

**Ayrshire and Arran NHS Board**  
**Minutes of a public meeting on Monday 29 November 2021**  
**9.30am, MS Teams meeting**

- Present:
- Non-Executive Members:  
Mrs Lesley Bowie, Board Chair – attended part of meeting  
Mr Bob Martin, Vice Chair  
Cllr Laura Brennan-Whitefield  
Mr Adrian Carragher  
Cllr Joe Cullinane  
Dr Sukhomoy Das  
Mrs Jean Ford  
Mr Ewing Hope  
Mr Marc Mazzucco – attended part of meeting  
Cllr Douglas Reid – attended part of meeting  
Ms Linda Semple
- Executive Members:  
Prof Hazel Borland (Interim Chief Executive) – attended part of meeting  
Ms Jennifer Wilson (Interim Nurse Director)  
Dr Crawford McGuffie (Medical Director)  
Mr Derek Lindsay (Director of Finance)
- In attendance:
- Ms Caroline Cameron (Director of Health and Social Care, North Ayrshire)  
Mrs Kirstin Dickson (Director for Transformation and Sustainability)  
Mrs Joanne Edwards (Director for Acute Services)  
Mr Tim Eltringham (Director of Health and Social Care, South Ayrshire)  
Mr Craig McArthur (Director of Health and Social Care, East Ayrshire)  
Ms Nicola Graham (Director Infrastructure and Support Services) –  
attended part of meeting  
Mr David Kimmett (Chief Nurse, University Hospital Crosshouse)  
Ms Sarah Leslie (Human Resources Director)  
Mrs Shona McCulloch (Head of Corporate Governance)
- Mrs Angela O'Mahony (Committee Secretary) minutes

The Board Chair welcomed everyone to the meeting. There was a change of order to the agenda to allow the Board Chair and Interim Chief Executive to provide their updates and then leave to join the Ministerial Annual Review meeting.

The Board Chair welcomed Mr Marc Mazzucco, a new Non-Executive Board Member who was attending his first Board meeting since joining NHS Ayrshire & Arran (NHSAA) on 1 November 2021. The Board Chair bid farewell to Ms Mhairi Kennedy, who had recently stood down as a Non-Executive Board Member. A recruitment process would take place through Public Appointments Scotland to identify a new Non-Executive in the new year.

The Board Chair reported that Ms Claire Burden had formally been appointed as NHSAA's new Chief Executive and would take up the position on 13 January 2022. The Board Chair thanked Prof Hazel Borland and Ms Jennifer Wilson for stepping up to the Interim Chief Executive and Interim Nurse Director roles from 1 July 2021, and recognised all the work they were doing, working closely with colleagues to maintain progress in difficult circumstances.

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

### **1.1 Chief Executive's report (159/2021)**

- The Interim Chief Executive, Prof Hazel Borland, reported that the Scottish Government had asked NHS Boards to accelerate the COVID-19 vaccination programme. Prof Borland gave assurance that the Board was working hard to increase staffing and the number of vaccination appointments available, particularly between now and Christmas, and into the new year.
- Prof Borland advised that COVID-19 inpatient cases had decreased and this demonstrated the benefits of the vaccination programme, and that staff across the health and care system were following guidelines. Prof Borland reminded everyone that COVID-19 was very present in local communities and she underlined the need to continue to be very vigilant, particularly in light of the new variant.
- Prof Borland reported that the health and care system remained under significant pressure, with some patients not in the right care setting and delays in resolving this. Increasing frailty and complex conditions requiring patient admission, as well as staff absence were creating significant system challenges. Additional winter capacity arrangements had been in place since the summer and would continue in the coming months, and this brought additional workforce challenges. Staff were working very hard across the system to provide safe and quality care to patients across the system. Due to the continued significant pressures being experienced the Board was not currently in a position to restart planned surgery which had been paused since July 2021.
- Board Members were advised that Board Chairs and Chief Executives across Scotland continued to join weekly meetings with the Cabinet Secretary who had a very good understanding of the situation across the country. In addition, Prof Borland was involved in weekly meetings with Local Authority Chief Executives and Integration Joint Board Chief Officers to discuss delayed transfer of care and ongoing improvement work.
- Prof Borland underlined that there was a need for the health and care system and wider communities to work together to get through the difficult winter months ahead. Prof Borland reiterated that staff across the system continued to do their utmost to provide quality care. There was a need to ensure that as a community everyone continued to adhere to COVID-19 guidelines and use services appropriately, including use of alternative services available where possible.

