January which will enable to the Board to take a final decision come early next year.

Maggie Jamieson enquired as to when updates can be sent to Staff. The Chief Executive will address this out with the meeting.

The Chair thanked Mr. Jamieson for the update.

Decision: The Board formally noted the report.

Action: Update from the Chief Executive once further information is available.

8.3 Duty of Candour Annual Report 22/23

8.3.1 Appendix 1 – Narrative Report

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

Discussion: The Nurse / AHP Director and Chief Operating Officer, Fiona MacKenzie, advised that noted in the report 2 adverse events were reported between April 2022 and March 2023 and the report is provided for Board Members information.

No questions were raised and the Chair thanked Ms. MacKenzie and her team for the production of the detailed report.

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

Action: **No actions required.**

8.4 Health & Social Care Winter Preparedness Plan 23/24

8.4.1 Appendix 1 – Preparedness Plan

8.4.2 Appendix 2 – NHS Western Isles Winter Plan

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

Discussion: Mr. Jamieson indicated that the presentation of the report provides the Board with opportunity to discuss the guidance and the Boards actions in relation to winter preparedness. The Boards winter planning group have continuously working on the preparation to ensure that the Board is addressing its services throughout the winter period. It was noted that this is but one element of the reporting templates which some are completed and submitted on a weekly basis.

The Chief Executive explained that in addressing the winter pressures, the system continues to deliver in unrelenting pressure in terms of bed capacity too frequently.

The Chair acknowledged the pressure the Directors are under in ensuring that operational delivery continues during additional winter pressures. The element of the Winter Planning is or will be incorporated within the Annual Delivery Plan.

The Chair provided Members with the opportunity to consider the report in detail and submit any questions to Michelle McPhail who will collate them and represent at the next meeting.

The Chief Executive advised that the board would benefit from a development discussion in relation to the returning checklist which Members could obtain the level of detail to ensure awareness and understanding of the impact the proposal would have. The Winter Plan is in place until April 2024.

The Chair agreed.

Decision: The Board formally noted the report.

Action: Members can submit any questions they have to Michelle McPhail to collate and obtain responses to. The questions will be represent at the next meeting.

Hold a development session at the Board meeting to discuss the winter checklist.

8.5 Board Meeting Schedule 2024

Issue: *The Board was asked to approve the report presented by Michelle McPhail, Corporate Business Manager.*

Discussion: Michelle McPhail drew colleagues' attention to the report which denotes the schedule of Board meetings, development sessions as well as seasonal briefing sessions for 2024. The dates have been placed in dairies.

The Chair and Members agreed to the schedule noted.

Decision: The Board formally approved the Board meeting schedule.

Action: No actions required.

8.6 Gaelic Language Plan

8.6.1 Appendix 1 – Plan

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

Discussion: Gordon Jamieson advised that the Plan and aspects of the detail of the Plan had been discussed by the Board previously. Following further iteration, Bòrd na Gàidhlig have approved the Board's Plan. It is presented to Board Members for assurance. The Plan will be placed on the Boards website and work will continue to implement the actions.

The Chair thanked Mr. Jamieson for the Plan.

Decision: The Board formally noted the Plan.

Action: No actions required.

8.7 NHS Scotland Resilience

8.7.1 Appendix 1 – Health EPRR – Business Continuity Working Group

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

Discussion: Gordon Jamieson presented the report on Resilience to colleagues, advising of the number of frameworks and assessments which colleagues will need to undertake to ensure compliance, and this will be addressed through the Resilience Group. The organisation is in the process of advertising the role of Resilience Officer, to provide qualified support on Resilience and Business Continuity function.

The Chair thanked Mr. Jamieson for bringing the report to the Board, acknowledging the benefit in setting out the Boards responsibilities.

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

Action: **No actions required.**

9. STAFF GOVERNANCE

9.1 Human Resources Workforce Report Oct '23

9.1.1 Appendix 1 – Narrative Report

Issue: *The Board was asked to note the report presented by Gordon Jamieson, Chief Executive in the absence of Diane MacDonald, Head of Human Resources.*

Discussion: The Chief Executive presented the report advising on the following points:

- **Workforce** numbers remain stable with the age profile continuing to be skewed to over 40. The workforce is ageing with 45% of those employed are over 50 with the highest proportion being 55-59 years.
- **Sickness absence** decreased in October from 6.14% from 5.83% in September. Covid related illness was low in July at 80 days plus 62 days of Covid special leave but coughs, colds and flu remain above the summer months average.

Work continues, in partnership, with the APF colleagues to ensure that where an absence is recorded that the reason for the absence is also noted rather than unknown.

The Chair thanked Mr. Jamieson for the report, reflecting that the information has been reported and deliberated in the Staff Governance Committee.

The Chair reflecting on the 15 Point Plan, indicated that sickness absence is addressed in the Plan in terms of reducing the reliance on additional staff to provide the cover and support a reducing in overall hours and days lost to sickness absence.

Decision: The Board formally noted the report.

Action: No actions required.

9.2 iMatters Update

9.2.1 Appendix 1 – Board Yearly Components Report 2019-23

9.2.2 Appendix 2 – Board Report 2023

9.2.3 Appendix 3 – Raising Concerns Report

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

Discussion: The Chair, before handing over to Mr. Jamieson, commented on the Board's positive position in addressing iMatters.

Mr. Jamieson explained that the national iMatter report was discussed at the Scottish Workforce and Governance Group national meeting and NHS Western Isles was commended on its handling and significant improvements in supporting staff and improving their wellbeing. The areas for further improvement, which was noted within the national review across all NHS Boards, is the follow-up by individual departments discussing the outcomes and how improvements could be made which then supports the departments' iMatter action plan.

Mr. Jamieson provided assurance to Board Members, that the Boards performance on iMatters is seen as very positive, however there is a commitment to iMatters and work will continue to improve the Boards position.

The Chair thanked Mr. Jamieson for the report, advising that this was discussed at the Staff Governance Committee noting the need to close the loop and complete the department action plans.

Decision: The Board formally noted the report.

Action: No actions required.

10. REPORT / APPROVED MINUTES FROM BOARD SUB COMMITTEES FOR NOTING

10.1 Healthcare Governance & Audit Committee

10.1.1 Healthcare Governance & Audit Committee Minute 28.06.23 - A

The Minute was presented for information.

No questions were raised.

Decision: The Board formally noted the reports.

Action: No actions required.

10.2 Area Partnership Forum

10.2.1 Area Partnership Forum Minute of 22.08.23 - A

The Minute was presented for information.

No questions were raised.

Decision: The Board formally noted the reports.

Action: No actions required.

10.3 Staff Governance Committee

10.3.1 Staff Governance Committee Minute 17.08.23 – A

The Minute was presented for information.

Decision: The Board formally noted the reports.

Action: No actions required.

10.4 Health & Safety Committee

10.4.1 Health & Safety Committee Minute 04.07.23 – A

The Minute was presented for information.

Decision: The Board formally noted the reports.

Action: No actions required.

11. 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?	✓		Members reflected on the improved presentation and context of the information contained in the summaries and the main reports which did provide greater understanding
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	✓ ✓ ✓		

12. DATES, TIMES & VENUE OF NEXT MEETING

Public Board Meetings

Date: 28 February 2024

Before the Chair brought the meeting to a close, the Chief Executive wished to advise Board Members that a successful appointment has been made to the post of Director of Public Health, subject to the normal review. Further update on appointments will be forthcoming.

The Chair thanked everyone for their contribution, commitment and involvement in the Board. The meeting was brought to a close at 5:00pm

END