

LOTHIAN NHS BOARD

Minutes of the meeting of Lothian NHS Board held at 9.30am on Wednesday 07 December 2022 at The Royal College of Surgeons of Edinburgh, Nicolson St, Edinburgh, EH8 9DW.

Present:

Non-Executive Board Members: Mr J. Connaghan (Chair); Mr P. Murray (Vice-Chair); Ms N. Akta; Cllr S. Akhtar; Mr P. Allenby (from 10:15am); Prof. S. Chandran; Mr M. Connor; Mr J. Encombe; Mr A. Fleming; Ms E. Gordon; Mr G. Gordon; Miss F. Ireland; Cllr S. Jenkinson; Ms K. Kasper; Mr P. Knight; Mr A. McCann and Cllr D. Milligan.

Executive Board Members: Mr C. Campbell (Chief Executive); Miss T. Gillies (Executive Medical Director); Mr C. Marriott (Director of Finance) and Dr D. Milne (Director of Public Health and Health Policy).

In Attendance: Mr J. Crombie (Deputy Chief Executive); Mr C. Briggs (Director of Strategic Planning)(until 11:45am); Mrs J. Butler (Director of Human Resources and Organisational Development); Ms J. Campbell (Chief Officer, Acute Services); Dr J. Long (Director of Primary Care); Ms T. McKigen (REAS Services Director); Ms M. Barrow (Chief Officer, Midlothian IJB); Ms J. Proctor (Chief Officer, Edinburgh IJB); Ms F. Wilson (Chief Officer, East Lothian IJB); Mr D. Thompson (Board Secretary) and Mr C. Graham (Secretariat Manager, minutes).

Apologies for absence: Mr B. McQueen (Non-Executive Board Member); Ms T. A. Miller (Non-Executive Board Member); Ms V. de Souza (Non-Executive Board Member); Cllr H. Cartmill (Non-Executive Board Member); Ms A. MacDonald (Executive Nurse Director); Ms A. White (Chief Officer, West Lothian IJB) and Ms J. Mackay (Director of Communications and Public Engagement).

62. Declaration of Interests

- 62.1 The Chair reminded members that they should declare any financial and non-financial interests they had in the items of business for consideration, identifying the relevant agenda item and the nature of their interest. No interests were declared.

63. Chair's Introductory Comments

- 63.1 The Chair welcomed members, attendees, and observers to the Board meeting.

ITEMS FOR APPROVAL OR NOTING

64. Items proposed for Approval or Noting without further discussion

- 64.1 The Chair reminded those present that the Board agenda was made up of two separate sections. The first was the section for approval commonly referred to as "the consent agenda". The Chair reminded members that they had the opportunity to advise in advance if they wished any matter to be moved out of this section, for discussion. The Board noted that no such requests had been made.

- 64.2 Minutes of Previous Board Meeting held on 05 October 2022 – Minutes were approved, subject to two non-material amendments approved by the Chair:
- Addition of Ms N. Akta to those present.
 - Rewording of paragraph 50.11 to the following:
 - Vaccinations
50.11 The Director of Public Health and Health Policy confirmed that there was a lot of work ongoing to encourage staff to take up annual flu and COVID-19 booster vaccinations, including the establishment of staff drop-in clinics. The Director agreed to provide further information out with the meeting in response to a question from Mr Fleming about Monkeypox and the relevant control measures in place within Lothian.
- 64.3 Audit and Risk Committee Minutes – 22 August 2022 – Minutes were noted.
- 64.4 Healthcare Governance Committee Minutes – 27 September 2022 – Minutes were noted.
- 64.5 Finance and Resources Committee Minutes – 17 August 2022 – Minutes were noted.
- 64.6 Staff Governance Committee Minutes – 27 July 2022 – Minutes were noted.
- 64.7 Midlothian Integration Joint Board Minutes – 25 August & 15 September 2022 – Minutes were noted.
- 64.8 West Lothian Integration Joint Board Minutes – 20 September 2022 – Minutes were noted.
- 64.9 East Lothian Integration Joint Board Minutes – 15 September 2022 – Minutes were noted.
- 64.10 Edinburgh Integration Joint Board Minutes – 09 August & 27 September 2022 – Minutes were noted.
- 64.11 National Whistleblowing Standards - Quarter 2 (2022) Performance Report – Quarter 2 Performance Report for July-Sept 2022, was noted.
- 64.12 Drug Related Deaths Annual Report – The Board noted the continued increase in the number of drug related deaths in Lothian in 2021; noted the letter from the Minister of Drug Policy emphasising progress reporting on the Medication Assisted Treatment (MAT) Standards and noted the publication of the Scottish Drug Related Deaths Taskforce Report and its whole system approach. The Board also agreed that the Healthcare Governance Committee would receive future annual reports on drug related deaths with the Board receiving them after this for information.
- 64.13 NHS Lothian Strategy, Planning & Performance Committee Revised Terms of Reference – The revised Terms of Reference were approved, noting that these had been discussed and endorsed by the Planning, Performance and Development Committee on 16 November 2022.

