



Ayrshire and Arran NHS Board
Minutes of a public meeting on Monday 2 December 2019
9.15am, Rooms 2A-C, Education Centre, University
Hospital Crosshouse

Present: Dr Martin Cheyne (Chair)
Non-Executive Members:
Mrs Margaret Anderson
Mr Michael Breen
Mr Adrian Carragher
Mrs Jean Ford
Mr Ewing Hope
Miss Lisa Tennant

Executive Members:
Mr John Burns (Chief Executive)
Prof Hazel Borland (Nurse Director)
Dr Alison Graham (Medical Director)
Mr Derek Lindsay (Director of Finance)

Board Advisors/Ex-Officios:
Mr Stephen Brown (Director of Health and Social Care, North Ayrshire)
Mrs Kirstin Dickson (Director of Transformation and Sustainability)
Mr Tim Eltringham (Director of Health and Social Care, South Ayrshire)
Mr Eddie Fraser (Director of Health and Social Care, East Ayrshire)
Ms Patricia Leiser (Human Resources Director)
Mrs Joanne Edwards (Director for Acute Services)
Dr Crawford McGuffie (joint Medical Director)
Mrs Lynne McNiven (interim Director of Public Health)
Dr Joy Tomlinson (interim Director of Public Health)
Mr John Wright (Director for Corporate Support Services)

Mrs Shona McCulloch (Head of Corporate Governance)
Mrs Miriam Porte (Communications Manager)
Mrs Angela O'Mahony (Committee Secretary) minutes

1. Apologies

Apologies were noted from Mrs Lesley Bowie, Cllr Laura Brennan-Whitefield, Cllr Joe Cullinane, Mr Bob Martin, Cllr Douglas Reid, Mr John Rainey and Ms Linda Semple.

2. Declaration of interests (150/2019)

There were no declarations noted.

3. Minute of the meeting of the NHS Board held on 7 October 2019 (151/2019)

The minute was approved as an accurate record of the discussion.

4. Matters arising (152/2019)

Paper 2 - Action Log

The Board action log was circulated to Board Members in advance of the meeting and all actions were noted.

5. Chairman and Chief Executive's report

5.1 Chief Executive's report (153/2019)

- The Chief Executive highlighted that the health and care system across Ayrshire and Arran was currently experiencing a high level of demand for services, similar to other Board areas. The Chief Executive acknowledged the very hard work being done by teams across health and care to do everything possible to ensure patients receive the right care as quickly as possible. The Chief Executive gave assurance that improvement activity continued to address the challenges being faced.
- The Chief Executive reported that he had recently met with the new Director of the Scottish Health Council (SHC) to discuss Board's engagement plans in relation to Caring for Ayrshire (CfA) and further discussion was planned, in addition to the regular meetings with the Director for Transformation and Sustainability, Mrs Kirstin Dickson.
- The Chief Executive and Mrs Dickson had met the Assistant Director of Finance Capital at Scottish Government on 29 November 2019 to provide an update on CfA activity and seek assurance that progress made in taking forward the whole system model was consistent with what had previously been agreed. The Chief Executive acknowledged and thanked Scottish Government colleagues for the support provided to enable Board to progress plans. The Chief Executive advised that Scottish Government recognised that NHS Ayrshire & Arran would require to seek funding for resources to continue to deliver CfA into next year. Scottish Government was encouraged that programme timelines had been set and had offered to continue to support ongoing dialogue with Board as the programme initial agreement progressed.

5.2 Chairman's report (154/2019)

- The Chairman had attended the Scottish Health Awards on 14 November and congratulated colleagues in the Ayrshire Maternity Unit and the Community Pharmacy teams in East Ayrshire and South Ayrshire who had won awards.
- The Chairman had attended the West of Scotland Health Research Network meeting on 6 November. The group's purpose was to bring together academia, industry and NHS organisations in the West of Scotland to enable collaboration on all aspects of research. A delivery group would be set up to establish and define areas of work to be progressed. A similar group had been set up for the East of Scotland.

