

Orkney NHS Board

Minute of meeting of **Finance and Performance Committee** of **Orkney NHS Board** held on **Thursday, 25 May 2023 at 9:30 via MS Teams**

Present:

Des Creasey, Non-Executive Board Member (Chair)
 Steven Heddle, Non-Executive Board Member (Vice Chair)
 Mark Doyle, Director of Finance
 Meghan McEwen, Board Chair
 Steven Johnston, Non-Executive Board Member
 Laura Skaife-Knight, Chief Executive

In Attendance:

Freddie Pretorius, Committee Support
 Carrie Somerville, Planning, Performance and Risk Manager
 Keren Somerville, Head of Finance (Deputy)
 Peter Thomas, Chief Finance Officer
 Sam Thomas, Director of Nursing

F1 Apologies

Apologies were noted from Mark Henry and Stephen Brown.

F2 Declarations of Interests - agenda items

No declarations of interest were raised regarding agenda items.

F3 Minute of the Meeting held on 23 March 2023

The Minute of the meeting held on 23 March 2023 were accepted as accurate records of the meeting and approved.

F4 Matters Arising

There were no matters arising

F5 Action Log

There were no actions for review on the action log.

F6 Integrated Emergency Planning Update – FPC2324-01

The resilience officer presented a report that highlighted the following areas:

- Annual reviews of Business Continuity Plans had been delayed assistance would be provided to ensure completion
- The Junior Doctors' ballot on industrial action had resulted in a clear mandate for a 72-hour strike. However, discussions between the BMA and the Scottish Government could prevent the strike if meaningful negotiations continued. A Joint Industrial Action Group had been formed to monitor the situation.

- The likelihood of a National Power Outage (NPO) remained high, as confirmed by the assessment. A national exercise called 'Ex Mighty Oak' tested the response of the UK and Scottish governments. A local tabletop exercise focused on Orkney's preparedness. Although Orkney was considered relatively resilient due to local power sources, wider supply issues could still pose significant problems beyond local control.

Decision/Conclusion

Members noted the update and requested a further report from the Resilience Officer, on due and overdue business continuity plans including training compliance, along with a review of on call arrangements ahead of the winter period.

Performance Management

F7 Performance Report – FPC2324-02

The Planning Performance and Risk Manager presented the report and highlighting:

Waiting Times

Capacity challenges affected the overall performance of the 18 Weeks Referral to Treatment. Reviews had been initiated to address pain management and clinical service level agreements.

The Cancer Waiting Times met the 31 Day performance standard but fell short of the 62 Day standard due to access issues through SLA arrangements. Discussions were ongoing with the National Elective Coordination Unit for admin validation of waiting lists.

CAMHS Reporting

The Community Mental Health Team (CMHT) had completed and submitted aggregate returns for CAMHS reporting. The Health Intelligence Team assisted in correcting historical errors and patient pathways to enable the returns to be submitted. Training for administrative staff was necessary to ensure prompt and accurate updates in TrakCare. Work was ongoing to address Child, Adolescent, and Psychological Therapies National Dataset (CAPTND) for both CAMHS and Psychological Therapies to produce performance reports.

Dementia

The Board made progress in implementing strategic aims outlined in the Orkney Dementia Strategy 2020-2025. These aims included an innovative model for assessment and diagnosis, immediate access to post-diagnostic support, ongoing support for diagnosed individuals and their carers, and a single point of access for all dementia-related services.

An improvement plan had been submitted to improve operational performance, and ongoing monitoring. A holistic review led by the Medical Director was underway to understand waiting times, outpatient, and diagnostic services, and to establish a clear line of action. Clinical prioritisation, and findings from this work would be reported at the Senior Management Team and subsequently presented to the Finance & Performance Committee.

The Chief Executive reported that the executive team were reviewing complaints weekly to ensure awareness of ongoing issues, particularly in relation to the four-hour target. Triangulating the cost to the patient was part of the oversight of the improvement plan.

Timeliness was emphasised, ensuring the most up-to-date data in the packs, clear commentary, and actions, including benchmarking to provide context along with forward-looking trajectories should be included in the next report.

Decision/Conclusion

Members noted the update provided

The Medical Director would review all clinical SLAs with a specific notice to those relating to Cancer, while the Chief Executive would review non-clinical SLAs to gain a clearer understanding of these agreements.

The Chair agreed to ensure that the Chief Officer of the Integrated Joint Board and the Medical Director were available for the next meeting of the Finance and Performance Committee to present reports.

F8 Finance Performance Report - FPC2324-03

The Head of Finance presented the report informing the committee of the financial position for the period 1 April 2022 to 31 March 2023.