- 64.14 NHS Lothian Finance and Resources Committee Revised Terms of Reference - The revised Terms of Reference were approved, noting that these had been discussed and endorsed by the Finance and Resources Committee on 26 October 2022.
- 64.15 NHS Lothian Staff Governance Committee Revised Terms of Reference – The revised Terms of Reference were approved, noting that these had been discussed and endorsed by the Staff Governance Committee on 12 October 2022.
- 64.16 Child Poverty Action Reports, East Lothian, Midlothian, and City of Edinburgh – The Board agreed to approve the Local Child Poverty Action Reports (LCPARs) for East Lothian (2020-22 and 2021-22), Edinburgh City (2021-22), and Midlothian (2021-22). The Board also delegated authority to the Director of Public Health and Health Policy to approve the four LCPARs on an annual basis, bringing a single, collated annual report to the Board each December.

ITEMS FOR DISCUSSION

65. Board Chair's Report – December 2022

65.1 Mr J. Encombe - valedictory comments

65.1.1 The Chair noted that this would be Mr Encombe's final Board meeting before stepping down from the Board from 01 February 2023. Mr Encombe had served as a Non-Executive Member of the Board since January 2021 and had been an active and valued member of both the Healthcare Governance Committee and the Midlothian IJB. Mr Encombe had also chaired the Organ Donation Sub-Committee and the Trustee Board of the NHS Lothian Charity, providing oversight and leadership in both these important areas.

65.1.2 On behalf of the Board the Chair offered thanks to Mr Encombe for his contribution to the work of the Board and wished him well for the future.

65.2 Reflections on the past year

65.2.1 The Chair wished to note the significant contribution of all NHS Lothian staff over what had been a challenging year. The Chair also acknowledged the continued positive leadership provided by executive and corporate directors in dealing with national challenges.

65.2.2 The continued dedication of staff had also been highlighted and acknowledged during the Board's "Celebrating Success" Awards Ceremony held in October.

65.3 Board Development Session 08 February 2023

65.3.1 The Chair informed Board members that the programme for the next Board Development Session was being developed through a sub-group, led by the Vice-Chair, and informed by a number of non-executive members. The focus would be on transformation and innovation.

66. Board Executive Team Report – December 2022

- 66.1 The Board noted the Board Executive Team report for December 2022. In response to questions from Board members, the following points were discussed and noted:

Impacts of potential industrial action

- 66.2 The Board noted that trade unions were required to provide advance notice of any areas targeted for action and to maintain the safe delivery of key and emergency health services. The Director of Human Resources and Organisational Development confirmed that resilience planning was well advanced.

- 66.3 The Chair reminded the Board that the document “Employers’ Planning Guidance for Industrial Action” had recently been circulated to non-executive members, for information.

CAMHS Performance

- 66.4 Recent improvements in CAMHS performance trajectories were acknowledged by the Board, following successful recruitment efforts. Further detail on this was available in the Board Performance Report.

- 66.5 The Services Director for REAS confirmed that the Board remained at Stage 3 of the Scottish Government’s Performance Escalation Framework for mental health waiting times. However, this position was under review with an outcome expected in February 2023. The announcement of financial allocations was also awaited.

