Board Meeting 12.09.24 Open Session Item 13.4

APPROVED Minute

NHS Grampian

Performance Assurance, Finance & Infrastructure Committee 5th June 2024, 1400 to 1600 (Microsoft Teams Meeting)

Chair - Mr Sandy Riddell

Present

Sandy Riddell (Chair)	Non-Executive Board Member, NHS Grampian
Derick Murray	Non-Executive Board Member, NHS Grampian
Tracy Colyer	Non-Executive Board Member, NHS Grampian
Joyce Duncan	Non-Executive Board Member, NHS Grampian
Dennis Robertson	Non-Executive Board Member, NHS Grampian

In Attendance

June Brown	Executive Nurse Director/Deputy Chief Executive
Alison Evison	Board Chair, NHS Grampian
Nick Fluck	Medical Director
Preston Gan	System Transformation Programme Manager
Alex Stephen	Director of Finance/Executive Lead for Performance
Alan Wilson	Director of Infrastructure & Sustainability

Guests

Colin Adam	Programme Director Item 3.2
Carmen Gillies	Programme Lead Value & Sustainability Item 4.2
Sean Harper	Director of Psychology
Garry Kidd	Assistant Director for Infrastructure & Sustainability Item 3.1
Jennifer Matthews	Corporate Risk Advisor Item 5.2
Sasia Pryor	Cancer Performance Lead Item 5.3
Alan Sharp	Deputy Director of Finance Item 4
Matthew Tom	Head of Performance Governance Item 5.3

Apologies

Adam Coldwells	Chief Executive
Paul Bachoo	Medical Director Acute & Portfolio Executive Lead, Integrated Specialist Care

Minute taker

David Creighton	Senior Administrator/PA

Item	Discussion	Action

1.	Welcome and Apologies	The Chair welcomed everyone to the meeting. Apologies noted as above.	
	2) Minutes of previous meeting (17 th April 2024)	The minute was approved as an accurate record of the meeting.	
	3) Matters Arising	 The Chair updated on actions from the minute: The Chair met with the System Transformation Manager and colleagues to discuss consistent reporting to PAFIC, CET and the Board. The output of this discussion will be further discussed under Item 5. The Chair met with the Portfolio Executive Lead, Integrated Family Portfolio and the Chair, Population Health Committee to discuss reporting to committees for the Promise, in order to evidence the work undertaken to deliver better outcomes. The Portfolio Executive Lead, Integrated Family Portfolio agreed to prepare a mapping exercise with updates to be provided as available. 	
		The Chair advised PAFIC members Item 5.3 Portfolio Deep Dive – Integrated Specialist Care Portfolio (ISCP) will be taken immediately after Committee Matters due to availability of leads to support this item. The agenda will then follow as set out.	
2.	Committee Matters	The Chair advised he was pleased the Forward Planner was provided for committee awareness of upcoming agenda items.	
	1) PAFIC Forward Planner	The Director of Finance further advised this was a detailed look ahead that will evolve to respond to emerging items and wished to thank colleagues for helping to populate.	
	Infrastructure – Exec Lead Alan Wilson Topics and paper author: 1) Whole System Planning update	1) The Director of Infrastructure & Sustainability advised the Terms of Reference (ToR) and Project Initiation Document (PID) were approved with no modifications at the Asset Management Group (AMG) on 29/05/2024. The report was taken to PAFIC for endorsement of the governance and assurance framework in relation to Whole System Planning and for awareness of the process set out by the Scottish Government (SG) of submitting capital projects.	
		The Assistant Director of Infrastructure & Sustainability advised the ToR was developed to underline the executive focus and strategic oversight of the AMG which will operate as the core steering group for Whole System Planning with involvement of members from CET. The PID focuses on the first phase of Whole System Planning, which requires preparation of a maintenance only business continuity plan covering the next 5-10 years. The second phase is to have an integrated Whole System, service led infrastructure investment plan by January 2026. There are 98 properties to carry out the exercise assessing physical risks via site visits and engaging with managers and clinicians.	

