

Orkney NHS Board

Minute of virtual meeting of **Finance and Performance Committee of Orkney NHS Board**
held on **Thursday, 23 July 2020 at 9:30**

Present: Davie Campbell, Non-Executive Director (Chair)
Mark Doyle, Interim Director of Finance
Caroline Evans, Non-Executive Director
Meghan McEwen, Board Chair

In Attendance: Christina Bichan, Chief Quality Officer
Julie Colquhoun, Head of Corporate Services (for item 506)
Christy Drever, Committee Support
Eddie Graham, Resilience Officer (for items 507-509)
Fiona MacKellar, Employee Director
Louise Wilson, Director of Public Health
Samantha Wishart, PA to Director of Public Health (observing)

499 Apologies

Apologies were noted from Michael Dickson, David McArthur, Marthinus Roos, Sally Shaw, Keren Somerville and James Stockan.

The Chair advised that he and the Committee Support would liaise with the Chief Officer in order to arrange a delegate to attend each meeting of the committee.

500 Declarations of Interests – agenda items

No declarations of interest were raised with regard to agenda items.

501 Minutes of Meeting held on 17 June 2020

The minute of the meeting held on 17 June 2020 was accepted as an accurate record of the meeting and was approved, with no amendments noted.

502 Matters Arising

335 – Near Me Update

The Chair enquired if there had been any progress surrounding the uptake of Near Me and was advised that there had been an article promoting the successful uptake of the service within the local newspaper. There had also been discussion with third sector colleagues and further engagement with GP colleagues as a priority. Further work to tie in remobilisation and the use of Near Me as much as possible was also in process with NHS Grampian. A formal update report would be taken to the next meeting of the Committee.

337 – Technology Enabled Care Strategy

The Head of Corporate Services advised that she was awaiting confirmation from finance colleagues regarding the capital allocation available. The Board Chair raised concerns re the risks associated and was assured that these risks were on the risk register which would be attached to the final strategy once all allocations were confirmed. The strategy

would be brought back to the Committee once prepared and was hoped to be ready for the next meeting.

338 – Community Electronic Patient Record (EPR)

The Board Chair advised that the Interim Chief Executive and Head of Digital Transformation and IT had been discussing this topic, and an update would be circulated to the Committee.

503 **Action Log**

The action log was reviewed and updated as required.

Performance Management

504 **Workforce Report - FPC2021-19**

The Head of Corporate Services presented the Workforce Report highlighting that sickness absence had reduced slightly, in line with the annual average, however bank, overtime and excess hours associated with the COVID-19 response continue.

As the workforce report had not been brought to the committee for some time, the report received was an initial draft and clarity was sought as to what information members would like to be included in future to allow effective scrutiny and assurance. It was agreed that it would be beneficial for the committee to receive:

- Vacancy and recruitment statistics, including the average time taken to recruit and any reasons for delays
- Comparisons with other Boards
- Corrective and reactive measures taken to control costs
- Succession planning

The Interim Director of Finance stressed that without detailed numbers, it was difficult to take assurance from the report. Members agreed that the figures given within the report were only a snapshot and it was important to provide workforce related costs in detail.

The Head of Corporate Services advised that in future it was hoped to be able to show links between statistics, for instance an increase in bank usage in relation to overtime costs, sickness absence and vacancies. She also suggested that it was important to look at the wider process of recruitment, and possibly filling posts differently, including through development opportunities.

Members agreed that it was important to know what good performance in this area looks like, in order to know if it was being achieved and how to work towards it in future.

The Chair praised the feedback from members and agreed that the Head of Corporate Services would circulate a draft report virtually to allow members to comment, with a follow up report brought to the September meeting.

Decision/Conclusion

Members noted the update and look forward to receiving an updated report at the next meeting.

505 **Integrated Emergency Management Training 12th & 13th February 2020 - FPC2021-20**

The Resilience Officer brought the update to the Committee advising that the Integrated Emergency Management Training had taken place on 12-13 February 2020 at The Balfour on a multi-agency basis to reduce the abstraction time for managers and was delivered by external facilitators from ScoRDS. It was noted that only 3 NHS Orkney managers were able to attend the training on the chosen dates due to other commitments.

Decision/Conclusion

Members noted the update.

506 **41 Standards of Organisational Resilience – FPC2021-21**

The Resilience Officer presented the submission which was due to be returned by 31 July 2020. The submission had been brought to the Committee for noting and information, prior to sign off by the Chief Executive. He explained that it provided a framework to direct all resilience work within Boards.