### **1.2 Board Chair's report (160/2021)**

The Board Chair handed over the chair to Mr Bob Martin, Board Vice Chair.

## **2. Apologies**

Apologies were noted from Mrs Margaret Anderson, Mr Michael Breen, Mrs Vicki Campbell, Ms Sheila Cowan and Mrs Lynne McNiven.

**3. Declaration of interests (161/2021)**

Mrs Jean Ford declared an interest in relation to item 7.3, Medical Education Group six month progress report, in her role as a Non-Executive member of NHS Education for Scotland.

**4. Minute of the meeting of the NHS Board held on 4 October 2021 (162/2021)**

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

**5. Matters arising (163/2021)**

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.

**6. Quality**

**6.1 Patient story (164/2021)**

The Director for Acute Services, Mrs Joanne Edwards, introduced the patient story and invited the Chief Nurse at University Hospital Crosshouse (UHC), Mr David Kimmett, to present the story.

Mr Kimmett outlined the work done by a member of nursing staff in the Combined Assessment Unit (CAU) at UHC, Kelly McRoberts, to reach out to the Royal National Institute for the Deaf's (RNID) Local Project Officer for advice and support to try and improve the patient experience for any patients with a sensory impairment.

Mr Kimmett gave an example of the positive benefits of the use of a personal listener when providing care to an elderly gentleman with hearing difficulties admitted to CAU who had to be immobilised due to a potential C-spine fracture. There were plans to roll out the approaches adopted to other wards for patients with sensory impairment.

Board Members recognised and thanked all staff involved for the positive additional work they had undertaken to promote a patient centred approach and improve communication and patient experience for patients with sensory impairment in the CAU at UHC.

The Area Clinical Forum Chair and Head of Audiology, Mr Adrian Carragher, reiterated the challenge to communicate with patients with a hearing impairment, particularly during the COVID-19 pandemic, as a clear face mask had not yet been formally approved for use in NHS care settings. Mr Carragher highlighted the technology and resources available across the organisation to promote communication with patients with a hearing impairment. The Interim Nurse Director, Ms Jennifer Wilson, advised that as previously reported to the Board, NHSAA had received devices for use in clinical care settings and a further bid had been submitted. These devices had been invaluable in supporting the technology described. The Medical Director, Dr Crawford McGuffie, would discuss further with Mr Carragher outwith the meeting to see what could be done to further promote the resources available across the organisation and report back.

**Outcome:** Board members noted the patient story and the valuable contribution all staff can make when they take a person centred approach to ensure patients have a positive experience whilst using services.

## 6.2 Patient experience (165/2021)

The Interim Nurse Director, Ms Jennifer Wilson, introduced the patient experience themed report on the Volunteer programme.

Ms Wilson provided an update on volunteering activity within NHSAA. The report outlined the key steps being taken to reinvigorate the service, remobilise existing volunteers and recruit to new volunteer roles, and the future vision for this invaluable service moving forward to 2022 and beyond. NHSAA was proud to invest in its volunteers and promote the benefits of their valuable contribution throughout hospitals and communities. Volunteering could empower people to fulfil their potential and acquire new skills and knowledge.

The HR Director, Ms Sarah Leslie, underlined the importance of the Volunteering programme and the value of experiential learning, particularly for young people considering a career within NHS Scotland. Ms Leslie highlighted the excellent contribution of the Scottish Government Resilience hub and noted that volunteers were ever present across NHS Scotland, in particular as part of the COVID-19 response.

Post-meeting update: Ms Wilson advised in response to a question from a Board Member that work was taking place to identify recurring funding for the Volunteer Manager post.

**Outcome:** Board Members discussed the report on Volunteering within NHSAA and the vision for ensuring development of a more inclusive, innovative programme moving forward to 2022 and beyond.

