

**Ayrshire and Arran NHS Board**  
**Minutes of a public meeting on Tuesday 28 March 2023**  
**Hybrid meeting – Room 1, Eglinton House and MS Teams**

Present: Non-Executive Members:  
 Mrs Lesley Bowie, Board Chair  
 Cllr Marie Burns - attended part of meeting  
 Mr Adrian Carragher  
 Dr Sukhomoy Das - attended part of meeting  
 Miss Christie Fisher  
 Mrs Jean Ford – attended part of meeting  
 Mr Ewing Hope  
 Cllr Lee Lyons  
 Mr Bob Martin, Vice Chair  
 Mr Marc Mazzucco  
 Cllr Douglas Reid  
 Ms Linda Semple

Executive Members:  
 Ms Claire Burden (Chief Executive)  
 Mr Derek Lindsay (Director of Finance)  
 Mrs Lynne McNiven (Director of Public Health)  
 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)  
 Mrs Kirstin Dickson (Director for Transformation and Sustainability)  
 Mrs Joanne Edwards (Director for Acute Services)  
 Dr John Freestone (Associate Medical Director, Primary Care) Items 8.2 and 8.3  
 Ms Nicola Graham (Director Infrastructure and Support Services)  
 Ms Jennifer Hazley (Advanced Respiratory Physiotherapist) Item 6.1  
 Mrs Shona McCulloch (Head of Corporate Governance)  
 Ms Elaine Savory (Equality and Diversity Adviser) Item 10.4  
 Ms Sheila Tyson (Senior Manager, Planning, Performance and Commissioning, South Ayrshire Health and Social Care Partnership) Item 9.3

Mrs Angela O'Mahony (Committee Secretary) minutes

**1. Apologies**

Apologies were noted from Mrs Margaret Anderson, Ms Sheila Cowan, Dr Crawford McGuffie, Mr Tim Eltringham, Ms Sarah Leslie and Mr Craig McArthur.

The Board Chair bid farewell to the Vice Chair, Mr Bob Martin, who will be leaving NHS Ayrshire & Arran (NHSAA) on 30 April 2023, having been with the Board since November 2013. This followed an 18 month extension to his role granted during the

COVID-19 pandemic. She recognised and thanked Bob for his leadership and input to a number of committees over the years and his commitment and contribution across a range of work areas, and wished him well for the future.

## **2. Declaration of interests (025/2023)**

Ms Linda Semple declared an interest in relation to item 8.4, Director of Public Health report on women's health, as her partner is chair of North Ayrshire Women's Aid and is also on the Board of Directors of the Sexual Assault Centre in Edinburgh.

Mrs Jean Ford declared an interest in relation to item 10.5, new accommodation for medical students, as a Non-Executive Director at NHS Education for Scotland.

## **3. Minute of the meeting of the NHS Board held on 30 January 2023 (026/2023)**

The minute was approved as an accurate record of the discussion.

## **4. Matters arising (027/2023)**

### 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. The action in progress at the last meeting related to Harbourside property, Irvine will be discussed later in the meeting and approval sought to declare this as surplus.

## **5. Chief Executive and Board Chair report**

### **5.1 Chief Executive's report (028/2023)**

- The Chief Executive provided a detailed update on pressures across the health and care system related to length of hospital stay, delayed discharge and transfer of care.
- Following intensive, whole system work in early February 2023, the position had improved. However, moving through February there had been an increase in COVID-19 cases in the community which impacted on the rate of recovery, most noticeably with hospital occupancy exceeding 100 per cent. March 2023 had been a difficult month with challenges being experienced across the health and care system. There were currently 100 COVID-19 patients in hospital and over 150 staff off work with COVID-19. It was anticipated that COVID-19 would continue to circulate in the community into the summer.

The Chief Executive reassured Members of the Board's commitment to continue with the next phase of whole system recovery plans to reduce length of stay and bed occupancy, improve patient flow and enable operational teams to work safely and efficiently in delivering care.

Primary Care colleagues had seen a significant increase in face to face and virtual contacts, including in the out of hours period. The Chief Executive was grateful to the public for using this route which allowed people requiring acute care to be seen in hospital.

- The Chief Executive had welcomed the opportunity to meet colleagues from Mental Health services, and to work with Life Savers volunteers on 11 March 2023.

