

Ayrshire and Arran NHS Board
Minutes of a public meeting on Monday 5 February 2024
Hybrid meeting – Room 1 Eglinton House and MSTeams

Present: Ms Sheila Cowan, Vice Chair and Chair for meeting

Non-Executive Members:

Cllr Marie Burns

Dr Sukhomoy Das

Miss Christie Fisher

Mrs Jean Ford

Mr Liam Gallacher

Dr Tom Hopkins

Cllr Lee Lyons

Mr Marc Mazzucco

Mr Neil McAleese

Cllr Douglas Reid – attended part of meeting

Ms Linda Semple

Mrs Joyce White

Executive Members:

Ms Claire Burden (Chief Executive)

Mr Derek Lindsay (Director of Finance)

Dr Crawford McGuffie (Medical Director/Deputy Chief Executive)

Ms Jennifer Wilson (Nurse Director)

In attendance: Ms Caroline Cameron (Director of Health and Social Care, North Ayrshire)

Mrs Vicki Campbell (Head of Primary Care and Urgent Care Services)

Ms Tracey Cooper (interim Associate Nurse Director, Infection Prevention and Control) item 6.3

Mrs Kirstin Dickson (Director for Transformation and Sustainability)

Mr Tim Eltringham (Director of Health and Social Care, South Ayrshire)

Ms Nicola Graham (Director of Infrastructure and Support Services)

Ms Sarah Leslie (Human Resources Director)

Mr Fraser Neil (Head of Estates, Infrastructure and Support Services) item 10.1

Mrs Shona McCulloch (Head of Corporate Governance)

Mrs Angela O'Mahony (Committee Secretary) minutes

The Vice Chair, Ms Sheila Cowan, took on the Chair role on behalf of the Board Chair, Mrs Lesley Bowie, who was unable to attend the meeting.

The Chair welcomed Mr Liam Gallacher who was attending his first Board meeting since taking on the role of Non-Executive Board Member on 1 January 2024, as well as colleagues attending to provide updates. Ms Cowan also welcomed Ms Geraldine Jordan who had recently joined the Board as Director of Clinical and Care Governance and was attending as an observer.

1. Apologies

Apologies were noted from Mrs Lesley Bowie, Mr Ewing Hope, Mrs Lynne McNiven and Mr Craig McArthur.

2. Declaration of interests (001/2024)

There were no declarations noted.

3. Minute of the meeting of the NHS Board held on 4 December 2023 (002/2024)

The minute was approved as an accurate record of the discussion, subject to the following change being made:

Item 2, Declaration of interests - Dr Sukhomoy Das - change Neurovascular Medicine and Orthogeriatrics to Neurorehabilitation Medicine.

4. Matters arising (003/2024)

Paper 2 - Action Log

The Board action log was circulated to Board Members in advance of the meeting and all progress against actions was noted.

5. Chief Executive and Board Chair report

5.1 Chief Executive's report (004/2024)

- The Chief Executive took the opportunity to thank colleagues in Acute for the significant programme of work undertaken to support decongestion and improve flow at both Acute hospital sites in the run up to the Christmas public holiday period. Hospital occupancy had been under 95% going into Christmas day, a significant achievement as occupancy levels had not been below 100% for nearly two years. A similar approach would be adopted in planning for the Easter public holidays, building on learning identified from this work.
- The winter period was proving challenging. While COVID-19 levels were lower than in previous years, there were significant levels of Flu circulating in the community which led to patients being admitted to hospital. Infection prevention and control measures put in place to manage these infections impacted on patient flow across Acute services. The Chief Executive reassured Board Members that the Board would continue to work with partners to address the whole system challenges and pressures faced.
- The Chief Executive highlighted that the budget setting process for 2024-2025 was underway. The Board had received the first update from Scottish Government on next year's allocation on 19 December 2023 which indicated a flat uplift, with the pay uplift for 2023 to be rolled forward to 2024-2025. The financial position will be difficult to reconcile and system partners will be facing similar issues.