## 6.3 Healthcare Associated Infection (HCAI) report (166/2021)

The Interim Nurse Director, Ms Jennifer Wilson, provided an update on the Board's performance against the national HCAI Standards using the latest verified data for the year ending June 2021. The report had been considered in detail at a recent Corporate Management Team meeting

Ms Wilson reported that there had been a reduction in Clostridium difficile infection (CDI) cases up to June 2021 compared to the last quarter, with no cases linked to outbreaks. The increase in the annual rate was starting to level off as a result of decreasing rates over the last six months. Ms Wilson highlighted improvement activity taking place to reduce CDI cases, including focused work to reduce antimicrobial prescribing.

Board Members were advised that there had been an increase in Staphylococcus aureus Bacteraemias (SAB) during the last quarter. Provisional data for the quarter ending September 2021 indicated a reduction in the quarterly rate. As a result of the lower levels compared to last year, the Board's annual SAB rate continued to decline. The Infection Prevention and Control Team had mobilised twice monthly

SAB review meetings to enable more detailed review of each case to determine the point of origin and direct interventions.

Ms Wilson reported that there had been an increase in Escherichia coli Bacteraemias (ECB) during the quarter although the rate remained below the peak levels seen in the last six months of 2020. Reducing urinary catheter related infections remained the Board's primary strategy for lowering the overall ECB rate, and it was hoped to remobilise the Urinary Catheter Improvement Group in January 2022.

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

#### **6.4 Hospital Standardised Mortality Rate (HSMR) annual report (167/2021)**

The Medical Director, Dr Crawford McGuffie, presented the annual HSMR update. The report had been discussed in detail at the HGC meeting on 1 November 2021.

Dr McGuffie outlined the background to the HSMR process and the changes made in May 2019 to refine and update methodology nationally to ensure its robustness and reliability. The number of HSMR reviews had reduced from March 2020 due to clinical capacity in the system. A local review of the processes around HSMR reviews was completed in May 2021, to optimise outputs and reduce harm through thematic review.

Dr McGuffie provided the most recent national data relating to NHSAA's Acute hospital HSMR position and gave assurance that both University Hospital Crosshouse and University Hospital Ayr were at the Scottish mean and did not exceed confidence intervals. The report outlined plans to remobilise and recover activity in relation to HSMR reviews.

Dr McGuffie confirmed, in response to a question from a Board Member, that while not formally part of the HSMR process, NHSAA had a robust process in place for Mortality and Morbidity Reviews.

**Outcome: Board Members discussed and endorsed the proposed governance structure and process for future HSMR reviews, to ensure that themes are widely shared throughout the organisation for learning.**

#### **6.5 Public Protection (168/2021)**

The Interim Nurse Director, Ms Jennifer Wilson, presented the proposal to remodel leadership across NHSAA Child and Adult Protection Services within a Public Protection model with a robust Accountability and Governance Framework. The proposal was approved by the HGC on 1 November 2021.

Ms Wilson explained that while there were already robust governance arrangements in place for Child Protection and Adult Support and Protection, there were often areas of overlap. The Public Protection model would offer enhanced protection across life span, supported by a robust Accountability and Governance Framework, as detailed at Appendix 2 of the report.

Board Members received an update on the work ongoing to implement the new Multi-Agency Risk Assessment Conference (MARAC) process to be hosted within NHSAA.

**Outcome:** Board Members noted the proposal to remodel leadership across NHSAA Child and Adult Protection Services within a Public Protection model with a robust Accountability and Governance Framework. Board Members noted the work underway to implement the new MARAC service within NHSAA.

## 7. Corporate Governance

### 7.1 Corporate Governance arrangements (169/2021)

The Board Vice Chair, Mr Bob Martin, reported that due to the ongoing pressures across the health and care system, the Interim Chief Executive and Board Chair had reviewed the Board's governance arrangements. A flexible and slimmed down approach had been proposed, whilst agreeing the importance of maintaining the Board's standing committees. The recommendation was supported at a meeting of the Integrated Governance Committee on 1 November 2021.