- The wellbeing hubs continue to be well used and the opening of the hub at University Hospital Crosshouse (UHC) has been welcomed.
- The Chief Executive had recently received a report from colleagues in North Ayrshire Health and Social Care Partnership to update on progress within Child and Adolescent Mental Health Services (CAMHS).
- NHS Education for Scotland had supported the purchase of a surgical robot at UHC. This will be an important part of the Board's surgical portfolio looking ahead to next year.

## 5.2 Board Chair's report

(029/2023)

- The Board Chair reported that following a national recruitment process, Mrs Joyce White OBE and Mr Neil McAleese had recently been announced as new NHSAA Non-Executive Board Members and she looked forward to welcoming both of them to the Board. Mrs White will join the Board on 1 April and Mr McAleese on 1 May 2023.
- The second edition of the national Blueprint for Good Governance was issued in December 2022. The revised Blueprint contained best practice in corporate governance, with a particular focus on the healthcare setting, and set out a model "blueprint" for a system of corporate governance to be applied consistently across all NHS Boards. The Board has been invited to attend a national session on implementation of the blueprint being held on 26 April 2023. The event is open to all Board Members and others in the organisation involved in governance.

## 6. Quality

### 6.1 Patient story

(030/2023)

On behalf of the Director of Health and Social Care for South Ayrshire, Ms Jennifer Hazley, a Respiratory Specialist Physiotherapist working in South Ayrshire, presented a patient story about the benefits of the reformed Pulmonary Rehabilitation Programme. Two patients, Anne and Margaret, shared their positive experience of how they had benefitted from the programme.

This patient story showed how an effective, person centred approach to care could help patients overcome some of the challenges of chronic illness.

Ms Hazley advised in reply to a query from a Member that the ten-week pulmonary rehabilitation programme was mainly for patients with lung based conditions, such as chronic lung disease. The programme could be delivered to groups of eight to 10 people or through a home based programme with telephone or video support. Following the programme, patients were encouraged to continue to exercise in the community. Ms Hazley confirmed that, more widely, cardiac rehabilitation and other physiotherapists have started prehab programmes.

**Outcome: Board Members noted the patient story.**

## 6.2 Patient Experience

(031/2023)

The Nurse Director, Ms Jennifer Wilson, presented the Patient Experience quarter 3 report. A version of the report was discussed in detail at the Healthcare Governance Committee (HGC) meeting on 27 February 2023.

Ms Wilson reported that there had been a steady increase in stage 1 complaints, mainly related to waiting times. There was significantly improved performance in responding to Stage 1 complaints. Stage 2 complaints had remained steady during this quarter. These complaints were increasingly complex across all areas. There had been a dip in responding to Stage 2 complaints. In response to current system pressures, the Complaints team had been working in collaboration with clinical colleagues to support completion of complaints and a complaints officer was aligned to each of the acute sites.

Members received an update on out of time complaints at 30 January 2023, with the majority of these complaints related to Acute services. Ms Wilson gave assurance that there was a robust process in place to support the management of these complaints.

Scottish Public Sector Ombudsman (SPSO) referrals decreased during this quarter and the number of investigations remained low.

Ms Wilson reported that there had been an increase in the number of Care Opinion (CO) posts considered positive to mildly critical and response compliance had increased. Ms Wilson confirmed that she would provide the national criteria for CO responses being minimally or mildly critical outwith the meeting.

Ms Wilson advised in response to a query from a Member that she would check the position regarding provision of percentage data within the sub-themes data chart. Ms Wilson reassured Members in reply to a query that themes related to patients being treated in a respectful and person centred manner will be included in a future themed report to HGC.

The Head of Primary Care and Urgent Care, Mrs Vicki Campbell, reassured Members in reply to a question that the Primary Care team was clearly sighted on complaints related to GPs and other Primary Care contractors and the Complaints team will progress specific actions with practices.

**Outcome: Board Members discussed the patient experience information for Quarter 3, noted the challenges experienced and actions being taken by services.**

## 6.3 Healthcare Associated Infection (HCAI) report

(032/2023)

The Nurse Director, Ms Jennifer Wilson, presented a report on activity to manage HCAI across NHSAA for year ending September 2022. A version of the report had been discussed at length at the HGC meeting on 27 February 2023. HGC members had welcomed changes to the reporting format and the additional data charts provided on HCAI performance in other Scottish Board areas.

