

LOTHIAN NHS BOARD

Minutes of the meeting of Lothian NHS Board held at 10.30am on Wednesday 21 June 2023 in the Carrington Room, Inverleith Building, Western General Hospital, Edinburgh EH4 2LF.

Present:

Non-Executive Board Members: Prof. J. Connaghan (Chair); Cllr S. Akhtar; Ms N. Akta; Mr P. Allenby; Mr A. Cogan; Mr M. Connor; Mr A. Fleming; Ms E. Gordon; Mr G. Gordon; Ms F. Ireland; Cllr S. Jenkinson; Mr P. Knight; Mr A. McCann; Mr B. McQueen; and Ms V. de Souza.

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

In Attendance: Mr J. Crombie (Deputy Chief Executive); Mr C. Briggs (Director of Strategic Planning); Ms M. Carr (Chief Officer, Acute Services); Ms R. Kelly (Deputy Director of Human Resources); Ms J. Long (Director of Primary Care); Ms J. Mackay (Director of Communications and Public Engagement); Ms M. Barrow (Chief Officer, Midlothian IJB); Ms F. Wilson (Chief Officer, East Lothian IJB); Mr O. Campbell (Strategic Programme Manager, Maternal and Child Health); Mr M. Duff, Audit Scotland (Observer, Board's External Audit Team); Mr D. Thompson (Board Secretary) and Ms B. Pillath (Corporate Governance Team, minutes).

Apologies for absence: Cllr H. Cartmill (Non-Executive Board Member); Prof. J. Innes (Non-Executive Board Member); Ms K. Kasper (Non-Executive Board Member); Ms T. A. Miller (Employee Director and Non-Executive Board Member); Cllr D. Milligan (Non-Executive Board Member); Mr P. Murray (Non-Executive Board Member); Ms J. Butler (Director of Human Resources); Ms T. McKigen (Services Director, Royal Edinburgh Hospital and Associated Services); Ms A. White (Chief Officer, West Lothian IJB).

17. Declaration of Interests

- 17.1 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 declarations of interest were made.

ITEMS FOR APPROVAL OR NOTING

18. Items proposed for Approval or Noting without further discussion

- 18.1 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.
- 18.2 Minutes of Previous Board Meeting held on 05 April 2023 – Minutes were approved.
- 18.3 Healthcare Governance Committee Minutes – 14 March 2023 – Minutes were noted.
- 18.4 Finance and Resources Committee Minutes – 20 March 2023 – Minutes were noted.
- 18.5 Staff Governance Committee Minutes – 01 March 2023 – Minutes were noted.

- 18.6 Audit and Risk Committee Minutes – 20 February 2023 – Minutes were noted.
- 18.7 Midlothian Integration Joint Board Minutes – 15 December 2022 & 09 February 2023 – Minutes were noted.
- 18.8 East Lothian Integration Joint Board Minutes – 23 February & 23 March 2023 – Minutes were noted.
- 18.9 Edinburgh Integration Joint Board Minutes – 28 February 2023 – Minutes were noted.
- 18.10 National Whistleblowing Standards - Annual Performance Report 2022/23 – The Board noted the report.
- 18.11 Appointments to Members of Committees and Integration Joint Boards – The Board agreed the recommendations in the paper, as follows:
- **To appoint** Dr John Hardman as a non-voting member of the East Lothian IJB and specifically as the “registered medical practitioner whose name is included in the list of primary medical services performers” with immediate effect and until 20 June 2026.
 - **To appoint** Dr Douglas McGown as a non-voting member of the West Lothian IJB and specifically as the “registered medical practitioner whose name is included in the list of primary medical services performers” with immediate effect and until 20 June 2026.
- 18.12 Review of the Standing Financial Instructions and Scheme of Delegation
- 18.12.1 The Board approved the changes proposed to both the Standing Financial Instructions and the Scheme of Delegation. Members agreed to delegate authority to the Director of Finance to approve any remaining non-material amendments required, prior to publication.

ITEMS FOR DISCUSSION

19. Board Chair’s Report – June 2023

- 19.1 The Chair gave a verbal update, reflecting upon:
- The most recent briefing session held for elected MPs and MSPs, some of whom continued to demonstrate interest in the Board’s Paediatric Audiology service.
 - His recent visit to the Emergency Department (ED) at the Royal Infirmary of Edinburgh (RIE) to discuss progress against issues raised in the recent Healthcare Improvement Scotland Report. He had welcomed engagement from ED Consultants, in particular.
 - Positive recognition of NHS Lothian’s cancer performance during recent discussions with the Cabinet Secretary.