The Head of Corporate Governance, Mrs Shona McCulloch, gave assurance that the Board's approach to governance will be reviewed routinely in terms of ongoing arrangements.

**Outcome:** Board Members approved the flexible governance arrangements in place for Governance committees and noted that the position will remain under review.

### 7.2 Area Professional Committees (170/2021)

The Area Clinical Forum Chair, Mr Adrian Carragher, provided an update on the arrangements for Professional Committee member nominations and elections to deliver a return to agreed corporate governance processes, as set out in the Professional Committees' constitutions, from August 2022. The report outlined the staggered approach proposed in regard to members' terms of office for continuity and succession planning. The report was discussed and supported at the ACF meeting held on 26 November 2021.

**Outcome:** Board Members noted and were reassured by arrangements for Professional Committee member nominations and elections to deliver a return to agreed corporate governance processes, as set out in the Committees' constitutions, from August 2022.

### 7.3 Medical Education Governance (171/2021)

The Medical Director, Dr Crawford McGuffie, provided an assurance report on activity in relation to medical education and training over the last six months, including performance against the standards required by the regulator, the General Medical Council (GMC) and by NHS Education Scotland (NES), Scotland Deanery.

Board Members were advised that the COVID-19 pandemic had impacted across all services. Dr McGuffie highlighted specific challenges within the Postgraduate training programme and mitigating actions being taken. Board Members were advised of the successful work within Undergraduate training and through the Clinical Fellows programme.

Dr McGuffie gave assurance that NHSAA medical education and training had strong senior medical and service management leadership input, including the Board Chair as chair of the Medical Education Governance Group. This had been recognised and highlighted as good practice by NES during their visits.

**Outcome:** Board Members noted the update on activity in relation to medical education and training over the last six months and were encouraged by the positive work being done despite the considerable pressures facing services.

#### 7.4 Whistleblowing update report

(172/2021)

The Interim Nurse Director, Ms Jennifer Wilson, presented the Whistleblowing Q2 report. The report had been discussed in detail at the Staff Governance Committee (SGC) meeting on 15 November 2021.

Board Members were advised that there were two concerns received that were appropriate for the whistleblowing process. One of these concerns had started as stage 1 and had been escalated to stage 2. One concern had been closed during the quarter and partially upheld. One concern from Q1 remained open, with permission agreed to extend the investigation period.

Ms Wilson explained that due to the small number of concerns since the new Standards were introduced, it was not yet possible to identify trends or themes but this would be considered over time. A process was being developed to gather feedback from those involved in the whistleblowing process, to promote learning and support, and this would reflect the need for confidentiality of those raising concerns.

The Board's Whistleblowing Champion, Dr Sukhomoy Das, gave reassurance that the Board had a robust Whistleblowing process in place which included the Health and Social Care Partnerships. Dr Das advised that there had been no anonymous concerns raised through the whistleblowing process during the quarter. Ms Wilson explained that there had been discussion at the last Whistleblowing Oversight Group in relation to anonymous concerns raised and a review process would be presented for approval at the Group's next meeting.

Board Members discussed the process to monitor employment or HR concerns raised that were not appropriate for the Whistleblowing process. The Head of Corporate Governance, Mrs Shona McCulloch, explained that when received via the whistleblowing process these cases would be recorded and included in the quarterly Whistleblowing report to the Board as having been redirected to HR as bullying and harassment or grievances but no detail would be provided. The Staff Governance Committee received quarterly updates on bullying and harassment and grievances.

**Outcome:** Board Members discussed and noted the Whistleblowing report in relation to concerns raised in Q2.

## **7.5 Board committee membership (173/2021)**

The Head of Corporate Governance, Mrs Shona McCulloch, presented a report with proposals for changes to Board Committee responsibilities.

Mrs McCulloch highlighted the proposed changes which reflected the extension to Mr Bob Martin's term of office, Mr Marc Mazzucco's appointment to the Board on 1 November 2021 and Ms Mhairi Kennedy's recent departure. An appointment process would take place for a new Non-Executive Board Member. The proposed changes were as highlighted at Appendix 1 of the report.

