



Ayrshire and Arran NHS Board
Minutes of a public meeting on Monday 30 January 2023
Hybrid meeting – Room 1, Eglinton House and MS Teams

- Present:
- Non-Executive Members:
 Mrs Jean Ford, Interim Vice Chair (in the Chair)
 Mrs Margaret Anderson
 Cllr Marie Burns
 Mr Adrian Carragher
 Ms Sheila Cowan – attended part of meeting
 Dr Sukhomoy Das
 Miss Christie Fisher
 Mr Ewing Hope
 Cllr Lee Lyons
 Mr Marc Mazzucco
 Cllr Douglas Reid – attended part of meeting
- Executive Members:
 Ms Claire Burden (Chief Executive)
 Mr Derek Lindsay (Director of Finance)
 Dr Crawford McGuffie (Medical Director/Deputy Chief Executive)
 Mrs Lynne McNiven (Director of Public Health)
 Ms Jennifer Wilson (Nurse Director)
- In attendance:
- Ms Caroline Cameron (Director of Health and Social Care, North Ayrshire)
 Mrs Kirstin Dickson (Director for Transformation and Sustainability)
 Mr Tim Eltringham (Director of Health and Social Care, South Ayrshire)
 Mr Darren Fullarton (Associate Nurse Director, Lead Nurse, North Ayrshire Health and Social Care Partnership) item 6.4
 Mr Derek Gemmell (Assistant Director, Digital Services) item 9.2
 Ms Sarah Leslie (Human Resources Director)
 Ms Seonaid Lewis (Engagement Manager) item 9.1
 Mrs Shona McCulloch (Head of Corporate Governance)
 Ms Karen Parker (Volunteer Manager) item 6.1
- Mrs Angela O'Mahony (Committee Secretary) minutes

The Interim Vice Chair, Mrs Jean Ford, welcomed everyone to the meeting and advised that in the absence of the Board Chair and Vice Chair she would be chairing the meeting.

1. Apologies

Apologies were noted from Mrs Lesley Bowie, Mr Bob Martin, Ms Linda Semple, Mrs Vicki Campbell, Mrs Joanne Edwards, Ms Nicola Graham and Mr Craig McArthur.

2. Declaration of interests (001/2023)

There were no declarations noted.

3. Minute of the meeting of the NHS Board held on 28 November 2022 (002/2023)

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

4. Matters arising (003/2023)

Paper 2 - Action Log

The Board action log was circulated to Board Members in advance of the meeting and all progress against actions was noted. There was one action in progress from the Board meeting on 28 November 2022 related to the Harbourside, Irvine property being declared surplus to NHS Ayrshire & Arran's (NHSAA) requirements and an update will be provided at a future meeting.

5. Chief Executive and Board Chair report

5.1 Chief Executive's report (004/2023)

- The Chief Executive thanked system partners and colleagues for their support during this period of escalation. The Board had moved to a command and control structure on 16 December 2022 and this rhythm and pace had continued throughout January 2023. The Board continued to work closely with the Health and Social Care Partnerships (HSCPs) to support patient journeys across the system. Community colleagues in Primary and Urgent care had wrapped extended services around members of the public and new ways of working had been developed with the Scottish Ambulance Service and community care in recovering Acute services.
- The Board had issued a press release on 27 January 2023 about the pause in elective activity and how this has been carefully managed to minimise the impact on patients. During the three week pause, nine patients had unfortunately had to have their complex emergency surgery rescheduled and this would take place as soon as possible. The Chief Executive thanked colleagues for the work done during this period to minimise the impact of COVID-19, Flu and other winter pressures. The position has improved and whole system work will continue moving into February.
- The Interim Vice Chair recognised and thanked the Chief Executive and wider team for the work being done to minimise the impact of the significant whole system pressures being faced.

5.2 Board Chair's report (005/2023)

In the absence of the Board Chair there was nothing to report.

6. Quality

6.1 Patient story

(006/2023)

The Nurse Director, Mrs Jennifer Wilson, introduced the patient story and invited Ms Karen Parker, staff member, to present.

Karen shared her experience of living with a chronic health condition. The story illustrated the journey Karen faced prior to successful treatment and how much impact it could have on a patient's life.