Ms Wilson reported that there had been a reduction in Clostridium difficile infection (CDI) cases during the quarter and in the annual rolling rate. She highlighted the

work being done by the Antimicrobial Management Team which was having a significant and positive impact. The Board was above the national average for CDI rates. There were no CDI outbreaks identified during the reporting period.

Staphylococcus aureus bacteraemia (SAB) cases had decreased during the quarter and this was below the national average. The rolling annual rate had also reduced. Ms Wilson reassured Members that all SABs were investigated in detail and there was enhanced surveillance in line with the national protocol.

Cases of Escherichia coli bacteraemias (ECB) had shown a decreasing trend. The rolling annual rate had also reduced. The Urinary Catheter Improvement Group had been taking forward improvement work to reduce ECB rates. The Board's position was slightly above the national average.

Ms Wilson highlighted hand hygiene audit monitoring data and gave assurance that all audits were sitting above 90% compliance. Domestic and Estates cleaning compliance was above the national average. The report provided details of COVID-19 outbreaks up to 28 February 2023. As discussed earlier in the meeting, there had been an increase in COVID-19 outbreaks in the community and in acute and community hospitals. System pressures and high bed occupancy rates had an impact on COVID-19 outbreaks. Following interrogation of data, early indications were that there were several COVID-19 strains across the system.

Ms Wilson provided details of an outbreak of Extended Spectrum Beta Lactamase (ESBL) at Biggart Hospital and control measures implemented.

Board Members discussed the report and were encouraged by the positive downward trend for HCAs. Ms Wilson explained in response to a query from a Member that there had been a delay in verified data being available for this quarter. The Board Chair underlined the importance of the Board having the latest data available and she would discuss future reporting requirements with Ms Wilson out-with the meeting.

**Outcome: Board Members discussed and were assured of current activity to manage HCAI across NHS Ayrshire & Arran.**

#### **6.4 Quality and Safety Report - Maternity and Children Quality Improvement Collaborative (MCQIC) (033/2023)**

The Director for Acute Services, Mrs Joanne Edwards, presented a report outlining progress on core measures of the Scottish Patient Safety Programme (SPSP) MCQIC and Excellence in Care (EIC) progress locally for Maternity Services. A version of the report was discussed at the HGC on 27 February 2023.

- Stillbirth – the Board had continued to demonstrate sustained improvement. Every stillbirth was investigated following the Being Open process.
- Post-partum haemorrhage (PPH) - While there has been sustained improvement, data was variable. Focused improvement work was taking place to improve compliance in completion of the post-event checklist.

- Skin to skin contact – on average, 97% of parents achieved skin to skin compliance within one hour of birth.
- Maternity Early Warning System – In most cases, 85% compliance had been met, with support being given to clinical teams should improvement actions be required.

The HGC Chair, Ms Linda Semple, reiterated that the report had been scrutinised at the HGC meeting on 27 February 2023 and members had welcomed the improvements made. HGC had discussed PPH rates and received assurance that while the rate was variable due to the small numbers involved, the management of PPH was consistent across the organisation.

**Outcome: Board Members discussed and were assured of the quality improvement and safety activity in Maternity Services.**

## 7. Corporate Governance

### 7.1 Governance Committee Terms of Reference (ToR) (034/2023)

The Head of Corporate Governance, Mrs Shona McCulloch, presented the Governance Committee ToR for annual review and approval. Mrs McCulloch advised that each Governance Committee had reviewed its ToR and proposed changes had been supported by the Committee, with changes and additions highlighted in red.

Following discussion at the Integrated Governance Committee on 7 February 2023, a section had been added to each Committee's remit related to review of internal audit reports aligned to the Committee, as part of a continuous improvement approach to align all Governance Committee ToRs where appropriate. Committee Chairs had confirmed that they were content with this approach.

**Outcome: Board Members approved the Governance Committee Terms of Reference.**

### 7.2 Corporate Governance – member responsibilities (035/2023)

The Head of Corporate Governance, Mrs Shona McCulloch, advised that as discussion was ongoing in relation to member responsibilities, it was not possible to provide a report to the Board at this time. Once discussion had taken place with members and colleagues and proposals agreed, a paper would be sent to Members by email for virtual approval and homologated at the next Board meeting on 23 May 2023.

**Outcome: Board Members approved the approval process for proposed changes to membership of Board Committees and Integration Joint Boards (IJBs).**

### 7.3 Whistleblowing Quarter 3 report (036/2023)

The Nurse Director, Ms Jennifer Wilson, provided whistleblowing information for quarter 3. A version of the report had been discussed in detail at the Staff Governance Committee meeting on 13 February 2023.