**Outcome: Board Members approved the updated Board committee responsibilities.**

## **7.6 Audit and Risk Committee (174/2021)**

The Committee Vice Chair, Mr Bob Martin, presented the approved minute of the meeting held on 11 June 2021. The Vice Chair reported key areas of focus and scrutiny at the meeting held on 18 November 2021.

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

## **7.7 Healthcare Governance Committee Minutes (175/2021)**

The Committee Vice Chair, Mr Adrian Carragher, presented the minute of the meeting held on 13 September 2021. The Vice Chair reported key areas of focus and scrutiny at the meeting held on 1 November 2021.

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

## **7.8 Information Governance Committee (176/2021)**

The Committee Chair, Mrs Jean Ford, presented the minute of the meeting held on 30 August 2021. The Chair reported key areas of focus and scrutiny at the meeting held on 8 November 2021.

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

## **7.9 Integrated Governance Committee (177/2021)**

The Board Vice Chair, Mr Bob Martin, presented the minute of the meeting held on 19 April 2021. The Board Vice Chair reported key areas of focus and scrutiny at the meeting held on 1 November 2021.

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

## **7.10 Performance Governance Committee (178/2021)**

The Committee Chair, Mr Bob Martin, presented the minute of the meeting held on 2 September 2021. The Chair reported key areas of focus and scrutiny at the meeting held on 4 November 2021.



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

**7.11 Staff Governance Committee (179/2021)**

In the absence of the Committee Chair, the Vice Chair, Mr Ewing Hope, presented the minute of the meeting held on 3 August 2021. The Vice Chair reported key areas of focus and scrutiny at the meeting on 15 November 2021.

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

**8. Service**

**8.1 Crosshouse Children's Fund report (180/2021)**

The Interim Nurse Director, Ms Jenny Wilson, provided an update on the achievements of the Crosshouse Children's Fund since the contract agreement was signed to allow formation of the Fund in March 2019. The work of the charity was governed by the Glasgow Children's Hospital Charity Board.

Ms Wilson outlined some of the important work being done and positive benefits for the service and the population of Ayrshire and Arran as a result of this collaboration and future plans.

Ms Wilson advised, in response to a question from a Board Member, that she did not envisage long term financial implications for the Board in relation to the fixed term Band 7 nurse contract to support the Child Death Panel process.

**Outcome: Board Members noted the update on the Fund's progress and recognised the positive benefits achieved to date.**

**9. Performance**

**9.1 Performance Report (181/2021)**

The Director of Transformation and Sustainability, Mrs Kirstin Dickson, provided a summary overview of COVID-19 hospital data and progress against Remobilisation Plan 3 (RMP3) measures.

Board Members were provided with key infographics, performance assessment and improvement actions relating to COVID-19, Planned Care Waiting Times, Diagnostics, Cancer, Mental Health, Unscheduled Care and Delayed Discharges/Transfers of Care.

Ms Dickson reported that performance continued to be influenced significantly by COVID-19 cases in hospital and COVID-19 activity in communities, and the impact on the health and care system, in particular, staffing in health and social care teams.

Ms Dickson reported ongoing challenges in relation to Unscheduled Care and the impact on performance against the four hour waiting time target, and actions in place to improve performance. The Board's performance was most significantly challenged in delivery of Planned Care and Diagnostic services. As previously reported to the Board, this was as a result of capacity issues due to COVID-19,

unscheduled care demand and the impact on remobilising some planned care services.

Board Members were advised that RMP4 was submitted to the Scottish Government at the end of September 2021 and included revised trajectories for the remainder of the year.

The Director for Acute Services, Mrs Joanne Edwards, highlighted work ongoing with Capital Planning colleagues to try to increase clinical space and day patient capacity at UHC and she hoped to be able to provide an update on this work at the next Board meeting.

**Outcome:** Board Members noted the report and were assured that systems and procedures were in place to continue to monitor and manage the impact of COVID-19, and the remobilisation of services in the provision of unscheduled and planned care for Ayrshire citizens.

## **9.2 Financial Management Report for the seven months to 31 October 2021 (182/2021)**

The Director of Finance, Mr Derek Lindsay, presented a report on the Board's financial position for the seven months to 31 October 2021.