- The Chairman had attended a public health conference on 28 November and chaired the plenary session on social justice for people with mental health problems. There had been an interesting presentation by Professor Dinesh Bhugra CBE, Emeritus Professor and renowned research presenter and author in the field of mental health and social justice.
- The Chairman advised that he would be stepping down as Chair of NHS Ayrshire & Arran Board at the end of December 2019 having spent eight years in the role. Scottish Government had appointed Mrs Lesley Bowie as interim Chair with effect from 1 January 2020. A recruitment process was ongoing with the closing date for applications on 4 December and interviews were planned for early in the new year.

6. Quality

6.1 Patient story, learning from Care Opinion (155/2019)

The Director for Acute Services, Mrs Joanne Edwards, invited Dr Claire Gilroy, Specialty Doctor in Emergency Medicine, to present the Patient story on learning from Care Opinion (CO).

Dr Gilroy highlighted feedback received from a patient's partner. The patient had a chronic health condition and due to variations in treatment received during various hospital stays, was anxious at the prospect of another admission. Dr Gilroy explained how this had led to numerous learning events both for the patient and for clinicians. This story had highlighted that CO should be a way for everyone within the system to learn from each other. Learning should be encouraged across departments and at both hospital sites. Dr Gilroy explained that patients with chronic illnesses were experts at self-care and should be encouraged to do this. Dr Gilroy gave assurance that clinicians welcomed patient feedback and wanted to learn and make positive changes to improve patient experience.

Board Members welcomed this story and the powerful message on the positive, wider impact of CO. The Area Clinical Forum Chair, Dr Adrian Carragher, emphasised the need to support and develop staff to enable them to respond directly to CO and manage any difficult situations which may arise. The Nurse Director recognised that there was a need for staff to feel confident in responding to CO posts and highlighted improvement activity and support being provided to increase the number of staff able to respond directly to CO posts. Prof Borland reiterated that staff wanted to deliver the best patient experience possible and it was important to acknowledge and take on board critical comment and identify and share learning and improvement.

Outcome: **Board Members noted the patient story on Learning from Care Opinion. Board Members were encouraged by the positive impact and numerous learning events both for the patient and for clinicians and thanked the patient and family for allowing their story to be shared.**

6.2 Patient experience Q2 (156/2019)

The Nurse Director, Prof Hazel Borland, introduced the Patient Experience: Feedback and Complaints Quarter 1 report for the period July to September 2019

which had been discussed and scrutinised at the Healthcare Governance Committee (HGC) meeting on 12 November 2019.

Prof Borland highlighted that following the introduction of new complaint handling definitions in 2017, the number of concerns raised per quarter had reduced significantly from 240 in Quarter 1 of 2017/18 to the current period when there were less than 100 concerns and this remained relatively stable.

Prof Borland advised that there had been an increase in the number of complaints received in Quarters 1 and 2 compared to 2017-18 data when the definitions had changed. Board Members received assurance that the proportion of complaints per patient episode was very small and there was ongoing work to consider themes and reasons for complaints to ensure learning.

Board Members received details of the positive improvement work to support Acute Services to significantly improve stage one and stage two complaint response times. Prof Borland highlighted the positive benefits from having a member of the complaints team based at University Hospital Crosshouse (UHC) to coordinate and liaise with managers and clinicians on complaints activity and advised that similar arrangements were being considered at University Hospital Ayr (UHA).

Prof Borland highlighted that Scottish Public Sector Ombudsman referrals had reduced significantly compared to last year. Board Members were advised that improved feedback was being received from complainants in relation to feeling listened to, offered an apology and shown empathy in response to a complaint. Prof Borland highlighted the positive impact of CO activity, as previously reported.

The Director of Health and Social Care for East Ayrshire, Mr Eddie Fraser, drew Board Members' attention to prisons complaints data and highlighted that Board had been asked to plan for an additional 100 prisoners in HMP Kilmarnock without additional resource for the Health team, which would present a range of risks in the coming months. The Chairman emphasised the importance of considering the impact on wider services when making decisions of this nature, particularly where it involved such a vulnerable patient group.

Outcome: Board Members received and noted the Patient Experience: Feedback and Complaints Quarter 2 report and noted compliance with the complaint handling process.

The Chairman acknowledged the patient experience improvement activity undertaken by Board over the past few years and congratulated all staff involved for the significant progress to date.

