

# Daily Brief...

Thursday 22 October 2026

**Executive Team update** Please see below for the report from this week's Executive Team meeting:

| Matters of concern or key risks to escalate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Major Actions Commissioned / Work Underway                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
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| <ul style="list-style-type: none"><li>• Unscheduled Care demand and patient flow through Hospital Services remain under significant pressure ahead of winter. A hospital-wide safety response is needed when agreed pressure triggers are reached, including safe care for delayed patients, Executive-led assurance walkarounds, stronger specialty ownership, faster discharge and action to reduce long waits in emergency care.</li><li>• Backlogs and delays in responding to complaints and completing Significant Adverse Event Reviews remain a serious concern. Additional capacity and focused recovery actions are being put in place to reduce overdue cases, provide timely responses to people raising concerns and ensure learning is identified and acted upon.</li><li>• Workforce sustainability, capacity and capability remain significant organisational risks, reflected in the revised strategic workforce risk approved by Executive Team.</li></ul> | <ul style="list-style-type: none"><li>• Develop one phased and prioritised Unscheduled Care improvement plan that brings together existing improvement programmes, frailty services, full-capacity arrangements, agreed ways of working and recommendations from external reviews, including the recent Centre for Sustainable Delivery (CfSD) review. The plan will identify named owners, deadlines and the support required from the Centre for Sustainable Delivery. It will come back to the Executive Team in 3 weeks' time.</li><li>• Progress the interim winter frailty arrangements to increase bed capacity in the orange zone for planned implementation on 23 November, while continuing development of the longer-term frailty model in the green zone.</li><li>• Review patients who waited more than 8 and 12 hours in the Emergency Department to understand the causes of delay, including delays before assessment, lack of available beds and delays following a decision to admit. Use the findings, alongside further work with CfSD and relevant clinical teams on short-stay and observation care, to identify practical improvements.</li></ul> |

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| Positive Assurances to Provide                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Decisions Made                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <ul style="list-style-type: none"> <li>The Centre for Sustainable Delivery identified positive signs of improvement since its earlier visits, including reductions in delayed discharge, medical length of stay, Emergency Department occupancy and use of non-designated spaces, alongside stronger whole-system working. Significant challenges remain and the improvements will require continued monitoring and sustained action.</li> <li>The number of people waiting more than 104-weeks for a new outpatient appointment has started to reduce, supported by additional dermatology capacity. The position remains above trajectory, with further activity planned during October and November.</li> </ul> | <ul style="list-style-type: none"> <li>Agreed to strengthen communication, governance and oversight of national and sub-national (regional) clinical service developments, including clear routes for involving relevant clinical teams and primary care colleagues.</li> <li>Supported the direction of travel towards a common East of Scotland Access Policy, with any amendment to the NHS Grampian policy subject to completion of the equality impact assessment and consideration of its findings.</li> <li>Approved the revised strategic workforce risk and its inherent and mitigated risk ratings, subject to a further check for alignment with the forthcoming HIS Diagnostic Report.</li> <li>Agreed that corridor care measures will be included routinely in performance reports to improve visibility and oversight at the Executive Team meeting.</li> <li>Reviewed the Executive Team Terms of Reference and agreed it will be updated before final approval by the Chief Executive.</li> </ul> |

**Protected Learning Time (PLT): survey for Managers** How is PLT being delivered in your service/team? This week, managers across the organisation will receive a short survey as part of the AfC non-pay reform programme. Your responses will help us understand how PLT is currently being provided across teams, identify what is working well, and highlight any barriers that are making it difficult to support staff learning and development.

Your feedback will also help establish a baseline picture of PLT across NHS Grampian and inform future improvements, guidance, and support arrangements. It further offers an opportunity to share examples of good practice that could benefit other teams. The survey is quick to complete, and every response will help shape the future development of PLT across the organisation. Please look out for the survey link in your inbox and take a few minutes to have your say.

**Occupational Health skin referrals – reminder** Managers should ensure skin health surveillance referrals are submitted via the Occupational Health G2 portal and **not** by email. This will help ensure referrals are received through the correct route and can be managed more efficiently. Thank you for your co-operation.

**New graduate nurse/midwife evaluation now live** Are you a New Graduate Nurse or Midwife who started in post during 2025? We want to hear about your experience of your first year in practice, including your transition into the role and the support you have received. [The survey, available via this link](#), takes just a few minutes to complete and will help shape future support for newly qualified staff. The survey is open for responses until 10 November.

**New ketamine information sheet** Public Health Scotland recently published an information sheet covering ketamine use, reasons people may use ketamine, potential health risks, harm reduction advice, and actions professionals can take to support those affected. [This can be found, alongside our locally developed ketamine resources, by following this link](#). Please help spread the message by sharing these resources through your networks and displaying materials.

**Tune of the day** Our request today comes from the Aberdeen City HSCP Business Support Team. They're collectively wishing Doreen Abel a very happy retirement after more than 20 years of NHS service. She has been a familiar and welcoming presence at Foresterhill Health Centre and will be very much missed by patients and colleagues alike. For Doreen, here's Fleetwood Mac and [Go Your Own Way](#) (EP)

If you want to request a tune, follow up on items included in this brief, or suggest an item for sharing, drop us an email via [gram.dailybrief@nhs.scot](mailto:gram.dailybrief@nhs.scot)