Board Members discussed the patient story and were encouraged to hear of the holistic, person centred approach adopted by the entire healthcare team in providing Karen's treatment in spite of the challenges and service pressures faced, and that this had been a positive experience for Karen.

The Chief Executive explained in reply to a comment from a Member that the Board considered a range of patient stories, some of which were positive and others highlighted areas where things had not gone so well, to identify learning and improvement.

Ms Wilson advised that Karen's positive experience and good wishes would be shared with the team involved.

Outcome: Board Members noted the patient story highlighting the importance of the right treatment for patients with chronic health conditions.

6.2 Patient experience Q2 report

(007/2023)

The Nurse Director, Ms Jennifer Wilson, presented the Q2 report on feedback and complaints activity and compliance with the complaint handling process. A version of the report was discussed in detail at the Healthcare Governance Committee (HGC) meeting on 9 January 2023.

Ms Wilson highlighted that there had been a slight rise in Stage 1 complaints, with the majority related to waiting times. There had been a slight rise in Stage 2 complaints compared to the last quarter. The position will continue to be monitored.

Stage 1 complaint handling performance had dropped significantly. Following detailed interrogation, an issue had been identified related to the prison complaint handling process and the team will work with prison staff to support focused improvement work. Stage 2 performance was largely consistent with the previous quarter. There had been an increase in the number of out of time complaints over 20 days in Acute services awaiting response due to system pressures.

Ms Wilson reassured Members that the Complaints team was in regular contact with complainants and supporting clinical staff to complete statements.

There had been a slight rise in Scottish Public Services Ombudsman (SPSO) referrals and while investigations had not risen, they may do so in the future. The position will be discussed with appropriate teams and through the HGC.

Complaint themes were similar to previous quarters, focusing on clinical treatment, communication and waiting times. Positively, Care Opinion feedback showed that compliance against the 72 hour target remains good at 92%. Board Members acknowledged the positive complainant feedback on complaint handling.

Ms Wilson explained in response to a query from a Board Member that the complaint sub theme on communication/telephone related to the availability of people to answer the phone on a ward, which could be due to service pressures. Ms Wilson confirmed that a deep dive report would be provided on communication, including data on the number of complaints upheld or not upheld, and a similar approach adopted for future themed reports to Healthcare Governance Committee.

The Interim Vice Chair, Mrs Jean Ford, reiterated that the report had been discussed in detail at the HGC meeting on 9 January 2023 and it had been confirmed that the Complaints team had focused improvement plans to address the complaints backlog when current system pressures reduce. Board Members thanked the team for the good work they continue to do in challenging circumstances.

Outcome: Board Members received the patient experience Quarter 2 report.

6.3 Healthcare Associated Infection (HCAI) report (008/2023)

The Nurse Director, Ms Jennifer Wilson, provided the current position against the national HCAI Standards and an update on three incidents that occurred between September and October 2022 and the subsequent management. A version of the report was scrutinised at the HGC meeting on 9 January 2023.

For Clostridium difficile infection (CDI) there had been a rise in the rate for April to June 2022, following the unexplained sharp decline in cases in the previous quarter, with the rate returning to the previous level. Unfortunately, the Board had received an exception report from Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland and an action plan had been submitted. The report described the range of improvement work and in-depth analysis of CDI cases to improve performance. There were no CDI cases linked to outbreaks.

There had been an increase in Staphylococcus aureus Bacteraemia (SAB) cases compared to the previous quarter and the report provided detailed analysis. The Infection Prevention and Control Team (IPCT) continued to carry out enhanced surveillance following the national protocol, with meetings each month to discuss findings with Microbiology. In addition, there were plans for Microbiology to re-start review of all cases at ward level which would provide rich data for improvement.

The verified rate for Escherichia coli bacteraemia (ECB) was showing consistent reduction, which is possible as a result of the range of improvement activity taking place. The Board had received an exception report for community acquired ECB rates. Ms Wilson explained that there are no healthcare interventions that can be applied to reduce community rates and work is taking place with Public Health colleagues to support reduction of those rates.

Ms Wilson reported that while COVID-19 outbreaks had previously begun to reduce, there had been an increase in the number of COVID positive patients across Acute and in the community. There had been 104 outbreaks between April and November 2022 compared to 39 in the previous year. A Director level oversight group had

continued to meet throughout the pandemic to support infection control decisions, balancing pressures at the front door and across the wider system with the need for good infection prevention and control practice.

