

**Ayrshire and Arran NHS Board**  
**Minutes of a public meeting on Monday 4 December 2023**  
**Hybrid meeting – Room 1 Eglinton House and MSTeams**

- Present:
- Non-Executive Members:  
 Mrs Lesley Bowie, Board Chair  
 Cllr Marie Burns  
 Ms Sheila Cowan, Vice Chair  
 Dr Sukhomoy Das  
 Miss Christie Fisher  
 Mrs Jean Ford  
 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)  
 Ms Ruth Campbell (Consultant Dietitian in Public Health) Item 8.1  
 Ms Tracey Cooper (Independent Infection Prevention and Control Nurse)  
 Mrs Kirstin Dickson (Director for Transformation and Sustainability)  
 Mr Tim Eltringham (Director of Health and Social Care, South Ayrshire)  
 Mr Mark Inglis (Head of Children’s Health, Care and Justice Services, South Ayrshire HSCP) Item 8.5  
 Ms Marion MacAulay (Head of Children’s Health, Care and Justice Services and Chief Social Work Officer for East Ayrshire HSCP) Item 8.3  
 Mr Craig McArthur (Director of Health and Social Care, East Ayrshire)  
 Ms Nicola Graham (Director of Infrastructure and Support Services)  
 Ms Sarah Leslie (Human Resources Director)  
 Mr Alistair Reid (Director for Allied Health Professions) Item 7.7  
 Mrs Shona McCulloch (Head of Corporate Governance)
- Mrs Angela O’Mahony (Committee Secretary) minutes

The Board Chair welcomed everyone to the meeting. During the meeting agenda items were re-ordered slightly to allow colleagues presenting updates to join.

## 1. Apologies

Apologies were noted from Mr Ewing Hope, Mrs Lynne McNiven and Mrs Vicki Campbell.

## 2. Declaration of interests (155/2023)

Dr Sukhomoy Das, Non-Executive Board Member, and a Senior Hospital Physician with a special interest in Neurorehabilitation Medicine, employed by NHS Greater Glasgow & Clyde, declared an interest in relation to item 6.1, Patient story.

## 3. Minute of the meeting of the NHS Board held on 9 October 2023 (156/2023)

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

**Item 6.1 (130/2023) Patient story** the second paragraph, second line was amended to read:

The Nurse Director, Ms Jennifer Wilson, agreed in reply to a suggestion from a Member that further opportunities would be considered, in addition to the improvement work already taking place in response to both positive and negative patient stories, to maximise learning and further enhance patient care.

**Item 7.5 (138/2023) Medical Education Governance Group annual report 2022-2023** - final paragraph - addition of third sentence:

Dr McGuffie acknowledged in reply to a query from a Member that the Board was struggling with a number of issues related to its ageing estate, in particular for inpatient services, and this could have a negative impact on medical workforce recruitment.

## 4. Matters arising (157/2023)

### Paper 2 - Action Log

The Board action log was circulated to Board Members in advance of the meeting and the following update was provided:

Item 8.2 (112/23) – HMP Kilmarnock Needs Assessment – The Board Chair advised that future reporting arrangements would be through East Ayrshire Integration Joint Board. Reporting to the Board would be via the HSCP’s annual clinical and care governance report to the Healthcare Governance Committee, with exception reporting to the Committee in year should specific areas of concern be identified.

## 5. Chief Executive and Board Chair report

### 5.1 Chief Executive’s report (158/2023)

- The Chief Executive took the opportunity to reassure Board Members of the need for both our acute hospital sites. The clinical vision for NHS Ayrshire & Arran (NHSAA) is that of a single operating model delivered through both acute hospital sites - University Hospitals Ayr and Crosshouse. She emphasised that University Hospital Ayr remains an essential part of the Board’s estate. The

Board recognise and work with the physical limitations of providing acute hospital services from older estates, and it is acknowledged that there are maintenance and physical constraints for both acute hospital sites. However, the primary and constant challenge this winter is that of right sized clinical teams and services to keep both hospitals safely resourced 24 hours a day, seven days a week.