- 66.6 The Board noted that recruitment for Psychological Therapies represented new staff, whilst efforts were being made to minimise any impacts that recruitment for CAMHS staff might have on other parts of the system.

Strategic Review of Analytics

- 66.7 The Board was informed that the Strategic Review of Analytics Report would be finalised and available in early 2023. This would be shared with Board members.

East Lothian Rehabilitation Service (ELRS) In-reach Project

- 66.8 The Chief Officer for East Lothian Integration Joint Board confirmed that the ELRS In-reach Project would be run through the winter. Data and outcomes would be shared across partnerships to promote shared learning about working with acute teams and understanding hospital site pathways.

Delayed Discharges Review

- 66.9 The Chief Officer for Edinburgh Integration Joint Board provided an update on the ongoing review of delayed discharges within Edinburgh City, led by Elma Murray Wallace. Good progress was being made, with any key recommendations adopted and implemented without undue delay. There was regular contact with the Scottish Government and an oversight board was in place. Immediate performance improvements included a 69% reduction in the number of people waiting in hospital for a package of care. Work was ongoing and winter challenges may impact the scale and sustainability of performance improvements.

Primary Care Provision South East Edinburgh

- 66.10 The Director of Primary Care confirmed that, following the agreement for six GP practices in South East Edinburgh to close their lists to new patients, discussions were being held with the Scottish Government and that relevant primary care infrastructure needs and priorities were being clearly communicated.

Lothian National Treatment Centre (NTC)

- 66.11 The Deputy Chief Executive confirmed there had been very positive engagement with Scottish Government officials and advisors on this project, during a recent site visit to St John's Hospital. Although the situation remained fluid, the progress achieved so far was in line with the project's expected development trajectory.
- 66.11 In response to continuing uncertainty about the role of NHS Assure and its emerging requirements, NHS Assure representatives had been invited to speak to the Board's Finance and Resources Committee at its next meeting on 21 December.

Group A Streptococcal activity (StrepA)

- 66.12 The Director of Public Health and Health Policy explained that work with UK colleagues was ongoing, and a watching brief was in place. The latest Public Health Scotland Protection Alert brief would be shared with Board members.

DM

67. Opportunity for committee chairs of IJB leads to highlight material items for awareness

67.1 Healthcare Governance Committee

Miss Ireland reported that the Committee had considered a paper on Acute Adult Services on 29 November and had specifically discussed the impacts of treatment delays and longer stays on patient outcomes. The Committee had accepted moderate assurance, overall, in relation to NHS Lothian's Acute Services.

67.2 Finance and Resources Committee

Mr McCann reported that the Committee had accepted limited assurance on the Board's ability to achieve a breakeven financial position in 2022/23, amongst wider and ongoing financial uncertainty. He noted also that the Committee had been assured about ongoing efforts to achieve the best possible outcome for the RIE in relation to negotiations with Consort.

68. NHS Lothian Mid-Year Review: 21 November 2022

- 68.1 The Chair introduced the report informing the Board of the outcome of the recent Mid-Year Review conducted by the Cabinet Secretary for Health and Social Care. He noted that this had been a positive engagement in which both recent successes and ongoing challenges had been discussed and recognised. He welcomed in particular the acknowledgement of improved performance in areas which currently remained on the Scottish Government's Performance Escalation

Framework, and he hoped to see the outcome of a review of this position in early 2023.

- 68.2 The Chief Executive shared his own reflections on the Mid-Year Review, noting that it had provided an opportunity to highlight again the specific issues impacting on NHS Lothian in regard to the National Resources Allocation Committee (NRAC) funding allocation formula. This had also been presented in the context that the significant majority of Scotland's projected population growth over the next 20 years was expected to occur within Lothian.
- 68.3 The Chief Executive had agreed to prepare and provide to the Cabinet Secretary's office an updated assessment of the Board's future capital investment needs and priorities, reflecting the need to serve an increasing population and respond to demographic change. The Board welcomed this opportunity to provide clarity on its future funding and capital needs and looked forward to seeing the report.
- 68.4 The Board reflected upon the Lothian Strategic Development Framework (LSDF) and its aim to support a whole system approach. The Director of Strategic Planning confirmed that the LSDF was sensitive to future demographic change, for example accounting for primary and community care needs over the next 10-15 years. He and the Director of Public Health & Health Policy had recently presented on this matter and the slides would be circulated to Board members for information.

