

Shetland NHS Board

Minutes of the Shetland NHS Board Meeting held at 9:30am on Tuesday 15 February 2022 via Microsoft Teams

Present

Mr Gary Robinson	Chair
Mr Malcolm Bell	Non-Executive Board Member
Dr Kirsty Brightwell	Medical Director
Mr Colin Campbell	Non-Executive Board Member
Mrs Kathleen Carolan	Director of Nursing & Acute Services
Mr Lincoln Carroll	Non-Executive Board Member
Dr Susan Laidlaw	Director of Public Health
Mrs Lorraine Hall	Director of Human Resources & Support Services
Mrs Jane Haswell	Non-Executive Board Member
Mrs Kathy Hubbard	Non-Executive Board Member
Mrs Amanda McDermott	Chair, Area Clinical Forum
Mr Colin Marsland	Director of Finance
Mr Ian Sandilands	Employee Director

In Attendance

Mr Lawson Bisset	Head of Estates, Facilities & Medical Physics
Mr Craig Chapman	Head of IM&T and eHealth
Mr Brian Chittick	Director of Community Health & Social Care
Mrs Carolyn Hand	Corporate Services Manager/Feedback and Complaints Officer
Mrs Pauline Moncrieff	Board Business Administrator (Minutes)
Ms Elizabeth Robinson	Public Health and Planning Principal
Mr Jason Taylor	Interim Whistleblowing Champion

2021/22/99 Chairman's Announcements

Mr Robinson welcomed Kathy Hubbard to her first formal Board Meeting as a Non-Executive Director. He also welcomed Jason Taylor who is extending his role as the Whistleblowing Non-Executive Board Member for NHS Orkney to provide cover on an interim basis for NHS Shetland.

Shetland has seen a higher number of Covid cases in recent weeks and the board's contract tracing team is working very hard to try to potentially slow spread in the general population and identify and contain positive cases in high risk settings. Vaccination uptake remains high, meaning Covid is now a very mild illness within the general population, and the vaccination is protecting most of the more vulnerable people from severe illness. Staff are now vaccinating high risk children aged 5-11.

Mr Robinson thanked the community for the continued efforts to stop the spread of Covid to protect the most vulnerable in our society, and for the high levels of LFD reporting seen.

If anyone has not yet received a vaccination or is due a booster jab, clinics are running at the Gilbertson Park Games Hall on Tuesdays and Thursdays this month from 11.30-6.30. If anyone cannot manage these clinics or have any queries, they should contact the vaccination team.

2021/22/100 Apologies for Absence

Apologies were received from Natasha Cornick and Michael Dickson

2021/22/101 Declarations of Interest

There were no interests declared.

2021/22/102 Minutes of the Board Meeting on 14 December 2021

The draft minutes were approved with no amendments.

2021/22/103 Action notes of the agile Board Meeting on 25 January 2022

The draft minutes were approved with no amendments.

2021/22/104 Board Action Tracker

The action tracker was noted.

2021/22/105 Matters Arising

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

2021/22/106 Quality Report – Update on Progress (Board Paper 2021/22/58)

Mrs Carolan presented the progress report and highlighted the key points in the report for members' attention:

- Work is being done to support winter planning and remobilisation but also details how progress continues with quality improvement programs despite the board being on an emergency footing.
- The report contains examples from the Shetland Children's Partnership, around neuro development pathways and also how the board could begin to look at services using a trauma informed lens.
- In the last 3 months, staff have tried to maintain business as usual with the majority of our services having run uninterrupted which is testimony to the dedication of staff.
- The board's Winter Plan was used which was developed in partnership in order to scale up and scale down services as required when depending on increases in activity or dips in staffing.
- A Winter Plan SWOT Analysis will be presented to the Joint Governance Group later this week which looks at the strengths of the plan and explore what opportunities there may be to see the board through the rest of winter.
- The report summaries some of the work been done as part of the Clinical Strategy and remobilisation to keep on top of our elective care programme.
- There is a visiting service in Shetland from a number of specialties through the mobile theatre and, at the time of this meeting, 130 patients have had cataract operations and 48 have had orthopaedic procedures. This helps the board in terms of secondary prevention, reducing health inequalities and improving access for our patients.