- At this time the specific workforce gaps requiring interim and contingency planning include, but are not restricted to, Critical Care and the Emergency Departments. While recruitment will remain active, the Board is working with clinical teams to ensure staff and patients are supported in the best way possible, with the resource we have. This is not ideal, and we are asking staff for their support in creating interim models of care, but this is essential work to ensure both hospitals are available to support those living in Ayrshire and Arran.
- The Chief Executive outlined the whole system work taking place, including focused work to reduce average length of stay for all patients. This is not easy, but with the best possible alignment of support to inpatient wards, combined with on-site hospital support from community services and social care, we can identify avoidable waits for patients.
- The Chief Executive thanked clinical teams for their support during what has been an extended period of relentless pressure. She acknowledged that the current pressure and any interim plans would be unnerving for staff. However, the Board will continue to work with staff to reassure them that we need both acute hospital sites to meet the needs of NHS Ayrshire & Arran.
- While the pressure throughout the acute hospital system remained, the Chief Executive also highlighted the range of positive work taking place across the Board and throughout the Health and Social Care Partnerships. Many good news stories are outlined in the Board briefing that follows later in the meeting.

## **5.2 Board Chair's report**

**(159/2023)**

- The Board Chair announced that Liam Gallacher had been appointed to the vacant Non Executive position on the NHS Board and would join the Board on 1 January 2024.
- Michael Matheson MSP, Cabinet Secretary for NHS Recovery, Health and Social Care, visited the Flow Navigation Centre at University Hospital Crosshouse on Monday 30 October to hear more about the work of the Ayrshire Urgent Care Service. This had been a very positive visit and provided an opportunity for the Board to share the good work being done by our Flow Navigation Centre in reducing the number of people who need to attend our hospital sites.
- The Chair attended the South Ayrshire Community Planning Partnership (CPP) meeting on 26 October where one of the key updates had been on Children's services, which was a Board agenda item for discussion. She also attended the East Ayrshire CPP Board, of which she is Vice Chair, where East Ayrshire Violence Against Women Partnership delivered a presentation and CPP Members were encouraged to sign the white ribbon pledge.
- The Chair reported that she had been spending some quality time with some NHS Ayrshire & Arran teams, hearing more about their work and challenges faced. Lesley met with the Staff Care team in October and in late November with some of the Public Health team. The meetings are informal open sessions and the Chair planned to do more of these on an ongoing basis.
- The Chair thanked all Board Members for completing a national self-assessment survey on the Blueprint for Good Governance in NHS Scotland. She welcomed

the input from Members and looked forward to discussing the outcomes at a planned Board Development session in January 2024.

## 6. Quality

### 6.1 Patient story (160/2023)

On behalf of the Acute Services Director, currently on secondment at NHS24, the Chief Executive introduced Claire's story about her multiple sclerosis diagnosis and journey. The story talked about Claire's wait for diagnosis and the impact of this and also Claire's positive experience once referred to the Specialist MS Team at the Douglas Grant Rehabilitation Centre, Ayrshire Central Hospital.

Board Members were advised that the Neurological service is provided by NHS Greater Glasgow & Clyde (NHSGGC) through a service level agreement (SLA) and delays in patients receiving consultations and results had previously been identified. The Chief Executive highlighted the workforce pressures and access challenges facing the Neurology service and the collaborative work being done with NHS Greater Glasgow & Clyde and NHS Forth Valley to improve this pathway.

The Chief Executive clarified in reply to a query from a Member that the SLA review process was led by a dedicated SLA programme team. She outlined planned changes within the Acute leadership structure to enable a more active SLA renewal process, with operational input, as part of ongoing recovery work.

The Medical Director, Dr Crawford McGuffie, welcomed this story and noted the collaborative work to improve and strengthen the service model in Neurology. The Nurse Director, Ms Jennifer Wilson, highlighted the importance of Care Opinion and the responsive approach being taken to stories when posted and mechanisms in place to improve patient experience.

Board Members discussed Claire's story and were reassured by the collaborative work being done to improve the current Neurology service.

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

### 6.2 Healthcare Associated Infection (HCAI) report (161/2023)

The Nurse Director, Ms Jennifer Wilson, introduced the report and invited Ms Tracey Cooper, Independent Infection Prevention and Control Nurse, to present.

Ms Cooper provided HCAI performance data for Quarter 1, April to June 2023:

- **Clostridioides difficile infection (CDI)** – overall performance had improved and should this continue the Board was on trajectory to meet the year-end target. There had been an increase in healthcare associated CDI cases last quarter and work was ongoing to understand the reasons for that. Positive improvement work was taking place to reduce high risk antimicrobial use in secondary care and primary care.
- **Staphylococcus aureus bacteraemias (SAB)** – There had been an increase in cases in each of the last three quarters and the Board was not currently on trajectory to meet the national target. Focused work was ongoing to understand the reasons for the increase to allow targeted actions to improve the position.