Since the last submission, the Board had improved on 19 standards, with the remaining 22 staying at the same level. Members were informed that some standards were aspirational for a small Board, for instance the provision of a radiation monitoring unit, and this had been reported back to the Scottish Government. Members noted that in some cases, whilst the Board didn't have on island facilities, support was provided through the Service Level Agreement with NHS Grampian, for instance paediatric services.

It was noted that the submission was returned to us with feedback and specific areas where the Board should focus efforts to improve for the future.

The Director of Public Health thanked the Resilience Officer and all staff involved in resilience across NHS Orkney for their hard work. She stressed the importance of Boards working together to look for solutions, and the need to balance what we plan to achieve, with realistic resources and abilities.

The Resilience Officer stressed that standard 30 was level 1 due to a lack of capacity. He noted that the Director of Nursing, Midwifery, Allied Health Professionals and Acute Services was the only individual with specialist skills to handle ballistic and blast injuries, meaning that if there was a terrorist attack the Board would struggle with the response. Whilst NHS Orkney had high occurrences of firearm owner incidents, there was not the same level of exposure to ballistic incidents as other Boards. Due to staff capacity, the Board would be reliant on other Boards to assist in this area if required.

The Chief Quality Officer advised that she and B Wilson were currently updating the children's inspection report and that a piece of work was ongoing regarding the visiting service.

Decision/Conclusion

Members noted the submission.

Chairs Resilience Report 23/07/2020 – FPC2021-22

The Resilience Officer presented the report for noting, advising that the Resilience Group had not met due to the pandemic response. Key points included:

- Following on from the audit undertaken by Scott Moncrieff, The Business Continuity Management Policy had been formally approved. There were now approximately 58 Business Continuity Plans in place covering all the services.
- Major Incident Plan exercises had taken place throughout the year
- A Climate Change Risk Assessment (CCRA) & Adaption workshop took place at NHS Orkney on the 14th of February 2020. Work was now recommencing to complete the assessment tool version 2 This would be facilitated by NHS National Services Scotland utilising an excel based tool version 2.
- The Resilience Officer had been supporting the Boards Covid-19 response and had sat on the Gold and Silver Groups and set up the PPE and Supply Chain sub-group.
- There would be significant workstreams in the mass vaccination programme, sustaining the Covid-19 response for any potential second wave and planning for concurrent events such as pandemic flu and Brexit all of which had a resilience element.

Decision/Conclusion

Members noted the update.

Performance Management Report – FPC2021-23

The Chief Quality Officer presented the Performance Report which provided an update on performance with regards to the Local Delivery Plan standards. Key points highlighted were:

- Performance within the Emergency Department continued to be good, however numbers had not fully returned to normal.
- Services were gradually being reintroduced, however elective services were still very low compared to expected numbers for the time of year.
- Performance within delayed discharges remained good, however winter planning might see an increase in delays due to 14-day quarantine for patients.

The Board Chair suggested that the delayed discharges be separated in future, to show which were due to quarantine requirements. The Chief Quality Officer advised that she would look into a way of separating the data if possible.

The Chief Quality Officer stressed the importance of not allowing incorrect attendance to the Emergency Department to return. National communication was due out as part of the winter planning process to advise the public where to attend if required, and the Chief Quality Officer felt it would be beneficial to proactively promote this within Orkney.

Members were reassured that the 4 breaches had been investigated thoroughly, with the Director of Nursing, Midwifery, Allied Health Professionals and Acute Services maintaining oversight. If a patient breached by 8 hours this would be logged on Datix and would be discussed at the weekly incident review meeting to ensure learning was taken.

The Employee Director raised concerns that statistics of Hamnavoe House were not available, causing delays within wards and impacting upon delays in the Emergency Department.

Decision/Conclusion

Members noted the update and were assured of progress.

Financial Management and Control

509 Financial Performance Management Report – FPC2021-24

The Interim Director of Finance delivered the Financial Performance Management Report advising that:

- There had been a reported overspend of £502k for the 3 months to 30 June 2020
- Various assumptions had been made including:
 - Funding for the year to date and ongoing mobilisation costs would be met in full by the Scottish Government, this includes underachievement of efficiency savings targets as set out in the Board's Annual Operating Plans of £5.5m for 2020-21 and estimated loss of income in the year of £634k.
 - Waiting Times Initiatives funding would be received to match costs for the year.
 - Prescribing costs would reduce from the current high unit cost and activity would level out so the overspent position at month 3 was brought back in line with budget at year end.
 - There was an underspend on travel expenditure for patients to attend appointments off island. It was assumed activity would increase over the remainder of the year.
 - At this point, the year to date COVID-19 costs for the mobilisation plans were still being refined and whilst the position highlighted above would not change as a result, the year to date expenditure and budgets would be amended to reflect full mobilisation costs. This was to allow full Quarter 1 costs to be reported to the Scottish Government on 14th August 2020.
 - It was anticipated that per the Annual Operating Plans, the £750k Capital Allocation returned to the SG in 2019-20 would be reinstated in 2020-21.
- The Board was reflecting a breakeven position at year end if these assumptions were met.