Ms Wilson reported that three concerns had been received during quarter 3. As one of these concerns was received anonymously, it could not be managed through the whistleblowing process. However, it would be investigated in line with the principles of the whistleblowing standards.

Board Members received a detailed breakdown of concerns raised and progressed as whistleblowing in 2022-2023 and learning, changes or improvements to services or procedures. Two concerns received were ongoing and this reflected the complex nature of these concerns. Ms Wilson reassured Members that the Board was in regular contact with the individual raising a concern should an extension be required to allow a complex case to be thoroughly investigated.

Ms Wilson highlighted the significant work taking place to raise awareness of the whistleblowing process across the organisation. A survey is sent to individuals who had raised a concern to identify any themes and ensure learning from the process. Whistleblowing training continued to be provided across the organisation and there had been a 25% increase in uptake since the last quarter. A review of Confidential Contacts had taken place and roles were being advertised across the organisation, to date there had been a positive response and a process was in place with support from HR to appoint to these roles.

In response to a question from the Whistleblowing Champion, Ms Wilson provided reassurance that discussion would take place at the Whistleblowing Oversight Group in relation to an assurance process for concerns or risks raised that require immediate action to ensure patient safety.

The Whistleblowing Champion advised members that he had recently attended an event to address Scottish Parliamentarians to mark Whistleblowing Awareness Week, he added that this had been in a private capacity and not in his official role as the NHS AA Whistleblowing Champion.

**Outcome: Board Members received the whistleblowing report for Quarter 3.**

#### **7.4 Audit and Risk Committee (037/2023)**

The Committee Vice Chair, Mr Bob Martin, provided a report on key areas of focus and scrutiny at the meeting on 15 March 2023. The Vice Chair presented the minute of the meeting held on 23 November 2023.

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

#### **7.5 Healthcare Governance Committee (038/2023)**

The Committee Chair, Ms Linda Semple, provided a report on key areas of focus and scrutiny at the meeting on 27 February 2023. The Chair presented the minute of the meeting held on 9 January 2023.

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

## **7.6 Information Governance Committee (039/2023)**

On behalf of the Committee Chair, Mr Marc Mazzucco provided a report on key areas of focus and scrutiny at the meeting on 6 February 2023. Mr Mazzucco presented the minute of the meeting held on 14 November 2022.

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

## **7.7 Integrated Governance Committee (040/2023)**

The Board Chair provided a report on key areas of focus and scrutiny at the meeting on 7 February 2023. The Board Chair presented the minute of the meeting held on 7 November 2022.

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

## **7.8 Performance Governance Committee (041/2023)**

The Committee Chair, Mr Bob Martin, provided a report on key areas of focus and scrutiny at the meeting on 2 March 2023. The Chair presented the minute of the meeting held on 19 January 2023.

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

## **7.9 Staff Governance Committee (042/2023)**

On behalf of the Committee Chair, the Vice Chair, Mr Ewing Hope, provided a report on key areas of focus and scrutiny at the meeting on 13 February 2023. The Vice Chair presented the minute of the meeting held on 1 November 2022.

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

## **8. Service**

### **8.1 Health and care delivery planning (043/2023)**

The Head of Transformation and Sustainability, Mrs Kirstin Dickson, provided an overview of Scottish Government requirements in relation to the annual delivery plan (ADP) 2023-2024 and accompanying medium term plan (MTP) 2024-2026.

Mrs Dickson advised the timeframe for submission of this year's plan and the Board's ADP and MTP will be submitted in draft to Scottish Government in summer 2023 for consideration and agreement before being presented to the NHS Board meeting for approval later in the year.

The Chief Executive gave assurance that the Corporate Management Team (CMT) has been doing considerable background planning work since November 2022. The plans will align closely with the Board's Caring for Ayrshire strategic vision, working collaboratively with system partners following a sustainability approach to maximise the use of the existing estate.

**Outcome: Board Members noted the update on arrangements for delivery of NHSAA's ADP 2023-2024 and MTP 2024-2026.**



## **8.2 Primary Care General Medical Services (GMS)**

**(044/2023)**

The Head of Primary and Urgent Care, Mrs Vicki Campbell, provided an update on provision of GMS across Ayrshire and Arran. The report had been discussed and supported by the three Ayrshire IJBs.

