

# Shetland NHS Board

## Minutes of the Shetland NHS Board Meeting held in public at 10.30am on Tuesday 22<sup>nd</sup> June 2023 via Microsoft Teams

### Present

Mr Gary Robinson	Chair
Mr Colin Campbell	Non-Executive Board Member
Mrs Kathleen Carolan	Director of Nursing & Acute Services [till 10:50]
Mr Lincoln Carroll	Non-Executive Board Member
Mrs Natasha Cornick	Non-Executive Board Member
Mr Michael Dickson	Chief Executive
Mrs Lorraine Hall	Director of Human Resources & Support Services
Mr Joe Higgins	Non-Executive Board Member (Whistleblowing Champion)
Mrs Kathy Hubbard	Non-Executive Board Member
Dr Susan Laidlaw	Director of Public Health
Mrs Emma Macdonald	Local Authority Member
Mr Colin Marsland	Director of Finance
Mr Bruce McCulloch	Employee Director

### In Attendance

Ms Lucy Flaws	Planning, Performance and Projects Officer
Ms Edna Mary Watson	Chief Nurse Corporate
Mrs Carolyn Hand	Corporate Services Manager
Mrs Pauline Moncrieff	Board Business Administrator (minutetaker)
Mrs Erin Seif	PA to Director of Finance
Ms Amy Gallivan	Senior Communications Officer

### 2023/24/41 Chair's Announcements

Mr Robinson formally gave the Board's sincere thanks to Michael Dickson at what was his last meeting as Chief Executive of NHS Shetland. Members joined in wishing Michael every success when he joins the Scottish Ambulance Service as new Chief Executive from 1<sup>st</sup> July.

Mr Robinson added that he pleased to report that Brian Chittick had been appointed to the role of Chief Executive of NHS Shetland from the same date.

The Board learned that the non-executive member recruitment planning was now complete and the vacancy was expected to go live next week and run until mid-August, with interviews planned for later in September.

The junior doctors in Scotland have voted conclusively to reject the pay offer made by the Scottish Government and the leadership of BMA Scotland's junior doctor committee has indicated 3 days of strike action on 12<sup>th</sup>–15<sup>th</sup> July unless an improved offer is put forward for consideration. The Board recognises the right of people to strike, and will work with teams locally to minimise impact.

### 2023/24/42 Apologies for Absence

Apologies were received from Dr Kirsty Brightwell, Brian Chittick and Amanda McDermott.

### 2023/24/43 Draft minutes of the public Board Meeting held on 25<sup>th</sup> April 2023

The draft minutes were approved as an accurate record with no amendments.

### 2023/24/44 Board Action Tracker

The Board Action Tracker was noted.

## **2023/24/45 Matters Arising**

There were no matters arising from the previous minutes or action tracker.

## **2023/24/46 Feedback Monitoring Report Q4 2022/23**

*(Board Paper 2023/24/24)*

Mrs Hand presented the report which had already been discussed at the Clinical Governance Committee and highlighted the key points for members' information:

- Complaint numbers remained steady each quarter and the report sets out the types of complaint investigation conducted including numbers upheld, partly upheld, not upheld and also performance against response times.
- In Q4 the average response time was 4 working days for stage 1 complaints, and Stage 2 had an average response time of 35 days (20 days being the aspiration).
- Stage 2 response times remain a challenge, and appeared to have declined since the pandemic. This situation is not unique to Shetland.
- The key priority for the board is the learning from complaints investigations and what actions were taken to help the individuals who have raised the concerns.
- The annual report, which is due to come to the board in August, will contain a more detailed breakdown of the other types of feedback and any emerging themes.
- One case has been escalated to the Ombudsman, but there was no further investigation taken.

## **Discussion**

Mrs Macdonald asked if the board ran the risk of receiving more complaints as it strived to deliver an unsustainable service that meets the expectations of the public. Mr Dickson acknowledged there was a perception that the NHS was seen as the only place to access some services so it was important to encourage system wide working where possible to ensure the broadest access into a wide variety of services.

From a Shetland perspective, the majority of people understand that there is a finite level of service provision that NHS Shetland can provide and understand that it will be necessary to travel for certain treatment. They also appreciate that the board will sustainably repatriate services where possible. It is important that the board changes its models of care to meet the funding envelopes available which may mean working in different ways, joining up services on a regional basis or with other partners to try to reduce expectation mismatch.

Dr Laidlaw commented that some of the work being done around realistic medicine, particularly on shared decision making, focuses on communication and the partnership between clinicians and patients both to the individual and also in the community as a whole. Board members will be updated on progress with this work in the future.

Mr Robinson added that this was excellent work which helped to build recognition in the community that there are many ways to access healthcare and gave community pharmacy services as an example.

Mr McCulloch highlighted that the HR department have been piloting an online positive feedback service called Greatix where staff have the opportunity to comment on the good things that other staff have done and nominate them for a Greatix. Initial feedback received at Area Partnership Forum was that it had been well utilised by staff.