PAFIC Questions/Comments

- Clarity for phases one and two in relation to working with Integrated Joint Boards (IJBs). The Assistant Director of Infrastructure & Sustainability advised phase one is focused on assets, the second phase will be cross system working with partners.
- Current engagement across the system. The Assistant Director of Infrastructure & Sustainability advised on willingness of engagement with a lead point of contact agreed within portfolios, directorates and local services.
- Support from Committees and the Board for Whole System Planning. The Director of Infrastructure & Sustainability confirmed work will be done as a place based review with some pilot areas set up to look at sharing assets. Support from committees and the Board would be beneficial
- Does Asset Management consider letting go of buildings?
 The Assistant Director of Infrastructure & Sustainability Alan, confirmed that disinvestment will be looked at as part of a site master plan for ARI
- Board development session being held in August 2024 to show work being done for assurance

PAFIC Acknowledged the revised governance and assurance arrangements and development of Whole System Planning approach.

2) The Medical Director introduced the Programme Director who advised the key points:

Healthcare Acquired Infection (HAI)

 Instruction of the principal supply chain partner - Graham Construction to support NHSG with a series of feasibility studies to look at:

Anchor Centre

 Layout of the open plan treatment area and associated treatment rooms given concerns of the air pressure arrangements within the spaces – positive progress with a conclusion coming within the next few weeks.

Baird Family Hospital

- Theatre layout in relation to ventilation systems, removal of sinks and potential removal of fan coil units – positive progress with a conclusion expected in the coming months.
- Continue to meet with Infection Prevention Control (IPC) and NHSS Assure colleagues to review solutions.

Key Stage Assurance Review (KSAR)

 NHS Assure carried out a site visit of Baird Family Hospital in March 2024 based on information submitted by NHSG for review. A series of Workshops were held following the visit focusing on key design issues. A report is due in July 2024 SR/AE

2) Baird & Anchor

Update

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which will put action plans in place. Regular meetings continue with NHSS Assure to address any issues identified

PAFIC Questions/Comments

- Confirmed that NHSS Assure are supportive of NHSG moving into the commissioning KSAR process for ANCHOR Centre subject to an agreed action plan being put in place.
- Confirmed that resilience to High/Low Voltage mains supplies is a key risk to completion of both buildings. The Programme Director advised the design for main supply was based on a superseded British Standard while the review was based on a current standard, however remedial work still had to be done to meet former standard.
- The Programme Director advised resilience to both buildings is provided from two separate mains supplies in addition to generator back up. Programme Director advised there is a requirement for separation and protection of all supplies in the event of a fire. Compartmentation and separation of all main cables will have to be developed by PSCP where not compliant.

PAFIC agreed to note the process for the HAI and KSAR issues and the revised programme for delivery including the potential for further slippage and risks to project costs

- Alex Stephen Topics and paper author:
 - 1) Q4 Update
- 4. Finance Exec Lead 1) The Deputy Director of Finance advised key points:
 - Financial Year Overspend of £24.7M which was within the overspend limit expected by SG of SG. Brokerage agreed for £24.8M repayable in future years. This will show as a slight underspend in the Annual Accounts and is the first time NHSG has had to request brokerage support which is indicative of the financial pressures
 - Overspend of just under £5.5M recorded for March 2024 due to continuing service pressures, It was noted this was an improvement on previous months
 - Contribution of £7M to overspends in Aberdeenshire and Moray IJBs as part of the risk share agreement

PAFIC agreed to note the contents of the report.

- 2) Value & Update
- 2) The Chair advised for awareness that the Value & Sustainability Plan Sustainability Plan is regular focus on Value & Sustainability at CET meetings to ensure oversight and progression of the plan.

The Deputy Director of Finance advised the report provided assurance of the Value & Sustainability (V&S) Programme Governance with savings for 2024/2025 of £17.5M achieved which was above the target set of £16.5M. The focus of savings was on efficiency gains while not reducing levels of service or patient experience. The main areas of savings were:

- Use of Agency Locums using Direct Engagement which allows VAT to be avoided
- Significant savings in Hospital drug budgets by switching from expensive branded medicines
- Savings in procurement
- Reduction in Agency Nursing due to successful recruitment
- Savings in energy usage
- Small saving on overtime

Increased focus on the 2024/2025 financial year with a project management approach and targeted commissions in line with National work to deliver efficiencies

PAFIC Questions/Comments

- Asked about the 3% savings for NHSG and IJBs. The
 Deputy Director of Finance confirmed for NHSG the 3% is
 across services not delegated to the IJBs with IJBs
 expected to make their own 3% savings from their own
 budgets. The 3% baseline relates to recurring funding and
 not non-recurring allocations
- Energy savings due to efficiency or costs of energy reduced.
 The Deputy Director of Finance indicated this was a
 combination of due to energy being bought a year in
 advance which came in cheaper than budgeted and some
 energy efficiency schemes implemented during the year.
- The Deputy Director of Finance confirmed close working with the Moray IJB and peer to peer review meetings with council colleagues.
- Noted the importance of savings not impacting service delivery and good links with SG. Work to be done on ongoing core and further initiatives to influence wider staffing culture.