Hand hygiene audits carried out between April and June 2022, including individual and ward routine monitoring, showed compliance consistently above 90%. COVID-19 continued to impact on staffing resource within Domestic Services, in particular, carrying out terminal cleaning in clinical areas on a more regular basis.

Board Members received an update on a small number of decontamination incidents that occurred between September and October 2022 and the subsequent management. A Problem Assessment Group had been set up and all learning progressed within the areas affected and across the system. The Interim Vice Chair advised that these incidents had been discussed in detail at the HGC meeting on 9 January 2023 and members had been reassured by the robust process for analysis and to progress learning identified.

Outcome: Board Members discussed and were assured of current activity to manage HCAI across NHS Ayrshire & Arran.

6.4 Quality and Safety Report – Mental Health (009/2023)

The Director of North Ayrshire Health and Social Care Partnership (NA HSCP), Ms Caroline Cameron, introduced the report and invited Mr Darren Fullarton, Associate Nurse Director and Lead Nurse, NA HSCP to present. A version of the report was discussed in detail at HGC on 9 January 2023.

Mr Fullarton provided an overview report on Scottish Patient Safety Programme (SPSP) Mental Health Collaborate (MHC) and Excellence in Care (EiC) progress locally, current status and plans going forward in relation to core measures.

For MHC, the report provided information related to rates of incidents of physical violence, restraint and self-harm. Mr Fullarton advised that Healthcare Improvement Scotland (HIS) had provided a data measure workbook to allow Boards to consistently record and report on core measures. It is anticipated that by March 2023 the Board will be recording all core measures in the workbook.

For EiC, the report provided information related to falls, falls with harm and pressure ulcers. Data on core measures is collected on the QI portal and a monthly report reviewed by QI Facilitators, with any exception and improvement work approved through the clinical governance framework.

The report outlined measures and focuses in taking forward improvement activity within Mental Health services and to increase QI capacity.

Mr Fullarton highlighted revised guidance on improving observation practice, with a more proactive, responsive and personalised care and treatment framework for acutely unwell people in Mental Health care. In addition, HIS facilitated discussion was taking place with NHS Boards to explore the operational definition of seclusion within Mental Health.

The Chief Executive thanked colleagues for this detailed report and the quality improvement work being done particularly given the considerable system pressures and growing demand within Mental Health services.

Outcome: Board Members received an overview report of quality improvement activity in Mental Health services

7. Corporate Governance

7.1 Internal auditor appointment (010/2023)

The Director of Finance, Mr Derek Lindsay, provided an update on the internal auditor appointment. At the Board meeting on 28 November 2022 Members had agreed a derogation to the Board standing orders to delegate authority to the Audit and Risk Committee (ARC) to make the decision regarding the appointment of the internal auditor.

Mr Lindsay advised that following a joint tendering process undertaken with NHS Greater Glasgow & Clyde, the National Waiting Times Centre Board and NHS 24, involving Mrs Jean Ford as ARC Chair, a recommendation had been made virtually to ARC members to seek their approval to support the award. However, from a procurement perspective, the appointment process remains in a standstill period and the outcome cannot yet be shared. The new appointment will be included in the draft Internal Audit Plan 2023-2024 which will be presented to the Board on 28 March 2023 for approval.

Outcome: Board Members noted the update on the Internal Auditor appointment.

7.1 Corporate Calendar 2023-2024 (011/2023)

The Head of Corporate Governance, Mrs Shona McCulloch, presented the Corporate Calendar 2023-2024 to give assurance that Board Committees have established dates for 2023-2024. Members received assurance that a robust process had been followed in setting meeting dates to ensure no clashes and align with risk reporting arrangements.

Mrs McCulloch highlighted that since the report was circulated there had been some updates for IJBs which will be included in the final version to be sent to Members.

Outcome: Board Members received the Corporate Calendar and were assured that Board Committees have established dates for 2023-2024.

7.2 Healthcare Governance Committee Minutes (012/2023)

The Committee Vice Chair, Mr Adrian Carragher, provided a report on key areas of focus and scrutiny at the meeting on 9 January 2023. The Vice Chair presented the minute of the meeting held on 7 November 2022.

Outcome: Board Members considered and noted the minute and update.