**The Board noted** the Feedback Monitoring Report Q4 2022/23.

## **2023/24/47 2022/23 Performance Report Quarter 4 2022/23**

*(Board Paper 2023/24/25)*

Ms Flaws presented the report and which had already been to the Finance & Performance Committee on 25 May 2023. Some of the key points for members' information were:

- A workshop is planned in August with the Finance & Performance Committee to look at ways to develop the usefulness of the performance reporting to provide assurance as well as to work as a tool to support improvement in the organisation.
- (Appendix 1) Psychological Therapies – Q4 data shows the impact of an increase in referrals reported in Q2 and Q3 ie. those patients who were referred in those quarters have reached the 18 week wait point in Q4. The Psychological Therapies team have implemented a phone, check and triage system to allow anyone on the waiting list to get advice and signposting while they wait for a formal assessment.
- (Appendix 1) Child and Adolescent Mental Health Services (CAMHS) – this indicator has changed due to the impact of a number of factors including the service boundary expansion and an increase in the complexity of patients seen due to working more closely with colleagues in learning disabilities and AHP colleagues to provide a more joined up service but does mean increased pressure on staff capacity.
- (Appendix 1) Work to develop a local Consultant Sonographer service to enable more patients to access more expertise closer to home and thus improving patient experience and provide some consistency.
- (Appendix 1) Consultant led waiting times >12 weeks shows the impact that the board's regional models and the pressures elsewhere are having on Shetland patients who are accessing either visiting services or who are travelling away to access support.
- (Appendix 1) The number of successful smoking quits at 12 weeks post quit - the team has struggled to meet this national target. Historically there have been issues meeting the target due to a decreasing number of people smoking in Shetland, which is a big positive. However, the support of the Smoking Cessation team is still required and more recently concerns have been raised around the capacity within the team to deliver these services with 140 referrals received and being able to support around 70 people.
- Waiting times for drug and alcohol treatment target - there are limitations in capacity within the team and there is currently active recruiting for posts. The team is looking at how to structure the service to best support the community in Shetland and work on the inequalities of access with our geography and rurality.
- The Recovery Hub - one of the Advanced Nurse practitioners in the Community Nursing team is working with staff and clients to enable access to more physical health services in a way that is most helpful for them.
- A&E 4 hour wait target has slightly decreased locally but remains significantly above the national average. One significant factor in this change has been the introduction of a triage system, meaning that patients are registered more quickly when they arrive at A&E in order to understand their needs.

### **Discussion**

There was discussion on the data around attendance at A&E and Ms Flaws reported that indications were that activity was returning to pre-Covid levels (following a decrease during the pandemic) which is also the picture nationally. However, the wider picture locally was that there had been a gradual decline over the last 10 years partly due to the different ways people access services. Ms Flaws said there would be a piece of work required with the community looking at signposting to services and options for self-care eg. Pharmacy First.

Dr Laidlaw commented that in the past the Health Improvement team had been able to manage the waiting lists for smoking cessation and the increase in numbers may be due to the pandemic with the resulting backlog which is a challenge due to the capacity issues within the team. These staffing issues are made more challenging when several posts are funded by non-recurring monies and not core funding.

Dr Laidlaw explained that MMR uptake in Shetland had been improving gradually in recent years due to the hard work of health visitors, practice nurses and immunisers. The immunisation team carry out a monthly audit looking at all vaccination uptake rates for children in order to identify those who have not had their immunisation and then follow up with a view to increasing rates. Nationally, there is concern about an increase in measles cases so there is national publicity around the risks (particularly in unvaccinated population) and work to increase vaccination rates. Locally, NHS Shetland is identifying younger and older children who have not had their MMR and inviting them in for vaccination.

Mr McCulloch informed members that the chair of the Wellbeing Group now attends meeting of the Area Partnership Forum to give a verbal update on the themes they identify.

**The Board noted** the Performance Report Q4 2022/23.

**2023/24/48 Whistleblowing Champion Standards Annual Assurance Report 2022/23**  
(Board Paper 2023/24/26)

Ms Watson presented the report which has also been discussed at the Staff Governance and Clinical Governance Committees. The report provides an overview of the last year's activity and highlights there is an Implementation Steering Group in place which meets quarterly and is a joint meeting with NHS Orkney. Mr Higgins has been in post as Whistleblowing Champion for NHS Shetland since December 2022.

**Discussion**

Mrs Hall expressed the board's gratitude to Ms Watson and all the confidential contacts within the organisation who undertake that role in addition to their day job. This is a valued role which gives colleagues the opportunity to be signposted to have a conversation with a knowledgeable individual which is hugely supportive.

Mrs Hall reported that the iMatter reports had been issued earlier in the week and 98% of staff who completed the survey had answered the 2 questions on raising concerns and broadly colleagues agreed with both statements. This result is beginning to show the work being done in terms of raising concerns, whether relating to performance, human relations aspects or whistleblowing.

Mr Robinson reminded members that Marianne Williamson in the HR department would be happy to assist them gain access to TURAS in order to complete training modules including that on whistleblowing. Mr Campbell said it was very encouraging to see whistleblowing now included as part of the corporate induction and staff should be commended for this step.

**DECISION: the Board noted** the Whistleblowing Champion Standards Annual Assurance Report 2022/23.

**2023/24/49 Approved Committee Minutes for Noting**  
Members noted the committee minutes.

**2023/24/50** The next meeting of Shetland NHS Board will be held on Tuesday 29<sup>th</sup> August 2023 at 9.30am via Microsoft Teams.

*The public meeting concluded at 11:20*