

## Orkney NHS Board

Minute of virtual meeting of **Finance and Performance Committee of Orkney NHS Board** held on **Thursday, 26 May 2022 at 9:30**

**Present:** Davie Campbell, Non-Executive Director (Chair)  
Des Creasey (Vice Chair)  
Mark Doyle, Director of Finance  
Steven Johnston, Non-Executive Director

**In Attendance:** Louise Anderson, Waiting Times Coordinator (for Item F97)  
Eddie Graham, Resilience Officer (for Items F95 and F96)  
Alison Hardie, Committee Support  
Pat Robinson, Chief Finance Officer, IJB  
Carrie Somerville, Programme Manager FSO  
Keren Somerville, Head of Finance  
Louise Wilson, Director of Public Health

### F01 **Apologies**

Apologies were noted from Christina Bichan, Stephen Brown, Michael Dickson, Mark Henry and Mary Moore.

### F02 **Declarations of Interests - agenda items**

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

### F03 **Minutes of Meeting held on 24 March 2022**

The Minute of the meeting held on 24 March 2022 was accepted as an accurate record of the meeting and was approved.

### F04 **Matters Arising**

#### **F80 - NHS Orkney Climate Change Agenda - FPC2122-32**

*Post meeting note: DL2021(38) was shared at the Sustainability Group and progress against each element to be mapped to support workplan for the group which will include promoting sustainable care. Pharmacy and realistic medicine lead included in the group to support the clinical agenda. Sustainability newsletter planned for May to raise awareness across organisation.*

S Johnston queried how to induce commitment across the range of professions, determine appropriate scrutiny, and considered it was important that clinical staff lead the way, managing any clinical issues simultaneously.

The Chair confirmed the matter will be raised at the next NHSO Board meeting to discuss the route for effective ongoing engagement.

### F05 **Action Log**

The Chair requested an update on Item 14 21/22 at the next scheduled meeting, 28 July 2022.

### **Performance Management**

#### **F06 Integrated Emergency Planning Update - summary - FPC2223-01**

The Resilience Officer highlighted the key points:

- Training was being revived nationally
- Details on how to access and log on to Integrated Emergency Management (IEM) training had been circulated to EMT members
- IEM training must be taken by senior managers (Three On-call Managers attended ScoRDS Modular Training two years ago)
- IEM Training was modular, allowing managers to accommodate the training within their work schedule
- Training was not mandatory and did not form part of the competences on Turas

The Director of Public Health recognised the need for training but suggested in the event of a major incident(s), there would be members of staff in attendance who had undertaken the training.

#### **Decision/Conclusion**

Members noted the update.

#### **F07 Resilience Planning Group Chair's Report - FPC2223-02**

The Resilience Officer attended to present the Chair's Report, and provided an overview of the Resilience Group's work:

- Business Continuity Plans had been re-circulated as part of the annual review, returns were being received
- CBRN Plan was being re-formatted to a modular plan, designed to allow individuals to navigate directly to their specific function within the organisation. A training element to be included
- Porters had received familiarisation training in the event of a hospital lockdown
- On-site visit by the Council Terrorism Security Advisers expected, to review overall security and the new Lockdown Plan

The Director of Public Health thanked the Resilience Officer for his good work whilst employed in the role, and the Chair relayed his thanks and remarked E Graham had been a constant and efficient member of the Committee.

#### **Decision/Conclusion**

Members reviewed the report and noted the update.

#### **F08 Performance Management Report - FPC2223-03**

Deputising for the Head of Assurance and Improvement, the Waiting Times Coordinator highlighted the key points from the report:

- 95% performance against the 4-hour Emergency Department standard
- Treatment Time Guarantee (TTG) - all appointed, with delays at

Golden Jubilee Hospital

- 80% against 62-day Cancer standard due to no response from Cancer Waiting Times Audit
- Mental Health determined breaches in data quality
- 36% cancelled operations by patients due to illness, Covid and/or unavailability. Operations cancelled by the Balfour due to staff shortage and/or beds
- Diagnostics; routines longer due to staff shortage, particularly Radiology
- Delayed discharges due to social care reasons
- New report - progressing, being reformatted for ease of readability

The Vice Chair acknowledged the quantitative and qualitative data and queried if there was potential for incremental change to address noted challenges i.e. outpatient waits, access to the pain management service. The Waiting Times Coordinator confirmed the pain management service relied on a visiting clinician from NHS Shetland, and added that said clinician would be retiring.

S Johnston stated that the A+E target being met did not reflect bed availability or delayed discharges data, although recognised that NHSO performed better than the Scottish average.

Members noted real concern with figures being published on NHSO website i.e. 56-week wait for Speech and Language Therapy yet lengthy wait times were not being discussed. Particular consideration was given to the clinical implications of delayed access to cancer treatments, rheumatology clinics, noting early intervention can have a significant impact on prognosis. The Chair noted that exposure at this Committee focussed on areas dictated by the Scottish Government and confirmed 'performance data and particular areas of concern' would be itemised on the Joint Clinical and Care Governance Committee agenda.

The Chair queried if an assessment of reliant services i.e. the Vanguard Mobile Theatre, Golden Jubilee Hospital, NHS Grampian had been carried out and shared with relevant persons. The Director of Public Health confirmed no formal options appraisal had been executed, and noted Planning meetings discussed capacity and gaps, Scottish government concentrated on the Golden Jubilee Hospital and elective centres, and suggested people were aware of the service options available to each of the Health Boards.

Members queried how data is tracked and evaluated, asked if any issues had been identified when tracking external data, the usage of unpublished data, and if the information presented within this report is fit for purpose. It was agreed that work would be carried out by Committee members, relevant colleagues and clinicians to bring focus to this report, look at emerging issues and less reliance on external sources.

