

## **Area Clinical Forum Report to Grampian NHS Board Meeting on the 14<sup>th</sup> August 2025.**

### **Purpose of Report**

This report updates the Grampian NHS Board on key issues arising from the Area Clinical Forum (ACF) meeting on 25<sup>th</sup> June 2025.

### **Recommendation**

The Board is asked to be assured that the ACF is fulfilling its role as an advisory committee to the Board and Chief Executive Team.

### **Chair of Area Clinical Forum.**

Following the recognised process for the election of Chair of the ACF it was confirmed that Mark Burrell would continue in the position for two years or a period determined in the upcoming review of ACF Constitution. I would like to give thanks for the support of my fellow advisory committee Chairs and Vice Chairs for the opportunity to continue in this role and work with the Board and the CET as we move forward.

### **Change of Committee Chairs.**

Dr Murray Smith and Dr Dympna McAteer have now stepped down from their roles as Chair and Vice Chair respectively of the Consultant Sub Committee of the Area Medical Committee. The forum would like to give thanks them for their invaluable contributions and look forward to welcoming new colleagues to these roles.

### **TriM**

Katie Cunningham and Zoe Morrison provided an overview of TRiM which is a structured peer-delivered framework designed to support staff following critical incidents and traumatic events. It is well recognised that staff often in frontline services can often be traumatised by providing care and that support following critical events can be invaluable to wellbeing of colleagues. TRiM has been involved in supporting many staff and there is a definite increase in the demand for this service. Sustaining the service is dependent on goodwill and voluntary participation of a small group of staff and there was a concern that there may be gaps in the governance and Executive oversight with no formal agreements in place with volunteers and no clarity around accountability.

It was noted that there are a number of challenges around the service with no certainty around funding after September 2025. Moving forward it was suggested that a proactive approach to identifying risk factors and preventative tactics would be very beneficial. Providing organisational resources would be of support to staff and signposting to these would be encouraged.

ACF thanked the presenters and were very supportive of this very worthwhile service.

### **External Diagnostic Review - Update**

Although many members of ACF attend the weekly ACF/CET meeting it was recognised that a formal update to the forum was required for the purposes of minuting and inclusivity.

Dr Adam Coldwells updated the committee as below.

NHS Grampian had been escalated to Level 4 on the Scottish Government Support and Intervention Framework on 12th May 2025. This had resulted in the provision of additional tailored support around financial performance, leadership and governance.

The Scottish Government had commissioned KPMG to undertake a diagnostic review of the organisation. This will assist the Board and the Executive Team to reach a better understanding of how the whole system is operating and help determine what changes can realistically be made within the financial resources available.

The Scottish Government had also established an Assurance Board, chaired by Stephen Gallagher the Director for Mental Health. There will be no NHSG membership on this Board but it is expected that there will be another four SG members, who have not been formally confirmed at this time, but will most likely be selected based on topic expertise across finance, leadership, governance and performance. Initial meetings with the Interim Chief Executive and Chair of NHS Grampian Board are scheduled for 3rd and 22nd July 2025 with Terms of Reference to be provided by the Scottish Government prior to those meetings. -

The External Diagnostic Review is due for submission to SG on Thursday 17th July prior to the meeting of the Assurance Board on 22nd July 2025. Timeframes around this work are extremely tight and KPMG have been asked to provide sight of the report before 17th July to allow for a factual accuracy check by the Chief Executive Team and the opportunity to brief Board members.

It is expected that the report will be available on 15th July 2025 leaving no time for any wider circulation for comment/feedback.

The report from KPMG will inform the recovery plan for NHSG which will be monitored by the Assurance Board. Although it seems that there is much external scrutiny around the organisation at this time it is important to view this as additional support and be clear that leadership, governance and the strategic direction for NHS Grampian remains with the Board, Board Committees and the Chief Executive Team.

## **Updates from advisory committees.**

### **Healthcare Scientists Forum**

There were continuing concerns around the lack of medical Physics experts particularly in radiotherapy physics and imaging/nuclear medicine. This has previously been escalated at the radiotherapy safety meeting and follow-up will be monitored. All labs now transitioned to ISO standard for laboratory accreditation and there was welcome news of the near completion of the new mortuary.

### **Grampian Area Nursing and Midwifery Advisory Committee.**

There was a discussion about Student nurses indicating that if they did not wish to move out of their own local area for training then there could potentially be issues of confidentiality and they may often know patients on a personal level. It was felt that there may be many reasons that students may not wish to travel for placements but that professionalism and confidentiality are well understood by staff, including students, and working in small communities may continue into their working lives.

### **Allied Healthcare Professionals Advisory Committee.**

This varied group of professionals are integral to many services and to gain a better understanding of the forum and the committee I was delighted to be invited to the most recent meeting to share how our committees and ACF work together. With this extended group there was a variety of topics discussed, including that the Tier 3 Service for Adult Weight Management redesign has recently paused referrals. This was noted by our primary care colleagues as a potential problem because the patients will re-present to the GP. Working within a whole system, this unintended consequence may not have been noted but now working collaboratively we hope to see GPs and AHP working together to mitigate these issues until referrals can be recommenced.

### **Grampian Area Applied Psychology Advisory Committee**

Highlighted concerns around administration support for the committee. This would mean that there may be no minute taken or meeting organized. It is well recognized that the advisory structures are vital to the functioning of the Board and further discussions will be held with the Board Secretary to see how this could be improved. This may be an opportunity to move forward with AI assistance with meeting minutes and action plans.

In summary, the ACF continues to work in a system under considerable pressure. We will await the diagnostic review and the improvement plan being formulated. As is our function, we will provide advice from the clinical teams to CET and the Board to help support the way forward.

**Mark Burrell**

**Chair Area Clinical Forum.**

**17/07/2025.**