CB/DM

- 68.5 The Mid-Year Review had also recognised and highlighted workforce challenges, prompting a question from the Board about whether improving the local training and development of staff would help to mitigate workforce attrition and improve retention? In response, it was reported that an apprenticeship nursing model in mental health had been piloted and was a highly popular route. The potential to replicate this for adult nursing was being explored but nursing intake numbers were tightly controlled by Scottish Government and access to apprenticeship funding was restricted. Volunteers were noted as another route of support but could never fully replace paid, trained staff.
- 68.6 The Board agreed to accept this report as a source of significant assurance that the Scottish Government had carried out a Mid-Year Review of Lothian NHS Board's performance.

69. NHS Lothian Board Performance Paper

- 69.1 The Deputy Chief Executive introduced the reformatted Board Performance Report, inviting the Board to discuss and review the current performance position and key metrics relevant to the Lothian Performance Recovery Programme, National Standards and Remobilisation Plans. In presenting the report, he highlighted that:
 - 69.1.1 There were examples of improved or sustained performance, despite extremely challenging situations.

- 69.1.2 The main restricting factors on performance continued to be sustained pressures within emergency departments, flow issues, high occupancy levels, continued prevalence of Covid within the population, and workforce challenges.
- 69.1.3 A weekly CMT Systems Pressures Group had been established to improve flow, minimise congestion at front doors and reduce high levels of occupancy. The option to convene “Gold Command” was reserved for significantly escalated situations.
- 69.1.4 CAMHS and Psychological Therapies waiting times had improved, as discussed earlier in the meeting. Good performance in screening and immunisation programmes was also highlighted.
- 69.1.5 In scheduled care, there had been positive performance in outpatient services, exceeding planned activity levels. There was a continued focus on reducing long waits, through optimisation of activity and service redesign, informed by engagement with the Centre for Sustainable Delivery.
- 69.1.6 Meeting TTG targets continued to present challenges, although access for urgent care and cancer care remained protected and resilient.
- 69.2 The Chair welcomed the layout of the Performance Report which highlighted areas of critical risk to the Board and offered clarity on related performance. He invited discussion and questions from Board members.
- 69.3 During discussions, the Board considered the following matters:
 - 69.3.1 Without precise timescales for achieving improvement, it could be challenging for Board members to identify quickly what interventions were most effective. However, it was acknowledged that there was significant management and clinical oversight in each area of performance.
 - 69.3.2 The reasons for TTG activity remaining at around 70% of pre-Covid levels were explored and acknowledged. Whilst Covid remained a contributing factor, workforce issues and increased demand from trauma and unscheduled care were particularly prevalent, with the impacts varying across different specialties.
 - 69.3.3 Balancing unscheduled and scheduled care demands was important, and evidence indicated that the ability to achieve this balance was best supported by ensuring protected space for scheduled and elective care, through the creation of National Treatment Centres (NTCs). The Board noted that, on this basis, the delivery of the planned Lothian NTC was critical to an effective recovery and protecting future services.
 - 69.3.4 The outlook for and impact of Flu over the winter period was challenging to determine but it was anticipated that it would bring significant pressure on children’s services as well as challenges for staff with young children.
- 69.8 The Board accepted the recommendations within the Performance Report, noted the metrics reported, recognised that further analysis and mitigation work would continue through governance channels, and that any specific pieces of work would be reported separately from the core performance report.