6.3 Healthcare Associated Infection report

(157/2019)

The Nurse Director, Prof Hazel Borland, presented a report on Healthcare Associated Infections (HAIs) and Board's performance against the new Healthcare Associated (HCA) infection standards.

Prof Borland reported that Scottish Government had recently announced new national Healthcare Associated Infection (HCA) standards for *Clostridium difficile*

(CDI) and Staphylococcus aureus Bacteraemias (SAB) and a new target had been set for Escherichia coli bacteraemia (ECB), as detailed in the report.

Board Members were advised that there was a change in approach to the previous Local Delivery Plan targets which required Boards to achieve the same standardised rate based on a best in class approach. The report detailed the rates NHS Ayrshire & Arran required to achieve in order to deliver the corresponding reduction to local rates benchmarked against Board's 2017-18 baseline data.

Prof Borland reported that while Board had previously made significant progress to reduce CDI, the organisation was slightly off trajectory and focused effort will be required to achieve the new standard. Prof Borland highlighted the challenges experienced and improvement interventions previously put in place to manage SABs and advised that further, significant further progress will be required to meet the new standard.

Prof Borland outlined the new national standard for ECB and advised that Board would require to make significant progress to meet the new 2021-22 and 2023-24 targets. Prof Borland gave assurance that while there were currently no national interventions available to reduce E.coli infections, Infection Control Managers and Infection Control Doctors worked closely together and shared information across networks on a range of issues. Prof Borland advised that Public Health colleagues and the Control of Infection Committee had met to consider possible areas for improvement and a Urinary Catheter Improvement Group had been established to promote best practice in the use of urinary catheters and reduce urinary catheter related infections.

Board Members considered the challenges and improvements required to achieve the new national HCA standards. The Chief Executive gave assurance to Board Members that the challenges relating to E.coli were discussed in detail at the Healthcare Governance Committee on 12 November 2019. In response to a question from the Chief Executive Prof Borland confirmed that Board Members would receive a report at a future meeting with commentary from HGC to promote understanding of Board's improvement trajectory and interventions being put in place in relation to the ECB standard.

Outcome: Board Members considered and noted the Healthcare Associated Infection report and performance against the new Healthcare Associated Infection indicators. Board Members looked forward to receiving a detailed report on improvement interventions in relation to Escherichia coli bacteraemia infections at a future meeting.

6.4 Scottish Patient Safety Programme – Maternity & Children Quality Improvement Collaborative (158/2019)

The Nurse Director, Prof Hazel Borland, presented a progress report on the Scottish Patient Safety Programme (SPSP), Maternity and Children Quality Improvement Collaborative (MCQIC) report, with the aim to improve outcomes and reduce inequalities in outcomes by providing a safe, high quality care experience for all women, babies, children and families across all care settings.

Prof Borland explained that the report's format had been changed to provide shorter, more focused updates on MCQIC workstreams and this report detailed the progress of the Neonatal Workstream. HGC had discussed the report in detail at the Committee meeting on 12 November and Committee members had endorsed the new reporting format.

Prof Borland highlighted that the implementation of Transitional Care as part of the Best Start programme had supported the reduction of "term" admissions to the Neonatal Unit (NNU) which was very positive for mothers and their babies. Board Members received assurance that the number of Central Line Associated Bloodstream Infections had shown reduction for four months and work would continue to sustain this success, with outcomes reported through HGC. Prof Borland highlighted that collaborative work had begun to reduce the number of babies admitted to the NNU with hypothermia, including the introduction of a "warm bundle" in October 2019.

Outcome: Board Members considered and noted the quality improvement and safety activity in Neonatal Services as part of the Maternity and Children Quality Improvement Collaborative programme.

7. Corporate Governance

7.1 Audit Committee (159/2019)

The Audit Committee Chair, Mr Michael Breen, advised that the Committee meeting scheduled to take place on 27 November 2019 had been cancelled as a quorum of members was not available.

Outcome: Board Members noted.

7.2 Healthcare Governance Committee (160/2019)

In the absence of the Healthcare Governance Committee Chair, the Vice Chair, Mr Adrian Carragher, provided a verbal update from the Healthcare Governance Committee (HGC) meeting held on 12 November 2019.