- At the end of March 2023, NHS Orkney reported a year end underspend of £0.052m against the Revenue Resource Limit
- An underspend of £0.052m is attributable to Health Board budgets, with a breakeven position attributable to the health budgets delegated to the Integrated Joint Board.
- The Board was on target to deliver against the three financial targets

The Chair emphasised that the overspend from agency staff and locums, required attention and improvement.

LSK and MM left the meeting at 10:28.

Decision/Conclusion:

Members reviewed the report, acknowledged the current financial position, and observed that for the year ending on March 31, 2023, there was an underspend of £0.052m in the Revenue and Resource Limit (RRL). The year-end narrative emphasises diligent financial management practices, resulting in efficient resource allocation and cost control measures.

F9 Financial Sustainability Office – FPC2324-04

The Planning, Performance and Risk Manager presented the report providing an update on the actions taken by the Financial Sustainability Office (FSO) to support the delivery of the financial recovery plan during 2022/23 and beyond.

The FSO has successfully built strong relationships, made significant progress in various areas, recruited a skilled team, and would apply the knowledge gained to support the Financial Recovery Plan.

The Financial Recovery Plan had identified potential savings initiatives amounting to £4.9 million for 2022/23. The Board and Executive Management Team had approved these initiatives. Additionally, an investment of £110,000 had been approved for the Dialysis Unit, increasing the required savings to £5,016,000 for 2022/23.

The Director of Nursing noted the importance of reducing locum costs in all disciplines by recruiting to substantive positions.

Decision/Conclusion:

Members acknowledged the update, expressed confidence in the progress made, and recognised the need for further work. They also noted the potential consequences of non-delivery on subsequent years.

The Chief Executive requested the 23/24 FSO plan was included on the next Finance and Performance Committee agenda.

F10 Capital Plan 2023-24 – FPC2324-05

The Head of Finance presented the report setting out NHS Orkney capital plan for 2023-24. In 2022/23, the Head of Estates, Facilities, and NPD established the capital expenditure requirements for the organisation for the five-year period from 2023/24 to 2027/28. The report contained the proposed allocation for 2023/24,

These allocations reflect the Board's key priorities and ongoing replacement programs, which had been agreed in consultation with service leads.

The key priorities for the upcoming year include ongoing upgrades and maintenance of the estate, investments in IT equipment such as servers and security systems, and the procurement of essential medical equipment like theatre tables and resuscitation devices. Additionally, £120k has been assigned for the partial redevelopment of King Street, pending planning permission.

At present, the surplus estate, known as the Old Balfour Hospital, was not actively marketed for sale.

NHS Orkney had received a grant of £3.9m from the Scottish Government for decarbonisation efforts within the estate. This funding will be utilised to renovate twelve healthcare buildings, replacing existing fossil fuel heating systems with renewable energy systems. A program board has been established to oversee the project.

There had been concerns raised about the allocation of funds and alignment with priorities. The Director of Finance noted the need for clarity and a clear direction regarding the allocation of funds.

It was noted that the paper for approval by the Board, should explicitly mention that the proposed capital plan had been discussed and approved by the Senior

Management Team (SMT) and also include the areas that would not be invested in. Additionally, the capital spend related to primary care estate should be included to present a comprehensive overview.

Decision/Conclusion

Members reviewed the report and recommended Board approval of the Capital Plan for the year 2023-24, subject to the above amendments

Assurance

F11 Performance and Audit Committee of the Integrated Joint Board Minutes:

Members had received the minute for review and noting.

Risk

F12 Risk Report – FPC2223-54

The Planning Performance and Risk Manager presented the report highlighting key areas of specific concern.

There were a total of six corporate risks and eight operational risks that were aligned with the Finance & Performance committee. During the previous reporting period, one risk related to the Health Visiting Team's efforts in identifying digital records and addressing outstanding issues had been reactivated.

Digital Records - For Health Visitors and School Nurses – Risk 349

Updates were being received through the TECB (Technology Enabled Care Board). However, it was noted that the TECB had not met recently, and this would be required for monitoring.

Decision/Conclusion

The Committee noted the updated risk report and took assurance the progress that was being made.

F13 Agree key items to be brought to the Board or other Governance Committees' attention

Board

- Annual Delivery Plan – this would be presented to the Senior Management Team on the 5 June 2023, prior to Board approval for submission to the Scottish Government ahead of the required deadline

F14 **Any Other Competent Business**

Monitoring of bank and overtime reporting

The Chair noted that it was crucial to closely monitor the process of bank and overtime reporting and the accuracy of reported figures to improve staff governance. A thorough understanding of this procedure is essential, and continuous oversight should be maintained to ensure transparency and reliability.

F15 **Items for information and noting only**

F16 **Schedule of Meetings**

Members noted the schedule of meetings for 2023/24

The meeting ended at 10:55