### **Decision/Conclusion**

Members noted the update.

### **Financial Management and Control**

F09

### **Financial Performance Report - FPC2223-04**

The Director of Finance outlined the organisation was monitored against three financial targets; Revenue Resource Limit (RRL), Capital Resource Limit and Cash

target.

An underspend of £71k on the Core RRL was reported, £120k due to vacancies, and Capital Resource Allocation had a break-even outturn for 2021-22.

Overspend of £526k had occurred in Pharmacy services, mainly attributable to high cost drugs dispensed in NHS Grampian. Recognising this occurrence, Scottish Government provided funding for 2022-23. Estates and Facilities had an overspend of £587k due to inflationary pressures, £100k on Garden House, Staffing and Supplies.

Covid spend for the year was £6.682m, £2.894 relates to Health Board spend with £2.769 reserves for the Health and Social Care Partnership (HSCP). The HSCP had not reported £406k of staff costs for 2022-23 to the Scottish Government and it was considered this would have a significant impact on the Board, reduce the reserves and the COVID funding available for 2022-23.

The Director of Public Health asked if the costs incurred were across a number of departments. The Chief Finance Officer, IJB confirmed £406k was COVID related staffing costs within Social Care, Home Care and Children's Services, and staffing costs had increased considerably i.e. Homecare from £601 to £901 per week. The error occurred due to coding issues i.e. COVID Cost Centre not being selected. An investigation would be carried out, and it was confirmed that contact had been made with Stuart Wilson at the Scottish Government to discuss the additional allocation.

Unachieved savings of £4.5m was reported; £2.7m and HSCP £1.8m. £11m received from Scottish Government to deliver against the RRL. All Health Boards received this funding.

The Chair asked if there would be a delay in getting accounts signed off due to the £406k HSCP unaccounted monies. The Director of Finance confirmed the revised accounts will return to this Committee, circulated before next meeting if appropriate, presented to Audit and Risk Committee and Board on 23 June 2022.

### **Decision/Conclusion**

Members reviewed the report and were assured on performance.

#### **F10 Financial Recovery Plan Update - FPC2223-05**

The Director of Finance noted the work by the FSO to date, savings for 2022-23 had been identified, £4.9m detailed in the report:

- £800k through the implementation of the Vacancy Panel
- Potential savings to be made with a Sustainable Medical Model in place
- Efficiencies and achieved savings of £942k; £561k (28%) recurring, £381k (13%) non-recurring

Other savings had been identified and would be tracked through the FSO.

The organisation, through the FSO, could deliver £6.9m savings, but this would not guarantee the return to financial balance without the cooperation of the directorates across the organisation. The Finance team were working with the directorates to deliver a balanced position on savings. Attendance at the Area Clinical Forum had

been productive for both the FSO team and Forum members.

It was noted that Financial Flexibility (support costs, transport) would now be introduced to bids to the Scottish Government.

The Vice Chair remarked that the plan was a good piece of work and asked if the Scottish Government was assured. The Director of Finance confirmed that assurance had been given through regular communications and a report would be submitted late July 2022.

The Director of Finance commented that he was reasonably comfortable delivering 52% of the non-recurring savings with the cooperation of directorates and the workstreams being set up, and would be providing regular updates to the SMT, EMT and the Board.

Two Project Officers will be joining the Programme Manager and Project Manager to complete the FSO Team.

The Director of Public Health asked if the risk of winter pressures had been considered, the unpredictable elements, the demands of cold, flu. The Director of Finance responded that if operational directorates continue to overspend there would be an impact on the bottom line.

The Chair queried the impact when dealing with third parties i.e. SLAs, NHS Grampian. The Director of Finance confirmed that he had looked at the travel budget with a view to delivering more services within NHS Orkney. The Chair suggested other areas to look at; medical model areas, issues with recruiting.

The Programme Manager FSO confirmed a Rapid Improvement Forum was being set up; weekly meetings scheduled, drop-in sessions, requests for suggestions on savings - quick and low risk, potential to be delivered within 90 days, and support from the Board expected to encourage staff and team participation.

The Chair confirmed the current position to be raised at the NHSO Board meeting.

### **Decision/Conclusion**

Members reviewed and noted the update.

### **Governance**

#### **F11 Standing Financial Instructions - FPC2223-06**

The Director of Finance noted the instructions were part of the Code of Corporate Governance and recommended no changes at this time.

### **Decision/Conclusion**

Members noted the update.

#### **F12 Banking Arrangements - FPC2223-07**

The Director of Finance provided an update.

Added to the Mandate

- Medical Director, Mark Henry
- Senior Financial Accountant, Suzanne Gray

Removed from Mandate

- Principal Accountant Financial Services, Karina Alexander

### **Decision/Conclusion**

Members reviewed and approved the update.

#### **F13 Agree key items to be brought to the board or other Governance Committees attention**

Members agreed that the following items should be raised to the Board via the Chair's Report:

- NHS Orkney Climate Change Agenda 'Post meeting note' - the route for effective ongoing engagement
- Financial Recovery Plan - current position

Members agreed that the following item should be raised to the Joint Clinical and Care Governance Committee:

- Performance Management Report - performance data and particular areas of concern

#### **F14 Any Other Competent Business**

- The Chair to update the Committee on the replacement for the Non Executive Director, James Stockan

### **Items for information and noting only**

#### **F15 Schedule of Meetings**

Members noted that the next meeting would be held virtually at 9:30 on Thursday, 28 July 2022.

#### **F16 Record of attendance**

Members noted the record of attendance.

*The meeting closed at 10.49*