Mr Carragher reported discussion in relation to the new HCA infection standards and challenges in delivering improvements against the associated targets. Members had noted the exclusion of community acquired infection from the new standard and consideration was given to future reporting requirements, for example, through Integration Joint Boards. Committee members had noted the positive improvements made by Board in relation to antimicrobial prescribing. Members had asked for a review of future reporting arrangements for Significant Adverse Event Review action plans. The Committee had considered Public Health reports for Bowel screening and Pregnancy and Newborn screening and members had acknowledged the successful Newborn hearing screening test which provided universal coverage despite the considerable pressures facing the service, mainly due to the dedication and commitment of this small team.

Outcome: Board Members noted the update.

7.3 Information Governance Committee

(161/2019)

The Information Governance Committee Chair, Miss Lisa Tennant, presented the draft minute of the meeting held on 4 November 2019.

Miss Tennant reported that Board had been asked to submit a Progress Update Review by January 2020 on progress to fulfil the requirements of the Public Records (Scotland) Act 2011 and work was ongoing to meet this deadline. Committee members had been assured by the good uptake and positive feedback received from participants in Corporate Records Management – The Basics monthly training sessions being held. The Committee had considered progress in the completion of Information Asset Registers and members had received assurance on focused work taking place through Corporate Management Team to accelerate this work. The Committee received a presentation from the Head of Health Records Services on records management and the rollout of Paperlite working and members were very encouraged by the progress made to date.

Outcome: Board Members considered and noted the minute.

7.4 Integrated Governance Committee

(162/2019)

The Chairman highlighted changes to the Integrated Governance Committee's (IntGC) terms of reference to include oversight of Board's Caring for Ayrshire programme, as previously reported to members. The Head of Corporate Governance, Mrs Shona McCulloch highlighted the approach being adopted to deliver a more robust meeting schedule in 2020 and ensure the best possible governance programme. Mrs McCulloch gave assurance that Corporate Governance Internal Audit actions were being reported and progress monitored through IntGC.

Outcome: Board Members considered and noted the minute.

7.5 Performance Governance Committee

(163/2019)

In the absence of the Performance Governance Committee Chair, the Vice Chair, Mr Michael Breen, presented the draft minute of the meeting held on 5 November 2019. The Committee had received a very interesting presentation on proposed changes to the future delivery of health and social care services on Arran as part of Board's wider transformation programme. The Chief Executive had provided assurance in relation to the arrangements and processes in place to deliver the new National Secure Adolescent Inpatient Service.

Outcome: Board Members considered and noted the minute.

7.6 Staff Governance Committee

(164/2019)

In the absence of the Staff Governance Committee (SGC) Chair, the HR Director, Ms Patricia Leiser, presented the draft minute of the meeting held on 2 October 2019. Mrs Leiser reported that the Committee had considered the People Strategy and there had been focused discussion on corporate and directorate actions relating to the "Retain" element of the strategy. Committee members had received an update on the national publication on the implementation of iMatter, produced by the

Scottish Centre for Employment Research, University of Strathclyde, and commissioned by the Scottish Government. Committee members had also discussed the “Develop” section of the strategy, focusing on the improvement actions relation to PDR completion. Ms Leiser reported that Mr Ewing Hope had been confirmed as SGC Vice Chair.

Outcome: Board Members considered and noted the minute.

8. Service

8.1 Winter Plan 2019-20 (165/2019)

The Director for Transformation and Sustainability, Mrs Kirsti Dickson, presented the final draft Winter Plan 2019-20 to provide assurance to Board Members that the whole Health and Care system in Ayrshire and Arran had planned together to adequately meet the predicted seasonal demands of winter.

Mrs Dickson advised Board Members that the draft Winter Plan considered at the Board meeting on 7 October 2019 was based on a confirmed funding allocation of £347,483. A further Scottish Government letter was received on 30 October 2019 providing feedback on Board’s draft Winter Plan and details of additional funding, bringing the total allocation to £709,728. The final draft Winter Plan was submitted to Scottish Government on 12 November 2019.