5.2 Board Chair's report

(005/2024)

- A Board workshop had taken place on 9 January 2024 which had provided the opportunity for leads across Mental Health Services to discuss changes and improvements made over recent years and plans for the future.
- A Board development session had taken place on 11 January 2024 to discuss outcomes from the self-assessment survey on the Blueprint for Good Governance. This had been an interactive session with good input from Board Members to identify areas for improvement in our governance processes. Governance Committee Chairs who attended the session, supported by the Head of Corporate Governance, would agree a draft development plan. The plan would be discussed at the Integrated Governance Committee meeting on 12 February and submitted to the Board meeting on 26 March 2024 for approval, prior to submission to Scottish Government by the end of March 2024.
- The Board Chair had attended the national Board Chairs' meetings in December 2023 and January 2024, with the main focus of discussion around financial matters.

6. Quality

6.1 Patient story

(006/2024)

The Director of Infrastructure and Support Services, Ms Nicola Graham, introduced the patient story about a patient's experience of hospital catering.

Ms Graham advised that James, a young man who was admitted to University Hospital Crosshouse as an emergency in March 2023, had been unable to eat for a period of time due to tonsillitis. James was inspired to create a poem based on his experience of the first meal he received in the ward following surgery.

Board Members were encouraged by this uplifting story. Members recognised that while the nutritional value of food was important, the way in which food was presented was also important. Mr Graham advised that the Board continued to look at the food being provided in hospital to ensure that this was healthy and tasty. She would consider how to promote and share James's poem widely across the organisation.

Outcome: Board Members noted the patient story.

6.2 Patient experience

(007/2024)

The Nurse Director, Ms Jennifer Wilson, presented the patient experience feedback and complaints information for quarter 2. A version of the report had been discussed in detail at the Healthcare Governance Committee meeting on 15 January 2024.

Ms Wilson reported that there were early indications of a downward trend in concerns and Stage 1 complaints in quarter 2. Stage 2 complaints had reduced slightly and numbers remained stable. Performance in responding to Stage 1 complaints remained high at 86%. Stage 2 performance had increased slightly to 42%. The report was beginning to pick up the early benefits from the complaint

handling improvement programme and these positive improvements would be reflected in the next report to Board. At the time of writing the report, performance for Stage 2 complaints had increased to 78%. The majority of out of time complaints were in Acute services and the team was meeting regularly with Acute colleagues to provide support.

Ms Wilson advised that there had been a rise in Scottish Public Services Ombudsman (SPSO) referrals in quarter 2. This rise was predicted due to the drop in performance against the 20 working day target. There had been a slight increase in investigations but numbers remained low.

Complaint themes were consistent, with waiting times and prisoner complaints related to changes to medication regimes being some of the top themes identified. Ms Wilson added that the Healthcare Governance Committee had discussed prisoner complaints and members were assured by the actions prison staff were taking and that these complaints were being handled appropriately.

The report also set out quality improvement activity and all types of feedback received. Ms Wilson highlighted that there had been a large increase in the use of Care Opinion, with the majority of feedback being positive or mildly critical. In terms of complainant satisfaction, the experience of complainants was similar to the previous quarter.

Ms Wilson explained in reply to a question from a Member that SPSO activity was influenced by complaint handling performance. Future reports should reflect the work done through the Acute Recovery Project to ensure that all complainants have been contacted and provided with an update. Ms Wilson emphasised that in taking forward improvement work the Board was keen to maintain the quality of complaint responses being provided as well as improving complaint handling performance.

In response to a query from a Member about complainant satisfaction with the complaint outcome, Ms Wilson recognised that going through the complaints process was difficult for complainants and at times it would not be possible to meet the complainant's expectations or there may be differences of opinion. Ms Wilson confirmed that SPSO was experiencing a backlog which was impacting on response rates, with investigations taking up to a year to conclude, which was difficult for patients and families awaiting the outcome.

Board Members discussed and took assurance from the complaint handling process and the work being done to improve performance.

Outcome: Board Members noted the patient experience feedback and complaints information for quarter 2.

6.3 Healthcare Associated Infection (HCAI) report (008/2024)

The Nurse Director, Ms Jennifer Wilson, introduced the HCAI report and invited Ms Tracey Cooper, interim Associate Nurse Director for Infection Prevention and Control (IPC) to present. A version of the report had been discussed in detail at the Healthcare Governance Committee meeting on 15 January 2024. HCAI performance data was reported in detail at the last Board meeting and the position remained unchanged.