20. Board Executive Team (BET) Report – June 2023

- 20.1 The Chief Executive presented the report and the following points were highlighted or discussed by the Board:
- 20.2 National Healthcare Estates and Facilities Day – Board members recognised that the meeting coincided with this important date and took the opportunity to formally acknowledge and appreciate the essential work of all members of the Lothian Estates and Facilities Team in the delivery of services.
- 20.3 Scottish National Spine Service – Following recent claims made in the media about

waiting list management in this national service hosted by NHS Lothian, an audit had been conducted by Public Health Scotland. The outcome had provided assurance that NHS Lothian consistently complied with waiting times protocols and that quality and service improvement measures were well embedded.

- 20.4 NRAC funding formula – Following long running discussions with the Scottish Government about NHS Lothian's NRAC funding deficit in relation to current and historical population growth, there had been some changes in the national allocation methodology. This would bring NHS boards to within 0.6% of parity, rather than 0.8%, and resulted in an additional allocation of £8m for NHS Lothian in 2023/24. There had been further additional funding allocations for NHS Lothian linked to the Voluntary Pricing and Access Scheme (VPAS) and sustainability. However, the Board noted that there remained a £52m funding gap for 2023/24, which assumed the achievement of a £42m efficiency target. The ongoing uncertainty and anticipated tightening of capital funding availability remained a significant concern and a risk for the Board.
- 20.5 Cessation of use of off-contract agency staff – the Board noted the implementation of actions in response to DL (2023) 14 "Supplementary Staffing – Agency Controls" and a resulting significant decrease in the use of off-contract agency staff, particularly in nursing. Higher availability and use of Bank Staff was expected to improve levels of patient safety and the quality of service due to having greater oversight of staff. Financial savings were also expected to accrue, and these had been incorporated into current planning assumptions. It was confirmed that all boards were working to the same model and there was ongoing communication between them.
- 20.6 Restricted admissions at the Royal Edinburgh Hospital (REH) – It was noted that admissions at the REH had recently been temporarily closed due to the number of admissions exceeding the number of beds available, including where contingency beds were utilised. The closure had remained in place for 36 hours and patients were instead admitted to available beds in the Mental Health unit at St John's Hospital. Whole system working was already built into the service and following the incident a protocol was being put into place which would ensure that in a similar event in the future discussions would be held earlier, before the contingency beds were utilised, so that there was no interruption to patient flow. There was also work ongoing with the Edinburgh Health and Social Care Partnership as delayed discharge was one of the reasons for exceeding capacity.
- 20.7 Healthy Respect Team – It was confirmed that the Team worked closely with schools.
- 20.8 Use of TikTok – It was confirmed that the Board's use of the TikTok social media platform was limited to advertising in order to reach young people and ensure they are aware of services relevant to them. The Board did not hold a TikTok account and therefore did not create or post content directly.
- 20.9 HMP Addiewell – The healthcare related findings of a recent inspection report on HMP Addiewell prison would be the subject of initial discussion at the next meeting of the Healthcare Governance Committee in July with a detailed report expected to come to the following meeting.
- 20.10 Bed Model Review – The Board noted that the process for the procurement of a bed modelling system had begun. It was likely that the system would initially cover Acute Services and Edinburgh Health and Social Care Partnership with the other partnerships to be added subsequently. The data already available on public health bed modelling would be part of this. Once a factual base had been established this could be used for scenario planning. Board members sought assurance that the model would be able to accommodate complexity and that ownership of the intellectual property for any model

would be retained by the Board.

21. Opportunity for committee chairs or IJB leads to highlight material items for awareness

- 21.1 *Finance and Resources Committee* – The Chair of the Finance and Resources Committee highlighted the discussion from the meeting on the delays caused by compliance with the NHS Assure process for capital projects and the absence of a formal Service Level Agreement. He also noted that the Committee had received a presentation on the positive work being carried out by the Board's Sustainability and Value Team in finding areas in the system for efficiency savings.
- 21.2 *Midlothian Integration Joint Board* – The Chair of the Midlothian IJB advised that, following the earlier decision by Midlothian Council not to pass on funds expected by the IJB for 2023/24, she had written to the Scottish Government, on behalf of the IJB. A sympathetic response had been received and it was expected that civil servants would be bringing IJBs together to discuss common challenges and difficulties.