The Chief Executive advised Board Members that the winter period will be challenging and he gave assurance that operational discussion had taken place with Health and Social Care Partnerships and Acute Services to target and embed key improvement initiatives to maximise the impact of Scottish Government funding. An evaluation of winter planning would take place in due course.

The Director for Acute Services, Mrs Joanne Edwards, clarified in response to a question from a Board Member, that the additional capacity and resource required to extend the opening of the day surgery at UHA would come from commissioning additional hours from existing staff utilising the fixed term funding provided by Scottish Government.

Outcome: Board Members noted the updated Winter Plan 2019-20 which had been submitted to Scottish Government on 12 November 2019. Board Members noted the additional Scottish Government funding made available which brought the total allocation to £709,728.

8.2 Director of Public Health Report 2017-19 (166/2019)

The interim Directors of Public Health (joint), Dr Joy Tomlinson and Mrs Lynne McNiven, presented the Director of Public Health Report 2017-19 and explained that this was the first report since the publication of Scotland’s national Public Health Priorities in 2018.

Dr Tomlinson advised that the report set out the six key Public Health Priorities agreed nationally to seek a step-change improvement in population health and reduction in health inequalities, alongside key information that will track progress for NHSAA in coming years. The core Public Health activities such as data and

intelligence, Health Protection and Healthcare Public Health are aligned to the priorities and demonstrate the breadth of work within the department.

Board Members were advised that the new national body, Public Health Scotland, would be established in April 2020 and it would have a key role in delivering the priorities and supporting change at a local level. Dr Tomlinson advised that the report would be used as a vehicle to engage with local authorities about the local approach to embed the priorities. The local Community Planning Partnerships would have a central role building on existing successful initiatives and ensuring that the priorities have a local focus. Mrs McNiven advised that the NHS Board will play a key role in supporting action on early intervention and prevention across the six priority areas and Directors were encouraged to provide feedback and input.

Board Members discussed the six Public Health Priorities and members reiterated the importance of adopting a collaborative approach working with the Health and Social Care Partnerships and wider stakeholders. Members were encouraged that national priorities closely aligned to the Caring for Ayrshire programme and local priorities. Members found the report's format and data provided helpful and informative.

Outcome: Board Members noted the Director of Public Health Report 2017-19 and endorsed the Public Health Department's contribution to taking this work forward with partners.

Board Members looked forward to discussing the Public Health Priorities in more detail at a Board workshop scheduled to take place in early 2020.

8.3 South Ayrshire Health and Social Care Partnership Integration (167/2019) Scheme review

The Director of Health and Social Care for South Ayrshire, Mr Tim Eltringham, provided an update on work being taken forward to review the South Ayrshire Health and Social Care Partnership (SAHSCP) Integration Scheme, in line with Scottish Government requirements. A report had been presented to Board Members in June 2019 noting the requirement for a review and outlining arrangements for the review exercise.

Mr Eltringham advised that a Strategic Review Oversight Group had been set up to progress the review and considerable engagement had taken place involving a range of stakeholders. He explained that while SAHSCP had fulfilled the requirement to review the Integration Scheme, there were two key areas still being considered relating to financial arrangements and whether Social Work services for Children and Young People and Justice Social Work services should no longer be delegated to the Integration Joint Board as part of the Integration Scheme, and these areas may require further action and consultation in due course.

The Chief Executive gave assurance to Board Members that he and Mr Eltringham were in regular dialogue with Scottish Government to ensure Board was meeting legislative requirements. The Chief Executive emphasised that any discussion in regard to financial arrangements would have to be whole system involving all HSCPs and should any changes require to be made within the scheme, there was a need to

consider how EAHSCP and NAHSCP would be consulted. The Director of Health and Social Care for East Ayrshire advised that Board was working with Scottish Government to agree arrangements for IJB Directions which should be deliverable under the existing Integration Scheme.

Outcome: Board Members noted the review and progress to date. Board Members looked forward to receiving a final report at the NHS Board meeting on 30 March 2020.