Mrs Campbell provided an update on progress and developments in taking forward the Primary Care Improvement Plan (PCIP). The COVID-19 pandemic and associated remobilisation work had impacted on the timescale for delivering elements of PCIP 2020-20222 and consequently the implementation of the new GP contract by 2021-2022.

Board Members were advised that following the Scottish Government announcement on reduced funding in late 2022, the scope of the PCIP had been reduced to ensure greater focus on the three main contractual elements of the contract, pharmacotherapy, community treatment and care service (CTAC) and vaccinations. Due to workforce and recruitment challenges it would not be possible to transfer pharmacotherapy services from 1 April. The vaccination programme will be able to be fully transferred to the Board from 1 April. The CTAC service had made significant progress and a resilience model was approved in 2022.

The report outlined the current allocation of Mental Health Practitioner and MSK roles across practices within each of the Partnership areas. Mrs Campbell advised that development of additional professional roles within general practice was no longer deemed a priority and there would be no further investment at this stage without further Scottish Government funding.

The Associate Medical Director, Primary Care, Dr John Freestone, reiterated the financial and workforce recruitment challenges being faced and the uncertainty in relation to further development of the multi-disciplinary team within general practice. He reassured Members that work will continue around GP IT re-provisioning; the new telephony system; leadership and management; relaunch of the Centre of Excellence; and quality improvement work through the Ayrshire cluster GP Quality Lead.

Board Members acknowledged the significant service pressures and financial challenges facing Primary Care and wider services. Members acknowledged the positive work done and changes made in response to the pandemic, including planned digital developments. Mrs Campbell advised in response to a query from a Member that due to service pressures practices sometimes had to opt for digital options such as virtual or telephone appointments. She underlined the need for a balanced approach and to ensure that the most vulnerable individuals were able to reach practices. Dr Freestone gave assurance that the new telephony system will improve the flow of calls and that people could also come into the practice to speak to the receptionist.

The Chief Executive acknowledged the increasing demand for Primary Care services and added that estates issues and workforce pressures had been raised directly with the Scottish Government, alongside pressures across other parts of the healthcare system. The Chief Executive recognised and thanked Primary Care for the breadth and scale of work being done in challenging circumstances.

**Outcome: Board Members noted the update on GMS.**

### **8.3 Urgent Care Services**

**(045/2023)**

The Head of Primary and Urgent Care, Mrs Vicki Campbell, provided an update on provision of primary urgent care services through the Ayrshire Urgent Care Service (AUCS).

Mrs Campbell outlined the background to development of AUCS from an out-of-hours GP-led multidisciplinary service to a seven days per week 24 hours a day GP-led Flow Navigation Centre (FNC). Since the development of the FNC within AUCS as the Pathfinder Board in December 2020, the service had continued to develop and evolve various joint working models aligned to the national Redesign of Urgent Care (RUC) programme. The report outlined the activity and impact of the new additional pathways to support an improved patient journey, with a focus on community services.

Board Members commended the team for the significant work done to develop the AUCS service, working in collaboration with partners, including the Scottish Ambulance Service and Care Homes.

**Outcome: Board Members noted the update on Urgent Care services.**

### **8.4 Director of Public Health report on Women's Health**

**(046/2023)**

The Director of Public Health, Mrs Lynne McNiven, introduced the report on women's health across Ayrshire and Arran and invited the Consultant in Dental Public Health, Ms Jacky Burns, to present.

Ms Burns reported on the range of work being done in NHSAA towards achieving the ambitions outlined in the National Women's Health Plan for women and girls across the organisation and population. She highlighted the five core themes related to sexual and reproductive health, menopause, endometriosis and menstrual health, heart health and inclusion health, to reflect the broad outline of the national plan. The report detailed progress across these core areas and future plans.

Board Members welcomed this detailed report on women's health and recognised the challenges faced. Ms Burns advised in reply to a query that progress and impact of the Menopause workstream would be monitored through the Menopause at Work Policy Group.

In response to a question, Ms Burns advised that work related to men's health inequalities would continue to be considered through inclusion healthcare, with input from local Health Improvement Teams. Currently there were no national plans to work beyond existing targets for men's cancer screening.