The Board Chair queried how the service redesign work was progressing, raising that Quality Impact Assessments and Risk Assessments should be undertaken before any plans were implemented. The Medical Director and Director of Nursing, Midwifery, Allied Health Professionals and Acute Services were progressing this, and a report was hoped to be brought to the next meeting.

The Chair queried the need for the Value and Sustainability Delivery Group to be reinstated, however members agreed that a different strategy was required to make significant savings, and that all staff should be fully engaged in any service redesign and savings discussions. The Employee Director raised concerns surrounding the removal of locum staff, as it would be difficult to provide some services to the same standard without them.

The Chief Quality Officer highlighted that during the period of remobilisation, it would be a good opportunity to review services and build on what we want them to look like in future. She advised that a joint development session had been arranged for the Area Partnership Forum and Area Clinical Forum, to allow staff to input into this review. She also noted that off island travel for appointments would hopefully be reduced in future with the use of Near Me facilities.

Decisions/Conclusion

Members noted the update and were assured of progress.

510 Covid-19 – Local Mobilisation Plan Weekly Finance Return – FPC2021-25

The Interim Director of Finance delivered the Covid-19 – Local Mobilisation Plan update, highlighting:

- The anticipated additional COVID 19 Health Board costs of £5.6m for 2020-21
- The anticipated Health and Social Care Partnership COVID 19 costs of £2.4m for 2020-21
- The anticipated Health Board under achievement savings for 2020-21 of £3.8m
- The anticipated Health and Social Care Partnership Board under achievement savings for 2020-21 of £1.2m
- The term Health and Social Care Partnership, which had been used throughout the mobilisation planning process, was synonymous to the Integration Joint Board.
- Mobilisation costs as a percentage of the NHS Orkney revenue budget was 25%, however the average for Boards was 9%, meaning we were an outlier.

The Interim Director of Finance raised concerns that the mobilisation and remobilisation costs would not be fully met by the Scottish Government allocation.

Members stressed the need to understand how NHS Orkney had become a significant outlier in mobilisation costs compared to other Boards. The Interim Director of Finance had begun work to investigate this.

The Interim Director of Finance stressed the need for service redesigns in line with the clinical strategy and achieving financial balance.

Members queried whether staff who had been recruited in March 2020 as part of the pandemic response, were still working with the Board. The Chief Quality Officer raised that staff might have been taking a different approach to charging to the COVID-19 budget, for instance bank hours and overtime. The Employee Director suggested that the need to bring in locum and agency staff had highlighted the lack of resilience within our substantive staff.

The Director of Public Health highlighted the need to manage the Boards risk appetite to ensure resources were invested in key critical services whilst also investing in new services and managing overspends to guide the Board forwards.

The Employee Director raised concerns re winter sickness absence levels due to coughs and colds whilst staff await testing for COVID-19.

Decisions/Conclusion

Members noted the update and were assured of progress.

511 Capital Plan 2020-21 – FPC2021-26

The Interim Director of Finance presented the report highlighting that:

- The Scottish Government was to provide NHS Orkney £0.978k Capital Resource

Limit, which would allow the Board to direct resources into priority areas, predominantly Estates, IT and Medical Equipment.

The Interim Director of Finance added that since the date of writing the report, the sale of a property in Hoy was accepted and was hoped to be concluded as soon as possible. He advised that any funds from the sale which were over the market value would go into NHS Orkney and the decision on how to use these funds would be taken to the Board.

Decisions/Conclusion

Members noted the update and were assured of progress

Governance

512 Issues raised from Governance Committees / Cross Committee Assurance

No issues had been raised.

513 Agree key items to be brought to Board or other Governance Committees attention

Board

- Workforce Report
- 41 Standards of Organisational Resilience
- Financial Performance Management Report
- Covid-19 – Local Mobilisation Plan Weekly Finance Return

514 Any Other Competent Business

The Chair raised that now that the Committee was back to the planned meeting schedule, all papers should be submitted inline with set deadlines. No late papers would be accepted unless under exceptional circumstances. All papers would now be ratified by the Interim Director of Finance before distribution.

Items for information and noting only

515 Schedule of Meetings

Members noted that the next meeting would be held virtually at 9.30am on 24 September 2020.

516 Record of attendance

Members noted the record of attendance.

517 Committee Evaluation

The Chair praised the level of scrutiny and discussion surrounding items especially the workforce, resilience, and integrated emergency management reports.

The meeting closed at 11:30