22. NHS Lothian Board Performance Report

- 22.1 The Deputy Chief Executive presented the Board Performance Paper, noting that the system remained under significant duress, driven primarily by the combined factors of hospital occupancy levels, workforce challenges and financial pressures. He highlighted a range of specific points within the Performance Paper, noting in particular that previous improvements in the area of delayed discharges during 2021 appeared to have been reversed, with little change between 2022 and 2023. This had resulted in continuing constraints on the availability of acute hospital beds. The Deputy Chief Executive also noted that the Board's use of the independent sector to alleviate key pressures had been constrained due to both financial capacity and increased activity within the independent sector itself.
- 22.2 The Chief Executive informed the Board about a recent meeting with a group of consultants from the RIE Emergency Department to discuss improvement plans and respond to some specific concerns raised by the group. The consultants' call for increased staffing and greater levels of support from other areas had been acknowledged. At the same time, it had been communicated that the current improvement plan had been developed in full collaboration with medical leaders within the RIE ED and endorsed by the Scottish Government's National Director of Unscheduled Care. Further suggestions for improvement had been welcomed and would be considered through subsequent planned meetings.
- 22.3 Board members considered the potential to learn lessons from other EDs in Scotland. It was reported that discussions were underway about the standardisation of pathways, as a means of supporting and encouraging change. Increased efforts were also being made to communicate to the public that attendance at the ED should only be for genuine emergencies and to provide redirection to other services, where appropriate. It was too early to measure the impact of these efforts. However, it was felt that there also needed to be a change of culture and practice internally to fully realise potential benefits.
- 22.4 Board members queried the impact of staff absences on unscheduled care performance and delayed discharges. It was acknowledged that, whilst the overall absence rate was within the national average, some individual areas were experiencing higher rates and absences had increased post-Covid. The Staff Governance Committee continued to

provide scrutiny in this area and appropriate attendance management procedures were being deployed.

22.5 Board members expressed concerns around the reported loss of progress in addressing delayed discharges and the subsequent impacts on unscheduled care performance. In particular, there was a desire to understand the impacts of the anticipated removal of interim beds in Edinburgh. In response, the Chief Executive highlighted a commitment made by the Edinburgh Integration Joint Board at its recent meeting on 13 June to maintain an appropriate level of performance, despite the removal of interim beds. It was also reported that there was significant engagement between IJBs and the Scottish Government to try and address performance challenges e.g., by reducing lengths of stays. It was agreed that further discussion on this area of performance would be arranged for the next meeting of the Board's Strategy, Planning and Performance Committee (SPPC).

22.6 The Board accepted the recommendations laid out in the paper.

23. Lothian Strategic Development Framework Annual Report

23.1 The Director of Strategic Planning presented the previously circulated draft report, which reflected previous discussions at the Strategy, Planning and Performance Committee on 17 May. He noted that the draft report had been discussed at the Lothian Partnership Forum and, following Board approval, would be communicated to staff and the wider public. A narrated slide show for this purpose had been circulated separately to board members, for information. It was intended that the report would be available to all staff via a link on the main page of the Intranet and highlighted via regular all-staff communications. It was hoped that the format of this would ensure that information was presented to staff in a fully accessible way.

23.2 The Board agreed to the content and sharing of the Lothian Strategic Development Framework Annual Report.

24. NHS Lothian Corporate Objectives 2023/24

24.1 The Director of Strategic Planning introduced the previously circulated paper, which had also been discussed at the Strategy, Planning and Performance Committee in May. The Board was reminded of the revised approach, whereby the total number of Corporate Objectives had been reduced to support a priority focus on the pillars and parameters of the Lothian Strategic Development Framework. The paper also demonstrated how each Corporate Objective would be supported by an underpinning series of themes and actions, drawn from the LSDF Implementation Books.

24.2 Board members noted some variability in references to digital delivery across the different LSDF Implementation Books and sought assurance that digital opportunities would be equally reflected and embedded in all areas. The Director of Strategic Planning confirmed that the aim was to have digital working embedded in every service and that the team was working to ensure that this was included in all Implementation Books including those for Scheduled Care, Unscheduled Care and Workforce. Improving digital skills and maturity within the workforce was part of this. A digital implementation plan was being developed that reflected the requirements of all LSDF pillars and parameters and also aligned with the Scottish Government's approach to digital.

24.3 Board members queried the progress made in developing implementation plans for the Environmental Sustainability Parameter of the LSDF. The Director of Strategic Planning expected an Implementation Book to be considered by the Corporate Management Team in November 2023. There were a number of expectations from the Scottish Government in this area with a long timescale and the team was focussed on this.

