



Purpose of this report

As part of our continuous improvement of Board reporting and transparency, a written Chief Executive report will be provided to the Board at each Board meeting and will replace verbal opening comments from the Chief Executive. The purpose of this report is to update Board members on priority issues since the last Board meeting which are not covered elsewhere on the agenda.

Report Content

1. System Pressures

- a. As the Board are aware, the NHS across the country is experiencing an extremely challenging situation in managing demand and capacity this winter. As I confirmed in my short emailed briefing to you on 6 January 2023, this is also the case across the entire health and care system in the North East of Scotland. Every part of the system, from primary care and community services, moving into acute hospitals, and then back to the community into social care, care homes and community hospitals, is working at or above full capacity. This is despite every colleague in every part of the system working tirelessly to do all they can to respond.
- b. Emergency Department performance remains very challenged across Dr Gray's Hospital and Aberdeen Royal Infirmary (and also at times in Royal Aberdeen Children's Hospital), reflecting the whole system capacity issues. Occupancy across all acute hospitals, community hospitals and hospital at home beds remains very high and recently often above 100% occupancy.
- c. We have continued to protect priority planned services alongside our unscheduled care response as much as we possibly can. This recognises the significant impact created by the long waits for out-patient appointments and in-patient treatment, which has been emphasised by Board members at previous meetings. The performance reports for planned care continue to reflect a challenging position and I acknowledge that we are not where we would want to be. The Performance Assurance, Finance and Infrastructure Committee on 22 February 2023 will provide scrutiny of the actions being taken to provide planned care and the Board, How Are We Doing report at future Board meetings will continue to spotlight the issue.

- d. However, the whole system approach to create capacity in non-acute hospital settings set out in the Winter Tactical Plan: Unscheduled Care Contingency Capacity Surge Plan endorsed by the Board in December 2022 is progressing at pace. As of 24 January 2023, there are now 63 community interim care beds currently available, predominantly in Aberdeen City and Aberdeenshire with a further 22 due to be available soon. All three Grampian Health & Social Care Partnerships continue to work with care homes in terms of vacancy management and ensuring flow through the system.
- e. I am in no doubt that at times system pressures are having an impact on the quality of care and treatment that can be delivered. In my conversations with colleagues, I hear the extraordinary efforts that individuals and teams are making across the system to deliver care. When that can't be achieved, through no fault of their own, the distress and impact on their well-being is significant. However, it is important to note I also continue to hear about fabulous episodes of care from colleagues and through feedback from patients and citizens.
- f. To that end since we have last met as a Board, I have been ensuring I prioritise spending time speaking with as many teams as possible to hear issues first hand and to feed those into our response, planning and learning. Recently I have spoken with as many teams as possible across Dr Gray's Hospital, Aberdeen Royal Infirmary and Royal Aberdeen Children's Hospital. In addition, I have joined key meetings across the system and speaking weekly with Chairs of the Advisory Committees to the Board.
- g. At a meeting on 19 January 2023 more than 160 people met virtually to discuss the current pressure the system is under and significant distress was expressed. This meeting reinforced the need for the Chief Executive Team to adjust commitments and priorities, and therefore we have decided to stand down as much non-urgent business as possible to focus on barriers to flow, improvement work, colleague well-being and the quality of care across the system. We are doing this for a two week initial period which commenced 23 January 2023 and will be reviewed to consider if this period needs to be extended. This is to ensure that we create time and space to prioritise responding to the winter system pressures, to keep the quality and delivery of safe care as high as possible and in consideration of colleagues' well-being.
- h. Turning to the citizens we serve; I want to again acknowledge the impact on those who themselves are waiting or have people in their families waiting for long-planned care and treatments. I know every number on the waiting lists is a person whose life will be affected by not accessing treatments as quickly as we all want to deliver them. As stated above, we are doing everything we can to minimise the current winter unscheduled care pressures further impacting planned care and continue to prioritise those in most urgent clinical need for treatment and those who have been waiting the longest. Thank you to everyone who has used the information developed in partnership with local authorities and

on NHS Grampian's "Know Who To Turn To" website to guide where they should first present for care.

- i. As an illustration of the whole system consideration of the system pressures, I would like to draw your attention to an initiative developed in response to the extremely high number of falls which presented to our Emergency Departments during episodes of icy weather in December and January. Work by public health colleagues has identified 'cold spots' and they are working with Aberdeen City Council to complement their efforts in gritting and salting with more targeted effort to prevent admissions to emergency departments. Public Health colleagues are also meeting with residents of two areas at a community council network meeting at the beginning of February to see if there are any volunteers from the community to support this preventative work. I think this is such a good example of community engagement work that can prevent people needing a hospital admission.

2. Financial Position

The updated December 2022 financial position for NHS Grampian is shown at appendix 1. The current forecast overspend for the financial year is now reported at £25 million. It is likely that this will reduce over the next quarter, as the one-off savings within our value and sustainability plan are applied. These savings will not be available next financial year and this will be compounded by an increase in spend across most of our large operational areas. Work is continuing on our Medium Term Financial Framework which will focus on being as efficient as we can, whilst starting work to help design and deliver sustainable pathways of care and delivering our Plan for the Future. The December 2022 financial position is on the agenda for discussion at Performance Assurance, Finance and Infrastructure Committee at its next meeting on 22 February 2023.

3. Fatality at Baird Family Hospital construction site:

I would like to formally acknowledge the fatality at the Baird Family Hospital construction site operated by Graham Construction on 18 January, which involved a sub-contractor. Whilst construction work has now recommenced following a period of closure to support those who have been affected by the tragedy and the Health & Safety Executive investigation. Our thoughts remain with the sub-contractor's family, friends and colleagues. The NHS Grampian project team continues to work with Graham Construction to ensure people can access sources of support.

4. Diagnostic tests:

As context to the widely reported waits for diagnostic tests within Grampian, I wish to clarify that the claims made about very long waiting times are incorrect. NHS Grampian was asked for waiting times for a variety of procedures in a Freedom of Information (FOI) request and in line with our aim to reply fully and transparently to all such requests, data was provided that included wait times for pre-planned scans. The data supplied did not indicate to the requestor that both pre-planned and diagnostic scans had been included, and this material fact was therefore omitted

from the subsequent press coverage. The pre-planned scans were included because it is routine for some patients who have been treated for forms of cancer or have received forms of neurosurgical care for example, to have pre-planned scans in future years to monitor their progress after treatment. However, these are not diagnostic tests prior to treatment, as was reported by many news outlets. For the latest information on wait times for diagnostic tests in Grampian please visit nhsgrampian.org/about-us/waiting-times-information/

5. Innovation:

Finally, I would like to pay tribute to colleagues working within NHS Grampian's Innovation Hub - whose role is to bring together consortia consisting of NHS colleagues, industry and academia to generate and test solutions to healthcare challenges. As a result of one of the Innovation Hub's recent projects, NHS Grampian's John Mallard PET (Positron Emission Tomography) Centre has introduced a methionine PET CT imaging service in Aberdeen. The scanning method measures tissue function rather than anatomy and whilst the technology is only suitable for a small number of patients at the moment, it has huge potential to be transformative for brain tumour patients across Scotland. The media release is available here: [Advanced brain imaging by NHS Grampian a first for Scotland](#)

Caroline Hiscox, Chief Executive
26 January 2023