3) Strategic Risk (Finance)

PAFIC agreed to note the report.

3) The Corporate Risk Advisor introduced the paper to PAFIC for oversight and scrutiny into the arrangements surrounding the strategic risk being robust and effective. While there are robust governance and internal controls in place, the risk has limited assurance based on the ability to reduce the risk exposure.

PAFIC Questions/Comments

- Tone in the controls section that overspends where appropriate which makes risk difficult to control. This should be vocalised and publicly acknowledged this may happen based on business needs
- Challenges to respond at pace and effect reasonable change quickly
- Noted a need to transform at pace however with no capacity to do so assurance to be given that everything that can be looked at has been looked at.

The Committee discussed if this risk should be formally escalated to the Board and suggested that a statement is presented to the Board Meeting on 13/06/2024 explaining the financial position. This approach was agreed as opposed to an escalation which could carry risk of perception or concerns on the ability to deliver safe and effective care.

PAFIC noted the current arrangements in place for the management of the current financial position and the impact of funding constraints on the ability to support service transformation effectively and the limited assurance opinion from the Executive Lead for this reason.

- Lead Alex Stephen Topics and paper author:
 - 1) Spotlight Criteria Framework

5. Performance – Exec 1) The Chair advised a brief overview of the Spotlight Criteria Framework as it was evolving. The report for Item 4.2 is a trial run for Q4 of the 2023/2024 Annual Delivery Plan (ADP) as a transitional phase of reporting for adoption in 2024/2025. PAFIC will be aware of previous reporting with potential inconsistencies when seeking assurance. A recognition of the balance in reporting reds, amber and greens for governance. The framework for reporting is to provide an agreed level of assurance without bias between CET, PAFIC and the Board and extends the time allowance for leads and teams for assurance and scrutiny and compilation of reports. The System Transformation Manager advised there were 37 KPIs that were in this trial run imported from the HAWD reports for PAFIC to provide assurance. Any areas remaining red or improved will have spotlights or light touch updates. The Chair acknowledged the volume of work and thanked the System Transformation Manager and team.

It was agreed to have Performance Items at the start of the agenda for the next PAFIC meeting on 28th August 2024

2) PAFIC Questions/Comments

- Reporting has significantly strengthened providing clear detail of key risks and challenges.
- Need to reduce time to hire and asked if the Vacancy Control process was slowing down recruitment due coupled with service and staffing pressures and a tendency to spend on agency staff. Asked if there was way to determine the number of vacancies going through the Vacancy Control process for NHSG and IJBs. The Executive Nurse Director confirmed for assurance that anything lower than Band 8 for clinical roles goes through. Noting that the process is as quick as possible and dependant on forms being filled out correctly prior to going to the Vacancy Control Panel.
- Concerns with Statutory & Mandatory Training which has also been discussed at Staff Governance. This needs to improve as not assured around patient and staff safety with low levels of staff and new starts. Look at ways to increase uptake noting some training courses not available on

2) 23/24 Annual Delivery Plan Q4 Report + **Spotlights**

DC

- demand. Clarity on what training staff need and when programmes to increase training uptake
- The Director of Finance confirmed he would speak to the Director of People & Culture to provide an update on both the Vacancy Control Panel process and Statutory and Mandatory training

Positive performance for children and young people in CAMHS being seen within 18 weeks with concerns on psychological therapies noting assurance with pathways challenges with finance. The Executive Nurse Director confirmed there has been lots of work in the pathway looking at capabilities of teams, which are specialised and often small which has not managed to reach the desired outcome as yet. For anyone waiting there are waiting well

 Ambulance waits going in the wrong direction despite increases to improve access and additional beds, is another method needed. Noting capacity challenges and use of nonstandard bed spacing. Feed back to the Portfolio Executive Lead, Integrated Family Portfolio

schemes and signposting to electronic therapy resources

- Rise in abortion timings and impact on people's lives
- The Quarter 4 2023/24 PAFIC Report, its tiered approach, spotlights, summary table and circle markers which supports and enable the assessment of NHS Grampian's current performance against the Annual Delivery Plan, which in turn provide sufficient assurance to the Committee.