- **Escherichia coli bacteraemias (ECB)** – The rate had risen last quarter and the Board was on the upper limit of the funnel plot chart. As previously discussed, there had previously been some misattribution of cases and data had now been updated with Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland which gave a more accurate representation. The report set out the improvement taking place through the Urinary Catheter Improvement Group, linked to prescribing activity in care homes related to urinary tract infection which should all positively impact on the rate going forward.
- **Hand hygiene** – The Board was just below the standard and targeted work was taking place to address areas of variability. Ms Cooper was working with the Medical Director and activity was planned in early 2024 to refocus on hand hygiene and ‘bare below the elbow’ to achieve excellence in this area.
- **Estates and cleaning compliance** - The Board was meeting the national standard.
- **COVID-19** – Similar to other Boards, COVID-19 continued to be challenging for the organisation. A meeting would take place this week (week commencing 4 December) to review COVID-19 infection prevention and control measures, for example, around ventilation, hand hygiene and cohort of patients, to see if anything else could be identified to minimise the impact on patients, staff and organisational pressures.
- **Infection Prevention and Control (IPC)** – Support and mitigations remained in place for IPC and there had recently been some positive recruitment to four nursing posts.
- **Outbreaks** – There had been 18 incidents in the last quarter which had been managed in line with good governance and national guidance through a range of Problem Assessment Groups and Incident Management Team meetings.

Ms Cooper provided reassurance, in reply to a query from a Member, that whilst the vast majority of staff complied with hand hygiene requirements, a relatively small number of staff did not. This could be due to human error or staff wearing a watch or ring in a clinical area. Ms Wilson reiterated that there would be a hard reset in early 2024, with a clear communication plan to remind staff of the importance of hand hygiene and ‘bare below the elbow’ in clinical areas.

**Outcome: Board Members considered and noted the HCAI report.**

### **6.3 Quality and Safety Report – Neonatal services (162/2023)**

The Nurse Director, Ms Jennifer Wilson, presented a report on progress with the Scottish Patient Safety Programme (SPSP) and also Excellence in Care (EiC) measures in Neonatal services, as well as the robust approach adopted in Women and Children and Maternity services to drive forward improvement. The report was discussed in detail at the Healthcare Governance Committee meeting on 6 November 2023.

Ms Wilson provided an update on progress with core measures:

- Reduction in term admissions to the Neonatal Unit (NNU) – there had been a reduction in term admission to NNU although data varied with no consistent themes noted. Robust training pathways had been developed for junior medical staff and midwives which had increased the confidence of individuals working in these areas.

- There had been improvement in managing the wellbeing of pre-term babies with the median line adjusted from 20.8% to 60%. A dedicated multidisciplinary Perinatal Wellbeing Group had been set up to drive forward improvement.
- Central line blood stream associated infections – there had been three cases since 2018. One case recorded in April 2021 related to a baby transferred from another Board. There had been significant learning from the other cases.
- Neonatal temperature – there was over 90% compliance in recording of temperature, with the exception of two months in late 2022. Following review of data, it was believed that this was a recording issue.
- Safeguarding – the report now included safeguarding information in line with National Guidance for Child Protection in Scotland 2021.

Board Members welcomed this positive report and the sustained improvement reflected in the data charts provided.

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

## **7. Corporate Governance**

### **7.1 Audit and Risk Committee (163/2023)**

The Committee Chair, Mrs Jean Ford, provided a report on key areas of focus and scrutiny at the meeting on 16 November 2023. The Chair presented the minutes of the meetings held on 21 June and 27 September 2023.

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

### **7.2 Healthcare Governance Committee Minutes (164/2023)**

On behalf of the Committee Chair, Mrs Jean Ford provided a report on key areas of focus and scrutiny at the meeting on 6 November 2023. The Chair presented the minute of the meeting held on 11 September 2023.

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

### **7.3 Information Governance Committee (165/2023)**

The Committee Chair, Mr Marc Mazzucco, provided a report on key areas of focus and scrutiny at the meeting on 13 November 2023. The Chair presented the minute of the meeting held on 18 September 2023.

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

### **7.4 Integrated Governance Committee (166/2023)**

The Board Vice Chair, Ms Sheila Cowan, provided a report on key areas of focus and scrutiny at the meeting on 9 November 2023. The Vice Chair presented the minute of the meeting held on 31 July 2023.

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

## **7.5 Performance Governance Committee (167/2023)**

The Committee Chair, Ms Sheila Cowan, provided a report on key areas of focus and scrutiny at the meeting on 2 November 2023. The Chair presented the minute of the meeting held on 7 September 2023.

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

## **7.6 Staff Governance Committee (168/2023)**

On behalf of the Committee Chair, Dr Sukhomoy Das, provided a report on key areas of focus and scrutiny at the meeting on 7 November 2023. Dr Das presented the minute of the meeting held on 7 August 2023.