Ms Cooper provided a summary of a small outbreak of *Clostridioides difficile* infection (CDI) affecting two patients in the Combined Assessment Unit at University Hospital Ayr in September 2023. She reassured Members that the outbreak was dealt with in line with IPC guidance, with Problem Assessment Groups and Instant Management Team meetings to discuss the outbreak. Learning opportunities had been identified related to documentation of clinical care and antimicrobial prescribing in Acute and Primary Care. The Antimicrobial Management Group had discussed and agreed a process moving forward to enable proactive sharing of learning with GPs and Primary Care to influence antimicrobial prescribing.

Ms Wilson highlighted the significant collaborative work taking place between the Infection Prevention and Control Team, Estates, Clinical colleagues and antimicrobial pharmacists to share learning as a result of outbreaks, as had been done for the small outbreak reported.

Board Members discussed the report and were reassured by the Board's quick response to this outbreak and the way it was managed in line with guidance and learning shared across the organisation.

Outcome: Board Members considered and noted the HCAI data as well as the ongoing work within the organisation to reduce HAI rates.

6.4 Quality and Safety Report – Acute services (009/2024)

The Nurse Director, Ms Jennifer Wilson, provided an overview of quality improvement activity in Acute services.

The report outlined progress against the Scottish Patient Safety Programme (SPSP) for Acute services aligned with the Excellence in Care programme. Ms Wilson highlighted progress against the following core measures, as detailed in the report:

- Falls
- Falls with harm
- Cardiac Arrest
- Pressure Ulcers
- Food Fluid and Nutrition
- National Early Warning Score

Ms Wilson highlighted that Acute services had recently implemented a quality and safety framework (QSF) on Acute sites and the report outlined the structures that support the framework.

The Medical Director, Dr Crawford McGuffie, highlighted that the report demonstrated the progress being made by the organisation following the pandemic in terms of leadership, staffing and multi-disciplinary working, supported by processes, such as, the adoption of Recommended Emergency Summary Plan for Emergency Care Treatment, and he anticipated that the position would improve in the coming months.

Board Members discussed the report and were encouraged by the positive improvements made particularly related to falls and falls prevention activity and

learning taking place. However, it was recognised that further improvement was needed in relation to pressure ulcer prevention work.

Ms Wilson advised in response to a query from a Member that MAST Falls Prevention training uptake was discussed in detail at the Staff Governance Committee. She emphasised the importance and priority given to role specific MAST training, such as, prevention of falls and pressure ulcers, as well as specific training in individual wards should training needs be identified.

Outcome: Board Members noted the quality improvement and safety activity in terms of SPSP and EiC in Acute services.

7. Corporate Governance

7.1 Governance Committee and IJB Membership (010/2024)

The Head of Corporate Governance, Mrs Shona McCulloch, presented a report with proposed changes to membership. The report reflected that Mr Liam Gallacher had joined the Board on 1 January 2024 and a number of gaps on Committees had been filled, as detailed in the report. Mrs McCulloch thanked Mr Derek Lindsay who had stepped in as a member of South Ayrshire Integration Joint Board on a temporary basis and would now stand down. Mrs Sheila Cowan would come to the end of her first term as a member of East Ayrshire IJB on 31 March 2024 and Members agreed a further three year term.

Outcome: Board Members approved proposed changes to membership.

7.2 Board Corporate Calendar (011/2024)

The Head of Corporate Governance, Mrs Shona McCulloch, presented the Board calendar of meetings for 2024-2025. The report provided assurance that Board Committees have established dates for meetings through 2024-2025. Governance Committees would hold one of their meetings face-to-face during the year.

A potential meeting conflict was identified by a Board Member and this would be reviewed outwith the meeting with the aim to adjust the schedule.

Outcome: Board Members approved the Board calendar of meetings, noting that these have been approved by individual committees through a robust planning process.

7.3 Audit and Risk Committee (012/2024)

The Committee Chair, Mrs Jean Ford, provided a report on key areas of focus and scrutiny at the meeting on 24 January 2024. The Chair presented the minute of the meeting held on 16 November 2023.

Outcome: Board Members considered and noted the minute and update.

7.4 Healthcare Governance Committee (013/2024)

The Committee Chair, Ms Linda Semple, provided a report on key areas of focus and scrutiny at the meeting on 15 January 2024 and the minute of the meeting held on 6 November 2023, chaired by Mrs Jean Ford.