**Outcome: Board Members noted the update on women's health across Ayrshire and Arran.**

## 9. Performance

### 9.1 Performance Report

(047/2023)

The Director for Transformation and Sustainability, Ms Kirstin Dickson, provided a detailed report on key performance and outcomes related to unscheduled and planned care up to January 2023, as outlined in the Assessment Summary at section 2.3 of the report. She highlighted the following areas:

#### Unscheduled care:

- Compliance against the four hour Emergency Department (ED) Standard was below target but had increased slightly compared to the previous month. Performance was just above the national average. The number of 12 hour breaches in ED had reduced compared to October 2022.
- Published data from Public Health Scotland showed that the number of delayed transfers of care had fallen for the first time since May 2022, with 215 across all three HSCPs in January 2023. Correspondingly, occupied bed days due to delayed discharge or delayed transfer of care had reduced for the first time since June 2022.

#### Planned care:

- There had been an increase in the number of people awaiting new outpatient appointment for the first time since the peak in September 2022, with the second highest number of waits recorded in January 2023.
- In the week commencing 20 February 2023, there were 393 patients waiting over 12 months for a new outpatient appointment. This was showing a reducing trend, with six specialties having zero waits.
- In the week commencing 20 February 2023, there were 865 inpatient and day case patients waiting over 18 months, an increasing trend since December 2022.
- There had been an increase in the number of patients waiting for a CT scan in January 2023 and a decrease in patients waiting for MRI scan. Local management information highlighted that compliance against the six week imaging access target was at 76.7% in January 2023 and performance was generally above the pre-COVID-19 levels. For Endoscopy, there had been a reduction in compliance against the six week target in January 2023.
- There was reduced performance against the 62 Cancer target to 72% in December 2022. However, the 31 day target continued to exceed compliance.
- CAMHS performance had continued to improve and exceeded the target at 98.7% in January 2023. Psychological Therapies' performance fell just below the target at 89% in January 2023.
- Performance for alcohol and drug treatment continued to exceed the target.

The report described ongoing actions and mitigations underway for each target to improve system performance.

Board Members discussed the performance challenges being faced. Ms Dickson advised in response to a question from a Board Member that the Board had recently been asked to provide a planned care access plan for the coming year to be reported through the Annual Delivery Plan which was due for submission in summer 2023. Ms Dickson proposed that updates on the plan be provided in performance reports thereafter to enable the Board to monitor progress.

In reply to a query from a Board Member, Ms Dickson explained that performance in delivery of targets could be impacted for a variety of reasons, including workforce capacity and recruitment issues. There were shortages in key staffing groups which affected Boards across NHS Scotland. She reassured Members that these issues were flagged through regular ongoing conversation on access and waiting times with the Scottish Government.

**Outcome: Board Members received an update and assurance on the management and provision of unscheduled and planned care.**

## **9.2 Financial Management Report for Month 11 (048/2023)**

The Director of Finance, Mr Derek Lindsay, presented a report on the Board's financial position at Month 11 to 28 February 2023. The Board's Revenue Plan for 2022-2023 was a deficit budget of £26.4 million. The position after eleven months was an overspend of £22 million.

Mr Lindsay highlighted allocations received in month 11. The Board had benefited from extra non-recurring funding for New Medicines Fund which had improved the financial position. The Board now projected a deficit budget of £24.8 million in 2022-2023, with the underlying £26.4 million deficit to be carried forward into next year.

Board Members received a detailed update on the Acute services budget, areas of overspend and unachieved cash releasing efficiency savings (CRES). One of the main drivers for the overspend was unfunded beds opened. While some of these costs were covered by COVID-19 funding, others were not. Next year, none of these costs would be covered by COVID-19 funding. In addition, there had been high use of agency medical and nursing staff, totalling around £1.5 million each month. Closure of unfunded beds should significantly reduce use of additional agency staff.

Mr Lindsay reported that staff sickness absence levels had increased sharply from September 2022. This was mainly due to COVID related absence no longer being excluded from sickness absence reporting. There had been a further sharp increase to around 7% in December 2022. The absence rate had then fallen in both January and February 2023 and was sitting at 5.4%. However, given the increase in COVID cases in March 2023, it was expected that sickness absence levels would also increase.

**Outcome: Board Members discussed the Board's financial position at Month 11 to 28 February 2023.**

### **9.3 South Ayrshire Health and Social Care Partnership annual performance report (SAHSCP APR) 2021-2022 (049/2023)**

Ms Sheila Tyson, Senior Manager, Planning, Performance and Commissioning, SAHSCP presented the SAHSCP APR 2021-2022. The report was approved by the South Ayrshire IJB Performance and Audit Committee on 28 February. Ms Tyson advised that the report's submission had been delayed due to the COVID-19 pandemic. Normal reporting timescales would resume for the 2022-2023 report.