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

## **7.7 Health and Care (Staffing) (Scotland) Act 2019 (169/2023)**

The Nurse Director, Ms Jennifer Wilson, introduced the report and invited the Director for AHPs, Mr Alistair Reid, to provide an update on local progress towards readiness for implementation of Health and Care (Staffing) (Scotland) legislation in April 2024.

Mr Reid outlined the background to the introduction of this legislation which sought to facilitate high quality care and improved outcomes for people using services in both health and care by helping to ensure appropriate staffing. The legislation would apply to all clinical professional groups, with the majority of legislative duties applying to professions noted at Appendix 1 of the report. Members received assurance that there had been wide communication nationally and locally to date and a communication plan would be presented for approval at the next Health and Care Staffing Bill Programme Board.

Board Members received an update on focused work taking place in readiness for implementation of the legislation, areas of risk identified and mitigations in place. The Board's Quarter 1 return to Scottish Government gave assurance that overall the Board was making positive progress in preparation for enactment although there was some variation in preparedness between different professional groups and the structures in place to support these. Mr Reid updated that the Quarter 2 return had recently been submitted and while good progress was being made the report gave limited assurance due to the need to formalise informal processes already in place.

Following enactment of the legislation in April 2024 there would be associated monitoring and governance, with all Boards expected to submit reports thereafter, with the first annual report due in April 2025.

The Board Chair advised that a Board workshop had recently taken place to consider in detail the work being progressed towards implementation of the new legislation and the Board looked forward to receiving future updates. Members commended the team for the work being progressed in readiness for the new legislation in spite of the other priorities and winter pressures being managed across the health and care system.

The Chief added her thanks to colleagues across the system for the significant preparatory work being done and reassured Members that the executive team would do everything possible in readiness for the new legislation. She acknowledged that the current digital systems and infrastructure did not make this a simple task. She reassured Members that work would continue to deliver a unified infrastructure to enable health and care information to be shared more readily but recognised that this would take some years to achieve.

**Outcome: Board Members were assured by the update on local progress towards readiness for implementation of legislation in April 2024.**

## **8. Service**

### **8.1 Director of Public Health (DPH) report – obesity and diabetes prevention (170/2023)**

Ms Ruth Campbell, Consultant Dietitian in Public Health, presented the fourth in a series of DPH reports, on the theme of obesity and diabetes prevention.

Ms Campbell outlined the background and strategic context to this work and provided examples of current activity aimed at achieving the ambitions outlined in the national Diet and Healthy Weight Delivery Plan, the national Framework for the Prevention, Early Detection and Early Intervention of Type 2 Diabetes and the Ayrshire Healthy Weight Strategy. This programme of work closely aligned to the Board's Caring for Ayrshire ambition.

The report set out the serious public health challenge related to obesity and the prevalence of obesity in adults, pregnant women and children, with NHSAA being above the Scottish average across these groups. Physical activity levels in Ayrshire were lower than the national average. Obesity was linked to poor mental and physical health outcomes, with people living in the most deprived areas more at risk of living with obesity. Causes of overweight and obesity were complex and involved a range of different factors. There were significant costs involved for the NHS as well as the wider economy.

Ms Campbell updated that since the report was written further data had been published by Public Health Scotland (PHS) which showed positive improvement in that the number of children at risk of obesity had reduced and there had been an increase in babies being exclusively breastfed at six weeks.

The report detailed prevalence of type 2 diabetes in Ayrshire and Arran which was higher than the national average. Obesity was a significant risk factor for the development of type 2 diabetes, with over 87% of people with type 2 diabetes above a healthy weight. National and local prevalence of type 2 diabetes had risen steadily over the last decade. In 2021, 6.4% of the population of Ayrshire and Arran had type 2 diabetes which was higher than the national rate. The report detailed the improvement work being taken forward through the Diabetes Prevention Programme Board across priority areas.

Board Members discussed the report and were encouraged by the recently published PHS data which showed the positive results of the improvement work being done. Members welcomed the funding support provided by the three Ayrshire



Health and Social Care Partnerships to enable breastfeeding support for young mums and the positive outcomes to date.

Ms Campbell advised in reply to a query from a Member that there was a need to look at a range of prevention and early intervention work to tackle unhealthy weight in the local community. She emphasised the important role of Community Wealth Building and the Community Planning Partnerships to influence new commercial developments with food outlets to produce healthy food and drinks which would have a greater impact at population level. Members underlined the importance of using national levers through PHS and taxation to educate, promote healthy lifestyle choices and reduce unhealthy food consumption and of shared learning from successful work being done in other countries on this issue.