7.3 Performance Governance Committee

(013/2023)

In the absence of the Committee Chair and Vice Chair, Mr Marc Mazzucco provided a report on key areas of focus and scrutiny at the meeting on 19 January 2023. The minute of the meeting held on 3 November 2022 was also presented.

Outcome: Board Members considered and noted the minute and update.

8. Performance

8.1 Performance Report

(014/2023)

The Director for Transformation and Sustainability, Mrs Kirstin Dickson, provided an update and assurance on the management and provision of unscheduled and planned care for the period up to December 2022 where available.

Mrs Dickson provided a detailed report on key performance and outcomes related to unscheduled and planned care as outlined in the Assessment Summary at section 2.3 of the report. The report described ongoing actions and mitigations underway for each target to improve system performance.

Unscheduled care:

- Emergency Department (ED) attendances – while numbers had not increased to pre-pandemic levels, there were ongoing challenges, with compliance levels subject to variation. The latest published national data indicated that similar challenges were being experienced across Scotland and NHSAA's compliance was above the national average. Locally, 12 hour breaches in December 2022 had shown a slight improvement compared to October 2022 when they had reached their highest level.
- Average length of hospital stay data across core wards at both acute sites had steadily increased since June 2022, with University Hospital Crosshouse showing its highest level in December 2022.
- Based on Public Health Scotland published data, the number of delayed discharges and transfers of care reached 246 in November 2022, with occupied bed days due to delayed discharge reaching their highest level in December 2022.

Planned Care:

- The number of new patients waiting for a new outpatient appointment had reached a peak in September 2022 and work has been ongoing to reduce numbers.
- In relation to the target to eliminate long waits over 18 months for patients by the end of December 2022, the number of patients waiting over 18 months for the week commencing 2 January 2023 was 1,927, with 11 specialties reporting zero waits.
- The total waiting list for inpatient and day cases had increased for the first time since May 2022. The Scottish Government wait target for inpatient day cases was for no patient to wait over two years by the end of September 2022. At the end of September 2022, 347 patients were waiting over 104 weeks, this had since reduced further to 250 in the week commencing 30 December 2022.

- There continued to be service pressures within MSK services and compliance in December 2022 had reduced to its lowest position since June 2020 at 33% against the 90% target.
- Diagnostics – there had been an increase in the total number of patients waiting for a CT scan and MRI scan. Despite the increase, compliance levels for Imaging reached 80% in November 2022. The waiting list for Endoscopy showed a further rise at December 2022 after a period of reduction to pre-pandemic levels from January to September 2022.
- Performance against the 62-day Cancer target had reduced slightly, with performance of 82.1% in November 2022. Performance against the 31 day Cancer treatment standard continued to exceed the target, with 100% compliance achieved in November 2022.
- Child and Adolescent Mental Health Services (CAMHS) performance remains challenged. Unverified data suggests the position has improved significantly in December 2022 and verified data will be available in the next report.
- Psychological Therapies had exceeded the 90% standard for the first time since May 2022, with levels of 91% at November 2022.
- Drug and Alcohol treatment services continue to exceed the target with 98.5% performance in November 2022.

Mrs Dickson advised that the report included a statement on the current system pressures due to respiratory viruses, including COVID-19, as well as other traditional winter viruses, increased GP attendances and hospital activity and the impact on inpatient services. More generally, staff absence across the health and care system impacted on capacity to deliver services across the system.

Board Members discussed the report and recognised the impact of current system pressures on the Board's performance. While the position remains challenging, members were encouraged by the progress being made in some areas. The Chief Executive reiterated her thanks to colleagues and partners across the system for the work being done and reassured Members that the Board would continue with this whole system work to achieve the best performance and outcomes possible.

Outcome: Board Members received an update and assurance on the management and provision of unscheduled and planned care.

8.2 Financial Management Report for Month 9 (015/2023)

The Director of Finance, Mr Derek Lindsay, presented a report on the Board's financial position at Month 9 to 31 December 2022. The Month 8 report had been discussed in detail at the Performance Governance Committee meeting on 19 January 2023.

The Board's Revenue Plan for 2022-2023 was a deficit of £26.4 million. The position after nine months was an overspend of £21.9 million, a higher run rate than previously projected. The Scottish Government had asked the Board to do everything possible to deliver the planned £26.4 million deficit budget. Mr Lindsay projected that the overspend was likely to be around £30 million.