PAFIC noted the improvements in reporting with further comments on the next iteration at the PAFIC meeting on 28th August 2024. The Chair, Director of Finance and the System Transformation Manager to meet to discuss

PAFIC were asked to consider and discuss:
The Quarter 4 2023/24 PAFIC Report, its tiered approach, spotlights, summary table and circle markers which supports and enable the assessment of NHS Grampian's current performance against the Annual Delivery Plan, which in turn provide sufficient assurance to the Committee.

Clarity on the level of detail and content provided in individual spotlights, whether this is insufficient, balanced or excessive, to manage expectations on operational teams, Leads and the Performance Assurance Team in the scrutiny, review and compilation of these reports for assurance.

- Portfolio Deep
 Dive Integrated
 Specialist Care
 Portfolio (ISCP)
- 3) The Chair advised this item has been framed in relation to Planned Care following discussions between the Portfolio Executive Lead, Integrated Specialist Care and himself for a more focused report to provide assurance.

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SR/AS /PG The Head of performance Governance advised in relation to Elective Care that £16M recurring funding has been granted which will allow investment to help improve position in reduction backlog and appointing people to post in the right areas to reduce overtime. There is a further £70M funding being made available Nationally with the proportion to NHS Grampian (NHSG) to be confirmed.

The Cancer Performance Lead advised in relation to Cancer the recurring Cancer waiting times funding will help support activity, backlog recovery and 31 Day/62 Day waiting times Acknowledge data of backlog recovery and 31 / 62 day cancer performance to improve between Q3-Q4.

PAFIC Questions/Comments

- Positive feedback on recurring funding
- Optimism to support and reduce waiting times, how will that be achieved? The Head of Performance Governance advised bids from services will be evaluated with clear criteria to identify the best use of funding where there is a recurring capacity demand with full compliance for the Centre for Sustainable Delivery (CfSD) and an assessment of staff for recruitment. The time frame for evaluations is end of July 2024 ready for Q3-Q4
- 62 day performance targets timeframe and support for a noticeable difference in patient pathways. The Cancer Performance Lead advised as patients come off of the backlog list this inadvertently has a negative impact on 62 day performance which is why there were no initial improvements. In terms of support for patients a single point contact service to help patient navigation has been introduced, and is in the process of contacting patients on the urgent suspected cancer referral pathway to offer signposting to where patients are on their pathways and likelihood of appointment time. The online waiting times service for urgent suspected cancer has also been upgraded on a public forum to allow GPs and patients to access up to date information
- Noting strong links with Golden Jubilee and asked about working with North if Scotland (NoS) Boards to address backlog issues. The Head of Performance Governance advised there is a SLWG in NoS looking at opportunities to standardise outcomes which may lead to some improvement. It was noted that Boards are performance managed with no additional capacity identified. Work continues accountable for their own population Leap in long term to test water.
- Capacity issues in maintaining performance with Agenda for Change (AfC) and Health Care Staffing Act (HCSA). The Head of Performance Governance advised a more

7.	16:00 Date of N	lext Meeting: Wednesday 28th August 2024, 1400 to 1600	
6.	Matters to escalate to Board/Committee Chairs	· · · · · · · · · · · · · · · · · · ·	
		comprehensive update could be provided in 6 months time. The Chair welcomed forward planning in relation to minimising impact. The Director of Finance advised there are no foreseen short term impacts at present 102 week waits with NHSG being an outlier in relation to other Scotland Boards. The Head of Performance Governance advised this has changed over time: Positive downwards trajectories for vasectomy ENT requires some work as part of non-recurring funding projects One year plus waits for benign patients in urology with some deprioritisation due to the cancer workload in urology which is a National issue. This will be explored further as part of released funding from SG Treatment Time Guarantee (TTG) performance is related to theatre capacity which is hoped to improve in Q3 It was noted that further information in relation to 104 week waits would be beneficial for the Board PAFIC noted the assurance given in the report.	MT/AS

Chair: Mr Sandy Riddell

Key: * Paper attached # Verbal ~ Paper expected

Notification of apologies/deputies to:

Mr David Creighton (gram.grampianchiefexecutive.scot.nhs)