**Outcome: Board Members noted the DPH report and the prevalence of obesity, pre-diabetes and type 2 diabetes in Ayrshire and Arran. Members were assured by the range of work currently underway with partners.**

## 8.2 Winter preparedness

(171/2023)

The Director of Transformation and Sustainability, Mrs Kirstin Dickson, presented the report setting out service planning to date in preparation for the winter months.

Mrs Dickson reported that there had been a number of events and shared learning opportunities between NHS Boards and the Scottish Government earlier in the year in preparation for winter. The Scottish Government had published the final version of the Health and Social Care Winter Preparedness Plan for 2023-2024 on 24 October 2023. The plan set out actions Boards would be expected to deliver across the health and social care system.

Mrs Dickson advised that ahead of finalisation of the Winter Plan, Boards were asked to provide a Winter Preparedness Checklist to determine their state of preparedness and any shared learning from other areas. NHSAA's response reflected the preparatory work underway to ensure the Board was as ready as possible for a winter surge. Mrs Dickson advised that this should be seen in the context of the challenges and pressures currently facing the health and care system. Post-COVID-19 pandemic recovery work continued, focused on recruitment, reducing length of stay and reducing waits for discharge. Additional funding had been received to enable work with the Respiratory team and Hospital at Home which would help with the recovery plan, with patient and staff safety the overriding priority.

Mrs Dickson advised in reply to a question from a Member that this operational checklist was not in the public domain and due to the specific nature of the checklist's questions, some had to be marked as partially complete as work was still ongoing, for example, in relation to medical workforce recruitment. Mrs Dickson offered to share the summary preface of the checklist with Board Members to give more detail and context in relation to the situation in preparation for winter. In reply to a query from a Member about the range of improvement actions being taken in relation to urgent care, unscheduled care and delayed transfers of care, Mrs Dickson advised that the Performance report provided detail on each of these areas under the improvement actions.

The Chief Executive reassured Members that a wide range of improvement work had been done since last winter, including investment in the leadership model, greater understanding of the demands in Emergency Departments (ED) and pre-hospital care was demonstrably different to last year. Further improvement work included the Flow Navigation Centre's successful launch of Call before Convey to divert ambulances from ED and there were robust GP and ambulance rosters for December 2023. The Board recognised areas that required further focused work, for example, pressures remained in ED, particularly at weekends.

**Outcome: Board Members noted the position in preparation for winter and were assured that necessary systems and procedures are in place to deliver winter planning arrangements.**

### **8.3 East Ayrshire Children's Services (172/2023)**

The Head of Children's Health, Care and Justice Services and Chief Social Work Officer for East Ayrshire Health and Social Care Partnership, Ms Marion MacAulay, presented the East Ayrshire Children's Services reports. The reports were discussed and approved at the Integration Joint Board meeting on 11 October 2023.

Ms MacAulay outlined the background, strategic context and vision for the Children's Services Plan which the local authority and health board were required to jointly prepare in line with legislation. The 2017-2020 Plan annual report provided details of work undertaken over the last year and the 2023-2026 Plan outlined priorities for the next three year period. There had been strong engagement in developing the plan, including with children, families and carers and those working in services to identify key areas of focus. The Plan was underpinned by a detailed Action Plan and associated outcome measures.

The Children's Rights Reports 2017-2020 and 2020-2023; and the Cherishing Our Families Strategy 2023-2026 were also provided. These reports reflected activity undertaken to support children and young people underpinned by rights, following a strength based approach to support understanding of consistent factors and barriers that prevent children from flourishing.

**Outcome: Board Members discussed the Children's services reports and agreed the East Ayrshire Children and Young People's Service Plan for 2023-2026.**

### **8.4 North Ayrshire Children's Services (173/2023)**

The Director of Health and Social Care for North Ayrshire, Ms Caroline Cameron, presented the North Ayrshire Children's Services Plan (CSP) 2023-2026. The Plan was discussed and approved at the Integration Joint Board meeting on 15 June 2023.

Ms Cameron set out the background, strategic context and vision for the Children's Services Plan which the local authority and health board were required to jointly prepare in line with legislation. The plan built on progress made since the previous Plan 2020-2023 and reported on progress with the 2022-2023 plan.

Ms Cameron set out the multi-agency approach adopted to support children and young people in North Ayrshire through the Child Poverty Strategy Action Plan,

Children's Rights report, The Promise three year programme, Corporate Parenting strategy 2023-2026 and the CSP 2023-2026. She highlighted the findings and areas of challenge identified from the strategic needs assessment undertaken to assess the context and landscape of the children's population in North Ayrshire. Five priority areas had been identified and key actions to be taken forward across the system were outlined in the new Plan.