Ms Tyson highlighted the wide range of successful work achieved over the reporting period, as well as priority areas for the following year, as detailed in the report.

Board Members were encouraged by the range of positive work during 2021-2022 but noted the challenges related to delayed discharge and delayed transfer of care. Ms Tyson explained that while there had been a reduction in external care at home support during the reporting period which reflected current challenges in the market, in recent months there had been an increase in in-house care at home provision which would be included in the next report. She reassured Members that whole system work was taking place to support the care pathway, promote hospital discharge and ensure people are getting the right care at the right time.

**Outcome: Board Members noted the SAHSCP APR 2021-2022.**

## **10. Decision/Approval**

### **10.1 Revenue Plan 2023-2024 (050/2023)**

The Director of Finance, Mr Derek Lindsay, presented the revenue plan 2023-2024 which provided an overview of the Board's financial position.

Mr Lindsay advised that the revenue plan had been developed over many months and had gone through iterations with CMT and Performance Governance Committee input. In December 2022, the Scottish Government had announced its draft budget for 2023/24 which gave a 2% general allocation uplift equating to £16.7 million for NHSAA. In addition, £3 million of funding given last year for the Health and Social Care Levy (which was abolished last November) remains available taking the funding available to £19.7 million.

Appendix 1 of the report detailed £53.2 million of new cost pressures for 2023-2024, with a £33.5 million gap between cost pressures and the funding uplift available. This is mitigated by £9.6 million of CRES as detailed in the report. However, this leaves a £23.9 million imbalance for 2023-2024 which has been added to the £26.4 million recurring imbalance from the current year which together makes a cumulative recurring deficit of £50.3 million.

Board Members were advised that in 2022-2023 there was additional funding from Scottish Government for COVID costs, however, in 2023-2024 this is limited to funding the vaccination programme and some testing and personal protective equipment. Other additional costs, such as, enhanced cleaning regimes and additional staff in A&E and CAU to support respiratory pathways, are shown as cost pressures to be funded by the Health Board. There will not be additional funding from Scottish Government for extra acute beds next year which cost about £12 million in the current year.

The report showed unfunded wards and timescales in the plan to close these beds. Should they close in line with the plan, the Board will have an unfunded cost of around £6 million. However, if none close during the year there would be £12 million of cost. The projected deficit for 2023/24 assumes the beds close in line with the timescales set out in the report, with an additional £6.1 million overspend on top of the underlying recurring deficit of £50.3 million. Therefore, the budget for 2023-2024 is a £56.4 million deficit.

A draft financial plan showing a £55.4 million deficit was submitted to Scottish Government on 9 February which was followed by a meeting with Scottish Government officials. The final financial plan showing a deficit of £56.4 million was submitted on 16 March against which the Board's financial performance will be monitored. The Board was asked to approve a deficit budget of £56.4 million.

The Board Chair advised that a Board workshop had taken place to allow detailed discussion of the revenue plan and while the position had since improved, there was serious concern about the Board's financial position. Board Members acknowledged that before the pandemic the Board was on an improvement trajectory and there was a need to look beyond the current challenges and set achievable stretch goals to improve the financial position. Board Members emphasised the need for transparency, robust governance and scrutiny through the Performance Governance Committee to provide assurance to the NHS Board on progress towards achievement of financial goals.

The Chief Executive reaffirmed the need for longer term transformation work to reduce the deficit. CMT had held three workshop sessions to identify work under the transformation programme to enable the Board to achieve financial sustainability. Focused work will take place over the next 12 months to develop a medium term plan to tackle the financial challenges being faced. Digital reform and bed based care had been identified as key drivers for transformational change and to set the Board's financial position on an improvement trajectory.

In reply to a query from a Board Member the Chief Executive advised that CMT regarded delivery of CRES as a system-wide issue and a balanced approach was being adopted. Mr Lindsay highlighted that the three Ayrshire IJBs had devolved responsibility to manage their budgets and deliver CRES.

**Outcome: Board Members approved the Board's Revenue Plan for 2023-2024.**

## **10.2 Project Bank Accounts**

**(051/2023)**

The Director of Finance, Mr Derek Lindsay, advised that Scottish Government bodies were now required to establish a Project Bank Account (PBA) for each construction contract where the estimated award value was at least £2 million. Mr Lindsay sought approval to establish a PBA for the National Treatment Centre and for any future capital projects as required. It was proposed the Director of Finance would be authorised to sign the Trust Deed on behalf of NHSAA.