8.4 Primary Care Improvement Plan

(168/2019)

The Director of Health and Social Care for East Ayrshire, Mr Eddie Fraser, introduced an assurance report on the progress of the Primary Care Improvement Plan (PCIP), Ambitious for Ayrshire. Phase one of the PCIP had been endorsed by the NHS Board and IJBs in early 2018. Mr Fraser invited the Strategic Programme Manager for Primary Care Transformation, Mrs Vicki Campbell, and the Associate Medical Director for Primary Care, Dr John Freestone, to outline the next phase of the PCIP.

Mrs Campbell described the Once for Ayrshire, co-production approach being adopted to progress this complex plan, which closely aligned to Board's Caring for Ayrshire programme. Mrs Campbell highlighted the governance framework in place to support delivery of the plan and the progress of the workstreams set up to take forward the six priority areas within the General Medical Services contract 2018. Mrs Campbell highlighted the positive comments and feedback received from patients and GP practices during the implementation of the plan. Areas of workforce and financial risk were highlighted throughout the plan and a summary of risks provided with mitigating actions.

Dr Freestone reiterated that this was a complex plan which involved substantial change and required staff to work differently. He emphasised that engagement with staff, including independent contractors, was key in progressing the plan. Dr Freestone and the Chief Executive had been engaging with independent contractor groups which were also actively looking to develop a vision for working differently in future to ensure sustainable service delivery, drawing on the model adopted by the GP Sub Committee. Mr Fraser emphasised that delivery of healthcare services in the community was an integral part of the PCIP and the Caring for Ayrshire programme.

Board Members discussed progress to date to implement the PCIP. Members were very encouraged by the level of engagement from GP practices and the GP Sub Committee. The Nurse Director, Prof Hazel Borland, commended work to implement the Primary Care Nursing Service and develop a range of positive opportunities and innovations to promote resilience within GP practices. The HR Director, Ms Patricia Leiser, was impressed at the plan's clear vision and the engagement undertaken to determine future workforce needs and actions required to achieve the required skills mix to deliver multidisciplinary team working. Mr Fraser gave assurance, in response to a question from the Employee Director on duty transfer, that some of the tasks currently undertaken by staff currently employed by GP practices would transfer to the HSCPs and some practice staff would transfer to the NHS Board.

Outcome: Board Members received assurance on progress to date to deliver the Primary Care Improvement Plan. Board Members noted the continued pan-Ayrshire collaboration to develop the updated Plan 2020-22 and agreed the implementation programme in respect of NHS services. Board Members noted that Integration Joint Boards will develop Directions for implementation in due course.

9. Performance

9.1 Performance Report

(169/2019)

Mrs Kirsti Dickson provided an update on Board's performance based on key measures of Unscheduled and Planned Care. Following feedback received from the Performance Governance Committee, the reporting format had changed to provide greater focus and assurance in relation to mitigating actions being taken to improve key areas of performance.

Mrs Dickson provided a report on Unscheduled Care performance. As previously reported, Emergency Department (ED) presentations continued to grow at both UHC and UHA. UHC had achieved the ED four hour waiting time target in September 2019, however, performance in October 2019 had dropped to 89% and non-validated data for November 2019 indicated a similar level. The number of patients waiting more than 12 hours in ED at UHC had reduced significantly. The four hour waiting time target at UHA remained below 95% with performance dropping to 77% in October 2019 and non-validated data for November 2019 indicated a similar position. The number of NHS Ayrshire & Arran patients delayed in their discharge from hospital for longer than two weeks for non-clinical reasons had decreased slightly to 89 in August 2019 and in November 2019 this had reduced to 86. Mrs Dickson highlighted actions being taken to mitigate the Unscheduled Care challenges being faced.

The Nurse Director, Prof Hazel Borland, gave assurance that staff across Ayrshire were working extremely hard to keep patients safe and ensure they were being treated in the right place as quickly as possible, in spite of the system challenges and pressures being faced. The Director of Health and Social Care for South Ayrshire, Mr Tim Eltringham, advised in response to a question from a Board Member, that SAHSCP was experiencing very significant demand for care home placements which had all been fully utilised. He explained that a relatively small resource had been made available through the Winter Plan to fund additional care at home services.

The Chief Executive reiterated that teams were working very hard to provide safe patient care, however, it was important to recognise the challenges facing the system. The Chief Executive provided assurance to Members that he had commissioned whole system leadership groups in the South and North/East to focus on Unscheduled Care and what could be done differently to reform service delivery and improve patient flow and provide the best possible care to the citizens of Ayrshire.