Board Members acknowledged the areas of challenge identified in the report and welcomed the multi-agency approach being adopted and priority actions planned in response to the issues faced.

**Outcome: Board Members agreed the North Ayrshire Children's Services Plan for 2023-2026.**

## **8.5 South Ayrshire Children's Services**

**(174/2023)**

Mr Mark Inglis, Head of Children's Health, Care and Justice Services for South Ayrshire Health and Social Care Partnership, presented an update on Children's Services and the Children and Young People's Service Plan for 2023-2026. The reports were discussed and approved at the Community Planning Partnership meeting on 26 October 2023.

Mr Inglis set out the background, strategic context and vision for the Children's Services Plan 2023-2026 which the local authority and health board were required to jointly prepare in line with legislation. The Plan had been developed following a collaborative approach across the whole Community Planning Partnership and was informed by the work done by a research team brought in to support the Partnership in terms of family wellbeing, as well as engagement and input from children, young people and families and wider stakeholders. The Plan was underpinned by Getting It Right for Every Child, the UN Conventions on the Rights of the Child (UNCRC) as incorporated into Scottish Law and The Promise.

The Plan outlined the six priority areas identified which would be progressed over the next three years following a whole family prevention and early intervention approach to empower families living in South Ayrshire and improve wellbeing and outcomes for children and young people.

Board Members discussed the report and welcomed the positive work being done in South Ayrshire, for example, Belmont cluster family work, which had been recognised at national level.

**Outcome: Board Members noted the Children's services reports and agreed the South Ayrshire Children and Young People's Service Plan for 2023-2026.**

**Board Members commended the suite of comprehensive reports from the three Partnerships. Members were reassured by the congruity in the approach adopted by all three partnership areas and the range of collaborative work being progressed in support of children and young people. It was hoped that the positive impact of this work would be evident in future reports.**

## 9. Performance

### 9.1 Performance Report

(175/2023)

The Director of Transformation and Sustainability, Mrs Kirstin Dickson, presented the NHSAA Performance report. The main high level summary report focused on performance in the following service areas:

#### New Outpatients

- Performance against the 12 week national target for New Outpatients remains below the 95% target and continues on a gradual reducing trend from 42% at March 2023 to 36.1% at October 2023. The overall total number of patients waiting has continued to rise, reaching a new high of 51,279 patients in October 2023.
- The number of New Outpatients waiting longer than 12 months has been on an increasing trend from 3,271 at the end of March 2023 to 5,992 at end October 2023; with the number waiting over 18 months also gradually rising from 1,024 at end of August 2023 to 1,281 at the end of October 2023. The number of patients waiting longer than 2 years has remained level at just over 400 patients.

#### Inpatients/Daycases

- Compliance against the 12 week national target for Inpatients/Day Cases has increased from 49.0% in September 2023 to 51.0% in October 2023, however performance remains on a longer term reducing trend compared to our position of 58.3% in April 2023. The overall total waiting list for Inpatient/Day Case treatment has increased gradually from 7,759 at July 2023 to 8,032 at October 2023. Despite this rise, we are meeting our ADP trajectory of 8,330.
- The number of Inpatients/Day Cases waiting longer than 18 months continues to show a reducing trend from 929 at mid-June 2023 to 700 at the end of October 2023. The target set nationally was to eliminate 18 month waits for Inpatient /Day Cases in most specialties by September 2023. In NHS Ayrshire & Arran, 18 month waits were eliminated in 10 out of 16 specialties, with General Surgery, Trauma and Orthopaedics, and ENT reporting the highest recorded waits.

#### Musculoskeletal

- Compliance in relation to the national 4 week target for Musculoskeletal (MSK) waiting times remains at 29.8% in October 2023, the second time compliance has been below 30% since June 2020. Discussion will take place with the service to understand in detail work ongoing to mitigate the challenges being faced.

#### Diagnostics

- Performance against the 6 week national target of 100% for Imaging has been on a general decreasing trend from 76.7% in January 2023 to 62.2% in September 2023, with the main challenge related to Non-Obstetrics Ultrasound.
- Compliance against the 6 week national target for Endoscopy had shown a slight decrease from 48.2% in August 2023 to 47.5% in September 2023; but remains on a long term increasing trajectory. The report provided more detail on the work being done to expand capacity in Endoscopy.