- 24.4 Clarity was sought on the appropriate measurement for the Unscheduled Care Corporate Objective. It was suggested that, whilst achieving 70% compliance against the 4-hour emergency access standard was the overall target agreed in relation to the RIE, a higher rate of compliance may reasonably be expected for less pressurised acute sites. It was agreed that the description of the measure would be reworded in acknowledgement of this.
- 24.5 Members noted that, although there was no specific Corporate Objective on diversity and equality, this area was fundamental to all the Board's work and therefore would underpin all the objectives. There was a separate Equality and Human Rights Strategy, approved by the Board in April 2023, and a supporting action plan.
- 24.6 The Board accepted the recommendations laid out in the paper and, subject to the minor revision discussed above, agreed the Corporate Objectives for 2023/24.

25. Children's Services Partnership Plans

- 25.1 The Director of Strategic Planning introduced the Children's Services Partnership Plans for Edinburgh, East Lothian, Midlothian and West Lothian, noting that the Strategic Programme Manager for Maternal and Child Health was in attendance to respond to any questions.
- 25.2 The Board noted that each Plan had been prepared against a consistent set of principles and that the contents specifically reflected those areas of activity that could only be addressed through multi-agency collaboration and partnership working. The plans had also been constructed to ensure consistency and commonality with the pillars and parameters of the Lothian Strategic Development Framework. Following approval by the Board, a more detailed implementation plan would be developed by each partner IJB, with appropriate actions and KPIs.
- 25.3 In response to questions from board members, it was confirmed that:
- Impact would be monitored and reported as part of the workplan of the Children and Young People's Programme Board.
 - Population data referenced within each Plan, by necessity, reflected the most recently published formal statistics available. However, teams involved in delivery would utilise more recent data in practice.
 - Progress in delivering "The Promise" and the Board's corporate parenting duties was overseen by the Corporate Parenting Board, chaired by the Chief Executive.
 - Improvements to pathways for children's mental health were expected to come via the Single Point of Access initiative and a commitment to this was reflected within each Plan.
- 25.4 The Board accepted the recommendations laid out in the paper and approved the Children's Services Plans for Edinburgh, East Lothian, Midlothian and West Lothian for 2023 to 2026.

26. NHS Lothian 2022/23 Financial Position

- 26.1 The Director of Finance presented the previously circulated paper. The Board accepted that NHS Lothian had achieved its financial target of breakeven for the year 2022/23, subject to external audit review. The Board expressed its collective thanks to the Finance Team and every budget holder within NHS Lothian for helping to bring this about.

26.2 The Director Finance reflected upon the 2023/24 Corporate Objective related to “working towards financial balance”. He emphasised that, notwithstanding the achievement of breakeven in 2022/23, maintaining financial balance in the current year represented an unprecedented challenge for the Board, exacerbated by a range of factors that included inflationary pressures and ongoing service recovery demands.

26.3 Immediate efforts were focused on delivering an agreed 2023/24 efficiency target of 3%, managing expenditure and reducing the remaining projected financial deficit of £52m as much as possible.

27. Corporate Risk Register

27.1 The Executive Medical Director presented the previously circulated paper. She highlighted the risks associated with the planned junior doctors’ industrial action on 12-15 July 2023 and the continuity plans to ensure patient safety across Acute Services, Health and Social Care Partnerships and GP practices if the strike were to go ahead. The Director of Communications advised that the Scottish Government had planned communications to raise public awareness of the strike. Lothian communications would be focussed on operational planning.

27.2 The Board accepted the recommendations laid out in the paper and accepted that the risk status for 4 Hour Emergency Access, Hospital Bed Occupancy and Access to Treatment had been increased from ‘Very High’ to ‘Very High/Extreme’ with risk mitigation plans in place.

27.3 The Board welcomed the opportunity to record its appreciation and thanks to Ms Jo Bennett, Associate Director for Quality Improvement and Safety, who was due to retire before the next Board meeting. In particular, the Board noted Ms Bennett’s significant contributions to reviewing and improving the Risk Management Framework in recent years.

28. Any Other Business

28.1 No other items of competent business were identified.

29. Reflections on the Meeting

29.1 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.

30. 2023 Board Meeting Dates

30.1 The remaining Board meeting dates for 2023 were noted:

- 23 August 2023
- 04 October 2023
- 06 December 2023

Signed by Chair at Board on 23/08/2023