The Employee Director, Mr Ewing Hope, expressed concern that staff already working under significant pressure were being asked to work additional hours to

deliver winter planning arrangements. Board Members recognised the very hard work being done by staff in spite of the pressures being faced.

Mrs Dickson provided a report on Planned Care performance and advised that service access data was broadly similar to the report provided to Board Members in October 2019. Mrs Dickson highlighted key areas of challenge for Board relating to inpatient and day cases for Trauma and Orthopaedics, General Surgery and staffing gaps in key areas and the resulting impact on performance. Compliance against the 18 week RTT target for CAMHS remained below 90% but had increased from 69.5% in August 2019 to 82.3% in September 2019. An improvement plan had previously been put in place to address service challenges and this was beginning to show positive results. Mrs Dickson reported that Psychological Therapies waiting times continued to remain below the 90% target. An improvement plan was in place and progress was being made to maintain and improve performance. Mrs Dickson reported that compliance against the 62 day cancer waiting time target had improved in recent months due to the improvement interventions put in place.

Board Members discussed Planned Care performance. The Chief Executive explained, in response to a question from a Board Member, that all Scottish Boards were required to write to advise patients of their legal right to receive treatment within 12 weeks. However, the national process did not allow Boards to update the lettering system should a patient choose to delay their treatment beyond 12 weeks. The Chief Executive advised that this had previously been discussed at national level and he would take the issue forward out with the Board meeting.

Outcome: Board Members noted performance across NHS Ayrshire & Arran based on key measures of Unscheduled and Planned Care. Board Members took assurance on the focused approach being adopted by the NHS Board to address system challenges and deliver safe, high quality patient care.

9.2 Financial Management Report

(170/2019)

The Director of Finance, Mr Derek Lindsay, presented the Financial Management Report for the seven months ended 31 October 2019. NHS Ayrshire & Arran's Annual Plan had a deficit of £14.75 million and the overspend for the year so far was £11.2 million. The overspend for month seven was £1.3 million which was lower than the average monthly run rate of £1.65 million due to benefits brought in through reserves.

Mr Lindsay advised that £23.1 million of interventions and efficiencies were planned for the year with achievement to date of £9.15 million and forecast achievement of £16.4 million. Mr Lindsay emphasised that in order to achieve the planned deficit NHS Ayrshire & Arran must deliver against the £23.1 million transformation and efficiency plan or find alternative funding sources to substitute for savings shortfall.

Board Members were advised that the main drivers for the cumulative overspend were Acute Services operational pressures, delayed discharges and additional staffing to meet activity demands; Cash Releasing Efficiency Savings planned but not delivered and Non Pay budgets. There were overspends in NAHSCP and SAHSCP mainly driven by Primary Care Prescribing.

Mr Lindsay advised that a mid-year review and outturn projection report had been provided to PGC on 5 November outlining proposed actions to mitigate the £5 million unplanned overspend and the Committee had considered and approved several funding options which were included in the reserves outturn along with two other proposals to address the remaining gap. Should all of these funding options be delivered, NHS Ayrshire & Arran would have a reasonable prospect of achieving the required £14.75 million deficit outturn. The PGC Vice Chair, Mr Michael Breen, gave assurance that the Committee had a detailed discussion on the challenges and risks facing NHS Ayrshire & Arran and the mitigating actions being taken at operational level to deliver the planned deficit.

Outcome: Board Members noted the Board’s financial position for the year to date and supported the actions being taken to deliver the planned £14.75 million deficit. Board Members noted the adverse impact caused by delayed discharges and the positive impact in the month caused by non-recurring benefits.

9.3 South Ayrshire Health and Social Care Partnership Annual Performance Report (171/2019)

The Director of Health and Social Care for South Ayrshire, Mr Tim Eltringham, presented the SAHSCP Annual Performance Report 2018-19 which was approved by SAIJB on 9 October 2019, in line with the national regulations and guidance. The report presented performance information which measured progress against delivery of the National Health and Wellbeing Outcomes as well as the Children’s and Justice Outcomes.