## **Cancer**

- Performance against the 62-day Cancer target has increased from 81.4% in August 2023 to 82.9% in September 2023; this is below the national target of 95% and marginally fails to meet the local ADP trajectory of 83%.
- Performance in relation to the 31-day Cancer target continues to meet the 95% national target, with levels of 100% in September 2023.

## **Mental Health**

- In September 2023, compliance in relation to Child and Adolescent Mental Health Services (CAMHS) was 99.6%, which continues to exceed the national target of 90%; and meets the local ADP trajectory of 98.6%.
- In September 2023, performance for Psychological Therapy (PT) waiting times had shown a reduction in compliance from 90.9% in August 2023 to 87.4%, below the 90% national target for the first time since June 2023.
- Drug and Alcohol Treatment services continued to exceed the national target of 90% in September 2023, with compliance at 100%.

## **Urgent Care**

- In October 2023, 89% of patients who accessed care via Ayrshire Urgent Care Service (AUCS) received alternative care in the community as an alternative to front door attendance. This exceeded the local target of 85%.
- The Call Before Convey Pathway in collaboration with the Scottish Ambulance Service (SAS) is well established with 254 referrals to AUCS in October 2023. Following assessment within AUCS, 90% went on to receive their treatment in a community setting. This exceeded the local target of 85%.
- Care at Home pathway for access to urgent care during out of hours for care home and nursing residents – There were 629 calls in October 2023 and of those 90% did not require to attend hospital and received alternative care in the community, exceeding the local target.
- Emergency Mental Health services pathway – 124 patients were referred via the pathway, with all accessing an emergency Mental Health team as an alternative to ED attendance.
- Emergency Department 4 hour target – The percentage of patients discharged within four hours was consistently higher at University Hospital Ayr than University Hospital Crosshouse and above the 94% target. In terms of the 12 hour target, there were 527 breaches at University Hospital Crosshouse and 367 at University Hospital Ayr.
- The Board had consistently exceeded the target time for ambulances arriving and departing from the hospital site. However, there had been some challenges in October 2023 which had decreased compliance.
- The Board continued to see a high number of delays in transfer of care although this had reduced to 219 by September 2023. There were high levels of bed occupancy, reaching 6,251 in September 2023.

Members noted the variable performance across service areas. While some areas were performing well, there was significant concern about performance in other parts of the system, particularly moving into the winter period. Members were reassured by the improvement work and mitigating actions being taken through the Winter Preparedness Plan discussed earlier in the meeting.

In reply to a query from a Member, the Performance Governance Committee Chair, Ms Sheila Cowan, advised that the Performance Governance Committee planned to scrutinise improvement plans and the priority being given to key actions to maximise impact in addressing the performance challenges faced. The Chief Executive reiterated that the Board had significant improvement plans in place and a whole system approach was being adopted to improve patient flow and address the difficult challenges and system pressures faced moving into winter.

**Outcome: Board Members noted the Board's position on the management and provision of unscheduled and planned care and were reassured that improvement work and mitigating actions were being taken through the Winter Preparedness Plan.**

## **9.2 Financial Management Report for Month 7 up to 31 October 2023 (176/2023)**

The Director of Finance, Mr Derek Lindsay, provided an update on the Board's financial position to 31 October 2023. The Board had agreed a deficit budget of £56.4 million for the 2023/2024 financial year. The overspend for the seven months to 31 October 2023 was £31.1 million, of which £16.5 million was Acute Services. Overall, this was a slight improvement on the projection. However, as previously reported to the Board, the Scottish Government expected an improvement on this position although a definite target had not been set. The Board projected a £54 million overspend at the year end.

Mr Lindsay provided a detailed update on progress in closing unfunded wards. As detailed in the report, although this work had been successful, some particular bays had to be re-opened due to service pressures. In the first seven months of the year, the Board had spent £6.2 million on unfunded beds and it was anticipated that spend for the full year would be around £10 million.

Board Members were advised that the target for cash releasing efficiency savings (CRES) was £9.65 million, however, it was projected that the total savings delivered would be £778,000 below target, with areas of variance as set out in the report.

Mr Lindsay advised that prescribing information covering the period up to the end of July 2023 was received in November 2023. He reported overspend of £583,000 for the first four months of the year and advised Members that the position would be closely monitored. Board Members were reassured that the Board's financial position was being discussed and scrutinised at the Performance Governance Committee, with lead Directors identified to reduce the level of overspend.

Mr Lindsay clarified in reply to a query from a Member that the increased spending in Ward 3F related to agency spend and supplemental staffing for the first six months of the year to ensure that the main stroke Ward 3E and the unfunded Ward 3F being used for medical patients were appropriately staffed. Mr Lindsay reassured Members that the Board was in regular contact with the Scottish Government to discuss the financial position and emerging issues related to Primary Care prescribing.