Mr Lindsay reported that at Month 9 there was an Acute services overspend of £11.7 million which showed a deteriorating position. As detailed in the report, the main drivers for the overspend were pay, medicines and unallocated cash releasing

efficiency savings. The pay overspend mainly related to nursing and medical workforce. This was due to significant workforce pressures and registrant gaps which had led to increased agency spend, as well as workforce to cover additional beds that had to be opened. Agency nurse spend was on an upward trajectory and had already exceeded the full year spend in 2021-2022. While there are plans to reduce nursing and medical workforce agency spend, this will require the additional beds opened to be reduced.

Mr Lindsay highlighted the £13.4 million overspend against the New Medicines Fund (NMF). As discussed previously with Board Members, the budget had been adjusted to be equivalent to funding expected to be received from the Scottish Government. Separately, GP prescribing costs had increased substantially over the year due to a significant increase in the cost of Primary Care medicines and this had driven an expected £5 million Primary Care prescribing overspend.

Appendix 5 of the report provided a quarterly update on the Capital budget and spend.

The Chief Executive emphasised that there were constant challenges in relation to workforce due to system pressures and the inability to reduce the 150 additional Acute care beds opened over the year to support COVID-19, and the impact of outbreaks, with areas closed and access removed during the outbreak. Flu outbreaks made the position even more complex. The Chief Executive explained that workforce challenges were inextricably linked to length of hospital stay which was longer in NHSAA compared to other Board areas. Members received assurance that the Board is working very hard with system partners to reduce additional bed numbers where possible and ensure that care is being delivered in the right place.

Outcome: Board Members noted the Board's financial position at Month 9.

8.3 North Ayrshire Children's Services Plan (NA CSP) 2020-2023 (016/2023) Progress Report 2021-2022

The Director of North Ayrshire Health and Social Care Partnership, Ms Caroline Cameron, presented the annual performance report on the NA CSP. The report provided assurance on progress against the five key priority areas to achieve the vision for children and young people to have the best start in life and for NA to be the best place in Scotland to grow up.

Ms Cameron highlighted successful work that has taken place in the following areas:

- £250,000 allocation to Digital Families Fund to provide access to devices and connectivity for online learning and activities.
- Positive Steps with Partners, a structured development programme for individuals developed by The Ayrshire Community Trust in partnership with the Scottish Fire and Rescue Service Community Action Team. The programme helps people develop skills and gain practical work experience.
- Rosemount Project supports families and young people to remain together and in their communities.
- Money Matters delivered £17.5 million in financial gains for residents receiving welfare in 2021-2022.

- Community Mental Health and Wellbeing Fund directed resources to support mental health and wellbeing needs in NA.
- Health and Social Care Service Access Team has been instrumental in developing a pathway for children who have made a significant attempt at suicide requiring intervention, who are not open to other social work services.
- Delivery of full universal health visitor pathway during pandemic despite increasing caseload, patient vulnerability and staff challenges related to COVID-19.

A new CSP covering the period 2023-2026 is currently in development and will be presented to the IJB in early 2023.

The Chief Executive acknowledged this important report, thanked the team involved for the positive work being done against a complex backdrop and looked forward to further progress in 2023.

Outcome: Board Members endorsed the report and supported its publication on respective partner agency websites.

9. Decision/Approval

9.1 Systemic Anti-Cancer Therapy (SACT) Service Review Engagement (017/2023) Consultation plan

The Director of Finance, Mr Derek Lindsay, presented the report which outlined changes made to the Board's SACT delivery during the initial pandemic response and the proposal to now consider making these changes a permanent model of service delivery.

Board Members were advised that significant engagement had taken place with Healthcare Improvement Scotland - Community Engagement (HIS-CE) team which had advised that these interim service changes met the general threshold for major service change and therefore would require a three month public consultation period (and, ultimately, Ministerial approval) if they are to be considered as a permanent service model.

The Medical Director and Deputy Chief Executive, Dr Crawford McGuffie, advised from a clinical perspective that the Kyle Unit was flourishing and very popular with staff, patients and families. The unit had recently been visited by the Chief Medical Officer and Deputy Chief Medical Officer who were impressed by this positive development and the impact on patients and staff. The Director for Transformation and Sustainability, Mrs Kirstin Dickson, reiterated that the consultation exercise built on the significant engagement that had already taken place with service users and staff during the interim period of change. Positive feedback had been received and this work had been commended by HIS.