**Outcome: Board Members approved establishment of a Project Bank Account for the National Treatment Centre and for any future**

**capital projects when required, with the Director of Finance being authorised to sign the Trust Deed on behalf of NHS Ayrshire & Arran.**

### **10.3 Internal Audit Plan 2023-2024**

**(052/2023)**

The Director of Finance, Mr Derek Lindsay, presented the draft Internal Audit Plan with proposed areas for review in 2023-2024 and advised Members that Azets had been confirmed as the Board's new internal auditor, in accordance with authority delegated to the Audit and Risk Committee. The plan had been discussed and approved at the Audit and Risk Committee on 15 March 2023.

**Outcome: Board Members approved the Board's internal audit plan for 2023-2024.**

### **10.4 Mainstreaming report**

**(053/2023)**

The Nurse Director, Ms Jennifer Wilson, introduced the Board's 2023 Mainstreaming report and invited the Equality and Diversity Manager, Ms Elaine Savory, to present.

Ms Savory outlined the Board's progress against equality duties in line with equalities legislation. The report detailed progress in relation to mainstreaming the equality duty; equality outcomes for 2021-2025; gender pay gap information; statements on occupational segregation; equal pay statement; and workforce equalities data.

Board Members discussed these important papers and the successful work being done to deliver equality outcomes and mainstreaming. It was recognised that sharing outcomes with Partners across Ayrshire made it easier to deliver this work in partnership. Members were encouraged that employee monitoring data indicated that staff were more willing to disclose information which it was felt reflected the Board's equality and diversity improvement journey.

**Outcome: Board Members approved the Board's 2023 Mainstreaming report for publication end April 2023 in line with legislative requirements.**

### **10.5 New accommodation for medical students**

**(054/2023)**

The Director of Infrastructure and Support Services, Ms Nicola Graham, presented a proposal to purchase a fourth property at the Scholars Development in Kilmarnock for accommodation for medical students. This followed confirmation of additional funding from NHS Education for Scotland (NES) Additional Cost of Teaching. The funding would cover the property cost as well as costs required to convert the house for multiple occupancy. Provision of additional capacity for medical students at the Scholars will in turn provide additional flexibility across the remaining residential estate to support wider recruitment programmes.

**Outcome: Board Members approved the purchase of new accommodation.**

## **10.6 Harbourside property surplus (055/2023)**

The Director of Infrastructure and Support Services, Ms Nicola Graham, presented the proposal to declare a property at Harbourside, Irvine, as surplus to NHSAA.

Ms Graham highlighted discussion at the Board meeting in November 2022 and the request to re-evaluate whether the property could be refurbished for use as staff accommodation. Ms Graham explained that an external architect had previously been commissioned to undertake a cost feasibility study on the property and this had estimated backlog maintenance liabilities of around £84,000. Based on the feasibility study, the Infrastructure Programme Board (IPB) had agreed this would provide poor value against the cost of purchasing a new property. The decision was also supported by CMT.

**Outcome: Board Members approved the proposal to declare the Harbourside, Irvine property as surplus and proceed with disposal.**

## **11. For information**

### **11.1 Board briefing (056/2023)**

The Board Chair congratulated Mr Adrian Carragher on his award from the Academy of Healthcare Science in recognition of the work he had done with the Academy. Board Members noted the content of the briefing.

### **11.2 East Ayrshire Integration Joint Board (057/2023)**

Board Members noted the minute of the meeting held on 14 December 2022.

### **11.3 North Ayrshire Integration Joint Board (058/2023)**

Board Members noted the minute of the meeting held on 15 December 2022.

### **11.4 South Ayrshire Integration Joint Board (059/2023)**

Board Members noted the minutes of the meetings held on 14 December 2022 and 15 February 2023.

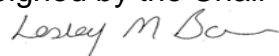
## **12. Any Other Competent Business (060/2023)**

There was no other business.

## **13. Date of Next Meeting**

**The next public meeting of the NHS Ayrshire & Arran Board will take place at 9.30 am on Tuesday 23 May 2023**

Signed by the Chair



23 May 2023

**Lesley Bowie**

**Chair – Ayrshire and Arran NHS Board**