Mr Lindsay advised in reply to a query from a Member that while the Scottish Government expected the Board's year-end financial position to be better than planned they had not set a definite target, although the deficit should be as low as possible.

**Outcome: Board Members noted the Board's financial position for Month 7 to 31 October 2023.**

### **9.3 Whistleblowing quarter 2 performance report (177/2023)**

The Nurse Director, Ms Jennifer Wilson, presented the whistleblowing quarter 2 performance report.

Ms Wilson reported that there were two concerns received in quarter 2, with one being appropriate for the whistleblowing process. The other concern was not appropriate to be reviewed using the Standards as it related to personal experience and the individual who raised the concern was advised of the most appropriate route to take their concern forward through NHS Scotland Workforce policy.

The concern taken forward was a monitored referral from the Independent National Whistleblowing Officer (INWO), as a result of the individual contacting the INWO for advice. The Board was providing the INWO with regular updates on progress. The Whistleblowing Champion, Dr Sukhomoy Das, reassured Members that he had no concerns around the monitored referral.

Ms Wilson provided an overview of concerns raised through 2023-2024 and those closed. She highlighted that as the stage 2 concern being taken forward was complex, the investigation period had been extended beyond the 20 working day timescale to allow a thorough investigation to take place, with the INWO being updated regularly on progress.

The report set out learning and improvement as a result of concerns raised in 2021-2022 and 2022-2023. Ms Wilson advised that as the Whistleblowing process continued to develop and improve, anonymised feedback and experience of individuals raising a concern would be provided in future reports when available. Anonymised feedback would also be included from investigators, witnesses and those involved in the whistleblowing process. In reply to a comment from a Member, Ms Wilson emphasised the confidential nature of the whistleblowing process and the need to protect the anonymity of those raising concerns.

Ms Wilson highlighted that line managers' performance in completion of the Whistleblowing Turas model had improved slightly. She noted the high level of positive feedback received through the latest iMatter survey which indicated that staff felt confident to safely raise concerns about issues, and that these concerns would be followed up and responded to. She advised that while this was good progress, there was still further work to be done to create a psychologically safe environment for staff to raise concerns.

Ms Wilson commended the Head of Corporate Governance and the Whistleblowing Coordinator for the work they had done in preparation for National Speak Up Week to raise awareness of Whistleblowing. She highlighted that she, Dr Das and the Employee Director had held a Whistleblowing Ask Me Anything session and there were plans to promote more of these sessions throughout the year.

Board Members discussed the report and were encouraged and reassured by the positive staff feedback provided through the iMatter survey. Members acknowledged progress with the whistleblowing process to date and recognised that it would take some time to achieve the cultural shift needed.

**Outcome: Board Members discussed the quarter 2 performance report.**

#### **9.4 Ministerial annual review response (178/2023)**

The Director of Transformation and Sustainability, Mrs Kirstin Dickson, provided the Scottish Government's response following the Annual Review on 4 September 2023. This was the first in person review since the pandemic which had provided the opportunity for the Minister to meet a number of colleagues from across the system, as well as patients and carers. There had been meetings with the Area Clinical Forum, Area Partnership Forum and patients and carers, as well as a public session and private session with the Board Chair and Chief Executive. The Minister had provided feedback on a number of key points discussed at the sessions that had taken place, as detailed at Appendix 1 of the report.

**Outcome: Board Members noted the Scottish Government's response following the Annual Review on 4 September 2023 with no questions raised.**

#### **10. For information**

Board Members noted the following items and the Chair drew Members' attention to Good News stories within the Board briefing

##### **10.1 Board briefing (179/2023)**

##### **10.2 East Ayrshire Integration Joint Board minute 30 August 2023 (180/2023)**

##### **10.3 North Ayrshire Integration Joint Board minutes 24 August and 12 October 2023 (181/2023)**

##### **10.4 South Ayrshire Integration Joint Board minutes 13 September and 11 October 2023 (182/2023)**

##### **11. Any Other Competent Business (183/2023)** There was no other business.

#### **12. Date of Next Meeting**

The next public meeting of the NHS Ayrshire & Arran Board will take place at 9.30 am on Monday 5 February 2024.



As per section 5.22 of the Board's Standing Orders, the Board met in Private session after the main Board meeting, to consider certain items of business.

Signed by the Chair

A handwritten signature in black ink that reads "Lesley M Bowie". The signature is written in a cursive style with a long horizontal stroke at the end.

5 February 2024

Lesley Bowie  
Chair – Ayrshire and Arran NHS Board