Outcome: Board Members considered and noted the minute and update.

7.5 Performance Governance Committee (014/2024)

The Committee Chair, Ms Sheila Cowan, provided a report on key areas of focus and scrutiny at the meeting on 18 January 2024. The Chair presented the minute of the meeting held on 2 November 2023.

Outcome: Board Members considered and noted the minute and update.

8. Service

8.1 Health and care delivery planning (015/2024)

The Director of Transformation and Sustainability, Mrs Kirsti Dickson, outlined arrangements for the delivery plan for NHS Ayrshire & Arran (NHSAA) and the Scottish Government.

Mrs Dickson advised that the NHS Scotland Delivery Plan 2024-25 commissioning pack was received on 4 December 2023. The Scottish Government was keen to integrate the different planning cycles, including financial, service and workforce. This would provide Boards with the opportunity for greater collaboration and alignment of plans across the different disciplines, ensuring clearer priorities and goals are set for the benefit of the population of Scotland.

Boards had been asked to present realistic plans reflecting the challenging financial position faced going into 2024-2025. The planning priorities set out in the guidance were indicative of high level priorities which Boards would be expected to deliver in 2024-25, whilst remaining flexible enough to allow Boards to appropriately plan and prioritise within their financial context. Boards required to submit draft plans to the Scottish Government for review by 7 March 2024 and feedback was expected before the end of March 2024. This would enable the final plan to be presented to the Board in May 2024.

Board Members discussed the delivery plan and welcomed the opportunity to integrate financial, service and workforce planning cycles. Mrs Dickson commented in reply to a query from a Member that this high level three year planning document provided greater flexibility around what Boards were being asked to deliver and would give Board's more choice about what should be in their delivery plan based on the local structure. Equally, the opportunity to align financial and workforce planning would give greater visibility of the challenges faced and the impact on the Board's ability to deliver against some of the asks within the plan. The Board workshop on 29 February 2024 would allow Board Members to discuss the Board's Delivery Plan and Revenue Plan in detail.

Outcome: Board Members noted the arrangements for the delivery plan for NHSAA and the Scottish Government.

9. Performance

9.1 Performance Report

(016/2024)

The Director of Transformation and Sustainability, Mrs Kirsti Dickson, provided an update on the Board's position on the management and provision of unscheduled and planned care. The following key points were highlighted:

New Outpatients:

- Performance against the 12 week national target for New Outpatients remained below the 95% target and continued on a gradual reducing trend from 42% at March 2023 to 33.9% at December 2023. This was a particularly challenging area, with the lowest level of performance since 34.8% at February 2022. The overall total number of patients waiting continued to rise, reaching a new high of around 52,000 patients in December 2023.
- In December 2023, NHS Ayrshire & Arran had remobilised 86% of all New Outpatient activity compared to December 2019; below the local annual delivery plan (ADP) target of 95%.
- The number of New Outpatients waiting longer than 12 months had been on an increasing trend from 3,271 at the end of March 2023 to 7,149 at beginning of January 2024; with the number waiting over 18 months also gradually rising from 1,024 at end of August 2023 to 1,782 at beginning of January 2024. The number of patients waiting longer than 2 years had remained level at just over 400 patients from July 2023, however had been gradually increasing from 405 at start of October 2023 to 473 at beginning of January 2024.

Inpatient/Daycases:

- Compliance against the 12 week national target for Inpatients/Day Cases had increased from 51.1% in November 2023 to 55.7% in December 2023, with levels at their highest since April 2023. The overall total waiting list for Inpatient/Day Case treatment had increased slightly in December 2023 to 7,991 but did fall between October and November 2023 to 7,957, and still met the ADP trajectory of 8,330.
- In December 2023, NHSAA remobilised 80% of all Inpatient/Day Cases activity compared to December 2019; exceeding the local ADP target of 75%.
- The number of Inpatients/Day Cases waiting longer than 12, 18 and 24 months continued to fall. The next target set nationally is to eliminate 12 month waits for Inpatient /Day Cases in most specialties by September 2024. In NHSAA, 12 month waits were below 10 patients in 10 out of 16 specialties, with Trauma and Orthopaedics and ENT reporting the highest recorded waits. Some specialty areas were experiencing practical challenges as detailed in the report.