The Interim Vice Chair commended this good example of positive change being made as a result of a temporary service change in response to the COVID-19 pandemic and welcomed plans to further extend the consultation process to allow a permanent service model.

Outcome: Board Members acknowledged the major service change directive and approved the proposed consultation plan and approach.

9.2 NHS Ayrshire & Arran Digital Strategy 2023-2025

(018/2023)

The Assistant Director for Digital Services, Mr Derek Gemmell, presented the draft NHSAA Digital Services Strategy 2023-2025 for approval. In developing the strategy, a number of papers had been discussed at Corporate Management Team meetings, a Board Workshop on 3 October 2022 and the Infrastructure Programme Board on 25 October 2022.

Board Members received an update on the background to development of the strategy, its ambitions and associated investment levels to improve the use of technology and data for the benefit of patients and staff. Detailed funding plans will be provided in the Revenue and Capital Plan to be presented to the Board on 28 March 2023 for approval.

Mr Gemmell advised that work had been taking place over the last year, working with a third party supplier, to review the Board's digital approach in the use of technology, systems and underlying infrastructure. This had highlighted the need to take a more strategic approach to digital and along with an initial reform plan currently being implemented, to produce a new strategy to take forward NHSAA's digital ambitions which will be critical to deliver the Board's Caring for Ayrshire strategic vision.

The report outlined key areas of work currently underway including to upgrade the Trakcare Patient Management System; review the local and wider area network infrastructure; and review data centres and develop the Board's cloud strategy. Infrastructure remediation work has also taken place.

In response to a query from a Board Member, Mr Gemmell gave assurance that Digital services are working closely with GPs and other Primary Care Contractors to progress information sharing models, including Electronic Patient Record and Clinical Portal (CP) access. While there have been some technical, IT security and information governance issues related to CP access, these have now been overcome and work is moving forward.

Board Members discussed this important strategy and emphasised the need for resilient and sustainable digital services to enable the Board's CFA ambition, innovation and modernisation and support clinical staff to maximise efficiency in delivering their role on behalf of patients. This was particularly important given the current challenges and pressures across the healthcare system. The Nurse Director and Medical Director reassured members that clinical staff strongly support the strategy to deliver necessary change.

Mr Gemmell confirmed in response to a query from a Member that the Board's strategy aligned with the NHS Scotland Digital Strategy. NHSAA had been working closely with National Shared Services and NHS Education for Scotland in developing the strategy, including plans to use the national platform to host some clinical systems. In addition, work had been taking place with regional West of Scotland colleagues, with every effort being made to pool financial and specialist resources.

The Interim Vice Chair explained that Board Members were being asked to approve the strategy and detailed funding plans would be provided through the Revenue Plan for 2023 – 2024.

Outcome: Board Members approved the NHSAA Digital Strategy 2023-2025.

9.3 Corporate Governance – member responsibilities (019/2023)

The Head of Corporate Governance, Mrs Shona McCulloch, presented proposals for nominees for re-appointment to East Ayrshire and South Integration Joint Board.

Mrs McCulloch reassured Members that the Board Chair is considering vacancies that will arise when the Vice Chair, Mr Bob Martin, comes to the end of his term on 30 April 2023 and detailed proposals will be presented at a future Board meeting for approval.

Outcome: Board Members approved the nominees for re-appointment to Integration Joint Boards.

10. For information

10.1 Board briefing (020/2023)

Board Members noted the content of the briefing.

10.2 East Ayrshire Integration Joint Board (021/2023)

Board Members noted the minute of the meeting held on 19 October 2022.

10.3 North Ayrshire Integration Joint Board (022/2023)

Board Members noted the minute of the meeting held on 17 November 2022.

10.4 South Ayrshire Integration Joint Board (023/2023)

Board Members noted the minute of the meeting held on 16 November 2022.

11. Any Other Competent Business (024/2023)

12. Date of Next Meeting

The next public meeting of the NHS Ayrshire & Arran Board will take place at 9.30 am on Tuesday 28 March 2023 at 9.30am.