Board Members were advised that the Revenue Plan was a deficit of £12.1 million. The Board was £2.6 million overspent at month seven. Mr Lindsay reported that the Scottish Government had confirmed that they would fully fund COVID-19 costs this year, as they had last year, and the Board was forecasting breakeven by the year end.

Mr Lindsay informed Board Members that during month seven the Board had received allocations from the Scottish Government including a further £25 million of COVID-19 funding. Details of COVID-19 related expenditure were provided at Appendix 2 and total allocations were provided at Appendix 3 of the report.

Mr Lindsay highlighted a projected overspend against the New Medicines Fund (NMF) budget due to high cost drugs. While funding from the Scottish Government for NMF had been reducing, the cost of new medicines which were often being approved through the Scottish Medicines Consortium was increasing. Mr Lindsay advised that this will be an area of considerable pressure for the Board in budget setting for next year.

**Outcome:** Board Members noted the Board's financial position for the seven months to 31 October 2021.

### **9.3 South Ayrshire Health and Social Care Partnership (SAHSCP) (183/2021) annual performance report 2020-2021**

The Director of Health and Social Care for South Ayrshire, Mr Tim Eltringham, presented the SAHSCP annual performance report for 2020-2021, as required by the Public Bodies (Joint Working) (Scotland) Act 2014. The report was approved by SAIJB Performance and Audit Committee on 12 November 2021, pending further formatting and design updates.

Mr Eltringham reported that this had been a challenging year due to the COVID-19 pandemic. The report reflected the significant partnership work that had gone into the pandemic response whilst continuing to provide support in a safe and timely manner to those most in need. Despite the challenges faced, opportunities had arisen to progress a range of redesign and service improvement activity.

Mr Eltringham highlighted in particular the positive work in Children's Services to support and improve the response to the needs of children who are looked after in South Ayrshire. Within Adult Services, significant work had been done to develop a community response and shift the balance of care from acute hospital settings, including a large investment in reablement services. There had been a focused approach to reduce delayed discharges. During the year elderly mental health bed redesign was completed, to enable four long-stay mental health services users to move to new accommodation in South Lodge.

Mr Eltringham outlined the important work being done to progress Digital developments. The HSCP had agreed a Digital strategy in October 2020 and good progress was being made in taking forward this important area of work.

**Outcome Board Members discussed and endorsed the SAHSCP annual performance report.**

## **10. Decision/Approval**

### **10.1 Remobilisation Plan 4 (RMP4) (184/2021)**

The Director of Transformation and Sustainability, Mrs Kirstin Dickson, presented RMP4 for the Board's approval.

Ms Dickson advised that the Board had been asked by the Scottish Government in September 2021 to review RMP3 and develop RMP4 to outline what the Board expected to deliver in the second part of the year. RMP4 was submitted to the Scottish Government on 30 September 2021 for consideration. The Scottish Government had written on 19 November 2021 to approve the final draft.

**Outcome: Board Members approved RMP4.**

## **11. For information**

### **11.1 Board briefing (185/2021)**

Board Members noted the content of the briefing.

**11.2 East Ayrshire Integration Joint Board (186/2021)**

Board Members noted the minute of the meeting held on 25 August 2021.

**11.3 North Ayrshire Integration Joint Board (187/2021)**

Board Members noted the minute of the meeting held on 23 September 2021.

**11.4 South Ayrshire Integration Joint Board (188/2021)**

Board Members noted the minutes of the meetings held on 22 September 2021 and 21 October 2021.

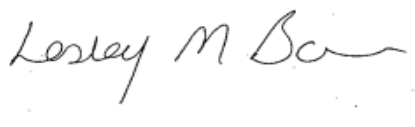
**12. Any Other Competent Business (189/2021)**

There was no other business.

**13. Date of Next Meeting**

The next meeting of the NHS Ayrshire & Arran Board will take place at 9.30 am on Monday 31 January 2022.

Signed by the Chair:



31 January 2022

**Lesley Bowie**  
**Chair – Ayrshire and Arran NHS Board**