Musculoskeletal (MSK):

- Performance continued to deteriorate, with waiting times reducing from 30.2% in November 2023 to 19.6% in December 2023. As reported in the PGC update earlier in the meeting, PGD had a deep dive discussion with MSK colleagues on 18 January 2024 around some of the issues and challenges faced and plans to improve performance. PGC members had agreed that at the next meeting there

would be a deep dive discussion focused on unscheduled care, with a programme of future areas for 2024 to be proposed.

Diagnostics:

- Performance against the 6 week national target of 100% for Imaging had increased for the first time since June 2023 with compliance of 64.4% in November 2023. A breakdown across modalities was provided in the report.
- Performance related to Non-Obstetrics ultrasound was particularly challenging.
- Compliance against the 6 week national target for Endoscopy had shown a sharp increase from 50.3% in October 2023 to 62.2% in November 2023, the highest level of performance since March 2020. Overall, the Endoscopy waiting list was on a reducing trend, below pre-pandemic levels and ahead of the ADP trajectory.

Cancer:

- Performance against the 62-day Cancer target of 95% had increased from 74.0% in October 2023 to 84.5% in November 2023. This level narrowly failed to meet the local ADP trajectory of 86%.
- The 31-day Cancer target continued to meet the 95% national target, with levels of 100% in November 2023.

Mental Health:

- In November 2023, compliance in relation to Child and Adolescent Mental Health Services (CAMHS) was 100%, which continued to exceed the national target of 90%; and the local ADP trajectory of 98.6%.
- Performance for Psychological Therapy (PT) waiting times had shown increased compliance from 86.3% in October 2023 to 87.2% in November 2023, but remained below the 90% national target and lower than the local ADP trajectory of 90.0%.
- Drug and Alcohol Treatment services continued to exceed the national target of 90% in November 2023, with compliance at 98.5%.

Urgent Care:

- In December 2023, there were 11,574 patients who accessed care via Ayrshire Urgent Care Service (AUCS). 90% of these patients received alternative care in the community as an alternative to front door attendance. This exceeded the local target of 85%.
- Call Before Convey Pathway – there were 331 referrals to AUCS in December 2023. Following a clinical assessment with a senior clinician within AUCS, 90% went on to receive their treatment in a community setting. This exceeded the local target of 85%.
- Care Home Pathway - demand remained high for this pathway with 796 calls during December 2023, with 10% of these patients requiring to attend an acute hospital and 90% receiving treatment in a community setting. Performance continued to exceed the local target of 85%.

- Emergency Service Mental Health Pathway – 135 patients were referred through this pathway in December 2023 with patients accessing the Emergency Mental Health Team for appropriate care as an alternative to attendance at Emergency Department (ED).
- Rapid Respiratory Response Service – service expansion was well underway and the service was now receiving referrals from 17 local GP practices, with 50% coverage of the population registered as having Chronic Obstructive Pulmonary Disease.

Unscheduled Care:

- Compliance against the ED 4-hour standard had worsened slightly since November 2023, decreasing to 65.9%.
- In December 2023, there were 436 ED 12 hour breaches at UHC and 314 at UHA; this was an increase from the previous month at UHC and a reduction at UHA.
- The median turnaround time for ambulance vehicles arriving and departing when conveying patients to hospital was ahead of the Scottish median, rising to 68 minutes for the latest week ending 7 January 2024.
- There were a total of 198 delayed transfers of care in November 2023.

Board Members discussed the Performance report. The PGC Chair, Ms Sheila Cowan, advised in reply to a query from a Board Member that the report was discussed in detail at the PGC on 18 January 2024. As reported earlier in the meeting, PGC members had agreed that action plans discussed should have more specific detail to support assurance for risk mitigation. The Chief Executive emphasised that the Board clearly understood areas of performance which required greater focus to make gains, such as, to reduce rehabilitation waiting times and delayed discharges. The Performance report for the next PGC and Board meeting would highlight key areas of focus being prioritised, as well as deep dive work taking place to improve performance.

The Chief Executive advised in reply to a query from a Board Member on the urgent care challenges faced, that congestion within Acute services was multi-factorial, including longer length of patient stay in Ayrshire and Arran compared to other Board areas. She reassured Board Members that there was significant and targeted work taking place to improve patient flow and reduce congestion.