70. October 2022 Financial Position

- 70.1 The Director of Finance presented a paper updating the Board on its current financial position, the financial impact from Covid-19 and the Scottish Government's 2022/23 funding allocations.
- 70.2 The update covered the current financial position; inflation and property costs; the expected reduction and future removal of Covid funding; NHS pay settlement implications; the Board's sustainability and value programme; the balancing of the financial position against service delivery over winter; operational challenges; drug cost pressures and the target of achieving a break-even position at the end of the financial year without the requirement for any brokerage.
- 70.2 The Director of Finance also reminded the Board that the Scottish Government's 2023/24 budget position was expected to be announced on 15 December. Following this, funding for health and social care would be clearer and individual Board allocations for 2023/24 would be determined.
- 70.3 The Chair asked how key aspects of planning, including financial and workforce elements, would be incorporated, and reflected within the Board's Annual Delivery Plan (ADP) and the wider, multi-year LSDF. The Director for Strategic Planning confirmed that an update would come to the Strategy, Planning and Performance Committee in March 2023 with a final and fully integrated plan to be considered by the Board after that.
- 70.4 The Board reiterated the importance of achieving clarity on its budgetary position before the beginning of the 2023/24 financial year and on ensuring a joined up strategic and financial planning approach with integration partners. The projected gap in local authority funding requirements was acknowledged as a challenge and a potential restrictor for health and social care ambitions.
- 70.5 The Board noted that the previous Q2 year-end forecast had been maintained at a projected £19m overspend, as presented to the Finance and Resources Committee in October.
- 70.6 The Board agreed that its aim remained to achieve a breakeven financial position for NHS Lothian in 2022/23. However, it accepted that, at this stage and based on assumptions about additional funding, it was able to take only limited assurance on the ability to do so.

71. Corporate Risk Register

- 71.1 The Medical Director introduced the report reviewing NHS Lothian's Corporate Risk Register (CRR) and associated processes to ensure the CRR remains fit for purpose.
- 71.2 There was discussion on the Royal Edinburgh Hospital Bed Occupancy Risk discussed by CMT in November, that was now here for the Board to approve its addition to the CRR.

- 71.3 The Board also discussed the sustainability risk with GP registration and how a risk such as this would be differentiated in the CRR if it only applied to one area of the Lothians, as was the case. The Medical Director explained that the GP risk on the CRR related to the provision of GMS through independent practitioner services. The Chief Executive added that should actions taken by the Director of Primary of Care or by Health and Social Care partners be unable to prevent the risk becoming high or very high it would then be escalated on to the CRR, as part of the agreed system that was in place.
- 71.4 There was also discussion on the whole system acknowledgement, adoption and sharing of risks. The Board Secretary would arrange for a note to be prepared for Board members on arrangements for agreeing and managing shared risks.

DT

- 71.5 The Board reviewed the updates provided by the leads concerning risk mitigation, as set out in the assurance table in the appendix to the Report and agreed to approve the CMT's recommendation to accept onto the Corporate Risk Register the Royal Edinburgh Hospital Bed Occupancy Risk.

72. NHS Lothian Pharmaceutical Care Services Plan (PCSP) Update

- 72.1 The Director of Public Health and Health Policy updated the Board on progress and development of a work plan to support implementation of the recommendations within the Pharmaceutical Care Services Plan. The update focussed on three priority areas as discussed and agreed by the Board in December 2021.
- 72.2 The Board discussed the level of public awareness around the Pharmacy First initiative and how communication campaigns might be improved. It also considered issues around serial prescribing uptake; GP signposting; primary care improvement plans; and community pharmacy access to clinical records to help improve patient care.
- 72.3 The Board took particular note of the challenge it faced because of an inability to determine and commission community pharmacy provision based on population need. Instead, current Regulations required that all applications to establish a pharmacy service be considered by the Board on their own merits, through an inefficient and complex process. The need to reform the statutory Regulations had been highlighted to the Scottish Government and the Primary Care Team would continue to pursue this.
- 72.3 The Board recognised the progress made in delivering the recommendations of the current PCSP and that monitoring was in place through existing management arrangements and via an annual report to the Board. It was noted that an updated version of the PCSP would be presented to the Board for approval in December 2024.

73. Any Other Business

- 73.1 No other items of competent business were identified.

74. Reflections on the Meeting

74.1 Board members were invited to contact the Chair or the relevant Executive Director if they had further questions on any of the areas presented to the Board.

75. 2023 Board Meeting Dates

75.1 The Board meeting dates for 2023 were noted:

- 08 February 2023
- 05 April 2023
- 21 June 2023
- 23 August 2023
- 04 October 2023
- 06 December 2023

Chair's Signature

Date

Prof. John Connaghan CBE
Chair – Lothian NHS Board