Mr Eltringham highlighted that 2018-19 had been a difficult year for the Partnership in terms of financial challenges caused by increasing demand for services for older people because of demographic pressures and a significant case review which had led to considerable managerial and professional challenges.

Mr Eltringham gave assurance that the Partnership had made steady progress in taking forward transformation work to provide better outcomes for individuals and improve overall efficiency. He highlighted the improvement activity focused on Older People’s services, delayed discharges and the positive work being done within Children’s services to reduce the number of children in care, the opening of supported accommodation for young people in Girvan and Ayr and transformation work within Learning Disability and Mental Health services.

Outcome: Board Members considered and noted the South Ayrshire Health and Social Care Partnership Annual Performance Report 2018-19.

9.4 North Ayrshire Health and Social Care Partnership Children’s Services Planning Annual Report 2017-19 (172/2019)

The Director of Health and Social Care for North Ayrshire, Mr Stephen Brown, presented the NAHSCP Children’s Services Annual Planning Report 2017-19. The report outlined key achievements contained within North Ayrshire Children’s Services Plan, “Getting It Right For You”, Annual Report 2017-19. Due to timings,

the report covered the reporting periods 2017-18 and 2018-19. The 2016-17 report was published in October 2018.

Mr Brown highlighted key achievements during the reporting period, including the significant progress and activities undertaken to support young people's mental health and prevent suicide, following a number of tragic suicides among under-18s over the past two years. Mr Brown explained that CAMHS had committed to prioritise seeing young people with low mood expressing suicidal thoughts which had impacted on the management of routine referrals but the number of urgent referrals was now beginning to reduce. There were schools counsellors in all North Ayrshire high schools and a targeted approach was being adopted to promote mental health and wellbeing in Primary Schools working in partnership with parents.

Mr Brown reported that since the last Annual Report was published, the Community Planning Partnership had introduced a range of initiatives to address overweight and obesity in young people and this successful work had led to significant year-on-year reductions in obesity levels. He advised that through the whole system approach to Active Communities, North Ayrshire and NHS Ayrshire & Arran had been selected as an "Early Adopter" site for the new Public Health priority relating to diet and healthy weight.

Outcome: Board Members noted and supported the contents of the "Getting It Right For You", North Ayrshire Children's Services Plan Report 2017-19.

10. For information

10.1 Board briefing (173/2019)

Board Members noted the content of the briefing and were encouraged by the good work being done by staff across Ayrshire and Arran.

10.2 East Ayrshire Integration Joint Board (174/2019)

Board Members noted the draft minute of the meeting held on 9 October 2019.

10.3 North Ayrshire Integration Joint Board (175/2019)

Board Members noted the approved minute of the meeting held on 26 September and the draft minute of the meeting held on 24 October 2019.

10.4 South Ayrshire Integration Joint Board (176/2019)

Board Members noted the approved minute of the meeting held on 9 October and the draft minute of the meeting held on 6 November 2019.

11. Any Other Competent Business (177/2019)

The Nurse Director, Prof Hazel Borland, reported that there had recently been a small outbreak of Influenza (Flu) at Station 8, University Hospital Ayr and this had been declared over and the ward reopened on 30 November 2019. Prof Borland advised that there were seven confirmed patient cases and five staff cases and a third patient had unfortunately died on 1 December and a fourth was in a critical

condition as a result of the Flu outbreak. Prof Borland confirmed that daily reports were being sent to Health Protection Scotland and Scottish Government during the outbreak to give assurance that all necessary actions were being taken and the risk template updated. Prof Borland gave assurance to Board Members that the organisation had a strong focus on encouraging staff to receive the Flu vaccine and she clarified that the vaccination programme began in early October each year. Board Members were advised that there had also been an outbreak of Flu in a care home in September 2019.

Outcome: Board Members noted the update.

12. Date of Next Meeting

The next meeting of the NHS Ayrshire and Arran Board will take place at 9.15 am on Monday 3 February 2020, Rooms 2A-C, Education Centre, University Hospital Crosshouse

Members of the public and media were asked to leave the meeting to allow the Ayrshire and Arran NHS Board to consider matters of a confidential nature in a Private meeting of the Board.