The Medical Director, Dr Crawford McGuffie, added that across NHS Scotland there was currently a capacity and demand mismatch and workforce deficit which created challenges, with a need to reform and recruit. He explained that this could impact on unscheduled care and length of stay, for example, should clinics be cancelled and patients require to access unscheduled care. He highlighted the significant improvement work being taken forward as outlined in the report, however, there was still significant work to be done.

Outcome: Board Members noted the update and the systems and processes in place to monitor and manage the continued impact of whole system pressures on the provision of unscheduled and planned care for Ayrshire citizens. Members took a measure of assurance from the improvement actions and welcomed that

more detail on actions and delivery would be available in future reports, noting that detailed scrutiny would be through the Performance Governance Committee with assurance provided to the NHS Board.

9.2 Financial Management Report for Month 9 to 31 December 2023 (017/2024)

The Director of Finance, Mr Derek Lindsay, provided an update on the Board's financial position for the nine months to 31 December 2023. The Board had agreed a deficit budget of £56.4 million in March 2023. The overspend at month nine was £39.6 million. The projected outturn for the end of the year was a £51.5 million deficit which did not meet Scottish Government expectations. Mr Lindsay explained that the Board would have to seek brokerage from the Scottish Government and everything possible was being done to improve on this position and minimise the level of deficit.

Mr Lindsay advised that the month eight financial report was discussed in detail at the Performance Governance Committee on 18 January 2024 and ten priority areas had been identified on which actions were being progressed.

Board Members received a detailed update on areas of overspend, as outlined in Appendix 1 of the report. There was a £22 million overspend for Acute services, of which £7.6 million related to unfunded beds. Other areas of overspend in Acute included £16.1 million overspend on nursing and medical pay and use of agency workforce to staff unfunded beds and fill vacancies. There was a £5.2 million Acute supplies overspend.

Board Members were advised that the Board had received a budget settlement letter on 19 December 2023 which stated that Boards would receive funding to cover 2023-2024 and 2024-2025 pay deals, however, that would be the only additional funding available. Therefore, Boards will require to fund non-pay cost pressures, such as prescribing and energy, from cash releasing efficiency savings (CRES), with the Board required to achieve 3% CRES. Financial planning was ongoing and there would be focused discussion on plans at the Board workshop on 29 February 2024. It was hoped to bring the Revenue Plan for 2024/2205 to the Board meeting on 26 March 2024.

Mr Lindsay highlighted that the Board had received a share of £250 million nationally for the New Medicines Fund (NMF), however, the NMF funding available to Boards in 2024-2025 was expected to be £80 million. This would leave a considerable shortfall in terms of NMF funding expectations which would be a significant issue in setting next year's budget.

Mr Lindsay explained in response to a question from a Board Member that there had been £1 million of efficiency saving from the NMF budget in the current year. The Board had also been able to receive a rebate for some of these medicines so this was reflected both on the budget and expenditure side. Mr Lindsay advised in reply to a query from a Member that Corporate reserves related to the Board's underlying historical deficit which was brought forward year on year. The deficit at month 9 was £17 million and at the year-end would be £21.7 million. Mr Lindsay offered to discuss with the Board Member in more detail outwith the meeting.

Board Members recognised the difficult financial challenges faced. In response to a question from a Board Member about Scottish Government brokerage, Mr Lindsay advised that he had written to Richard McCallum, Director of Health and Social Care Finance and Governance at the Scottish Government, indicating the Board's expected financial outturn and identifying that the Board would require around £50 million brokerage. The Scottish Government was currently looking at the national position as there was a limited pot available due to the difficult financial challenges faced. Board Members asked to be kept updated on the position related to Scottish Government brokerage.

Mr Lindsay clarified in reply to a query from a Member about the Acute supplies overspend for use of taxis and private ambulances, that this had been identified by Performance Governance Committee as one of the top ten priority areas to be taken forward. Some of the biggest areas of expenditure related to renal patients attending hospital for renal dialysis three times per week, as well as patients being discharged home by private ambulance. Work was ongoing with the Scottish Ambulance Service to ensure that national eligibility criteria was being followed, and there was ongoing engagement with East Ayrshire Community Transport services to see if there was an option for them to provide some community transport.

Outcome: Board Members noted the Board's financial position to 31 December 2023 and the financial challenges the Board faced in meeting the required deficit position for 2023/2024 and looking ahead to revenue planning for 2024/2025. Board would be updated on the brokerage position as information became available.

10. Decision

10.1 Annual Climate Emergency and Sustainability report 2022-2023 (018/2024)

The Director of Infrastructure and Support Services, Ms Nicola Graham, introduced the annual report for the Scottish Government. The report had been discussed in detail at the Climate Change and Sustainability Operational Group meeting on 25 January 2024.

Ms Graham advised that due to the national reporting template not being available until November 2023, the report was not able to be presented at the Board meeting in December 2023. A draft version of the report had been submitted to the Scottish Government by the January 2024 submission deadline.

Mr Fraser Neil, Head of Estates, presented the report which Boards were required to submit on an annual basis. This was the second year of reporting for the Scottish Government and the report provided a summary of climate change and sustainability activities across the organisation. The following key areas were highlighted:

- Overall, the Board was making good progress towards achieving the 2030 target to deliver a 75% reduction in emissions from 1995 CO2 levels.
- The Board had well established operational and strategic governance in place to oversee progress against the aims and objectives in the Climate Change and Sustainability Strategy.

- A number of programme initiatives were being progressed to reduce emissions from buildings, such as LED lighting and boiler replacement.
- The Board generated 25% of its energy from onsite renewables.
- Work was ongoing with Anaesthesia and Surgery to reduce volatile medical gas emissions and nitrous oxide.
- Travel and transport – there had been an increase in the number of electric vehicles in the Board’s fleet, with a phased transition of fleet cars from petrol and diesel to electric by 2025 and upgrades to charging infrastructure. Rollout of Microsoft Office 365 and MS Teams has been progressed to help improve remote working and stop the need to travel for meetings.
- Greenspace and biodiversity – a number of key greenspace projects have been further developed and implemented.
- Work was ongoing to improve active travel including promotional media videos about facilities at University Hospital Crosshouse and additional bicycle shelters.
- Activity related to sustainable procurement, circular economy and waste. Competitive tender process now includes community benefits. Overall reduction achieved in food and domestic waste and landfill in line with national targets. Further work required to increase the volume of recycling. Action plans have been issued to department heads where audit identified non-conformance to increase recycling.

In reply to a query from a Member, Mr Neil advised that a series of communications would be published across the organisation and externally to raise awareness of sustainability work taking place, with Stop Press publications planned on active travel, energy reduction and electric vehicles.

Board Members commended this positive report and the progress with actions to deliver climate change targets.

Outcome: Board Members agreed the annual report for Chief Executive approval and onward submission to the Scottish Government.

11. For information

11.1 Board briefing (019/2024)

Board Members noted the content of the briefing.

11.2 East Ayrshire Integration Joint Board (020/2024)

Board Members noted the minute of the meeting held on 11 October 2023.

11.3 North Ayrshire Integration Joint Board (021/2024)

Board Members noted the minute of the meeting held on 16 November 2023.

11.4 South Ayrshire Integration Joint Board (022/2024)

Board Members noted the minute of the meeting held on 15 November 2023.

Board Members commended the significant financial planning work being done by the Integration Joint Boards to deliver balanced budgets whilst protecting important services being delivered in the community.

12. Any Other Competent Business

12.1 Redesign of Systemic Anti-Cancer Therapies (SACT) service (023/2024) delivery in Ayrshire and Arran – Cabinet Secretary’s approval letter

The Director of Finance, Mr Derek Lindsay, reported that the Cabinet Secretary for NHS Recovery, Health and Social Care had approved the Board’s proposal to retain on a permanent basis the interim model of SACT services in Ayrshire and Arran which had been put in place during the pandemic and the process was now complete.

Outcome: Board Members noted the Cabinet Secretary’s approval letter.

13. Date of Next Meeting

The next public meeting of the NHS Ayrshire & Arran Board will take place at 9.30 am on Tuesday 26 March 2024 at 9.30am

Signed by the Vice Chair and Chair for the meeting

A handwritten signature in black ink, appearing to read 'Sheila', written in a cursive style.

26 March 2024

Sheila Cowan
Vice Chair – Ayrshire and Arran NHS Board