Discussion

In response to a question from Mr Robinson, Mrs Carolan explained that every patient who comes through the mobile theatre unit is asked to complete a survey where they can indicate if they would like to have a more detailed discussion. The team is carrying out a more systematic piece of work to evaluate people's experience and the results will be brought back to the board in June.

Mrs Carolan explained that a bid for funding for a Project Officer had been submitted. At present, the priority for the team is to progress work across the partnership within current resources to do some mapping work and involve families in some of the conversations about services that currently exist.

[09:45 Orthopaedic patient experience clip recorded by BBC Radio Orkney]

Members agreed that the clip was very good to hear and Mrs Carolan said it illustrated a good example of collaborative working between NHS Shetland, NHS Orkney, NHS Grampian and NHS Golden Jubilee adding that there may be opportunities to do similar things in the future. Mr Robinson said that in terms of patient centred care, reducing the amount of travel must be one of the biggest benefits as was clearly evident from the positive feedback in the clip.

Mrs Carolan said that it was expected that by the end of the programme at the end of March, approx 350 people will have accessed the visiting service for a variety of specialties. NHS Shetland will continue to keep the mobile theatre due to the ongoing building programme to increase the size of the ambulatory care unit so the mobile theatre will continue to play a vital role in local service delivery until autumn.

Mrs McDermott praised the work of the clinical teams in Shetland who have supported the clinicians who staff the theatre and the ward. The excellent support from the CDU team, the lab team, the clinical nurse managers enabled those teams who have come into the island to form the cohesive unit in Shetland.

Mr Robinson extended thanks on behalf of the Board to Mr Flett and to BBC Radio Orkney for the use of their clip. Members acknowledged the tremendous amount of work right across the board staff and it was a credit to everybody how well received the visiting service was by everyone.

The Board noted the Quality Report.

2021/22/107 Healthcare Associated Infection Report

(Board Paper 2021/22/59)

Mrs Carolan said the report did not indicate any exceptions in terms of infection control compliance for Shetland. This is important to note because of the level of national scrutiny around infection control compliance but the report will give members assurance that the board is doing really well in all domains of infection control and prevention.

The Health Protection and Infection Control teams continue to be very busy and have played a huge role over the winter months in supporting staff, patients, clients and residents in a variety of settings and to manage the omicron variant since the end of

November. Staff continue to provide input to services particularly since the increase in staff who are self-isolating and a smaller number who have contracted covid and helping us to maintain services and be infection control compliant.

NHS Shetland has submitted to Health Improvement Scotland its 18 week update on the improvement plan following the unannounced inspection in Sept. Mrs Carolan said she was pleased to report that all the actions which were recommendations from that inspection have been completed or closed off.

The Board noted the Healthcare Associated Infection (HAI) report.

2021/22/108 Financial Performance Management Report Update – Month 9

(Board Paper 2021/22/60)

Mr Marsland presented the paper and highlighted the key messages:

- The board is £2.4m overspent and the main underlying issues are in relation to sustainability of services.
- There is a £2.3m overspend in the cost of additional staffing primarily in services covered by the IJB. The cost is approx. 50/50 between GP locums and psychiatric consultant locums in supporting those services.
- In the acute settings, the cost is in anaesthetics and general medicine where the board's staffing models need to be reviewed to make them sustainable in financial terms
- Service redesign remains a challenge in order to achieve the savings targets the board is required to meet and is not on course to achieve this year on a recurrent basis. This will put pressure into next year where the board will have to make savings in line with the SGov plans.

Discussion

In response to a question from Mr Sandilands, Mr Marsland said there is no cap on locum spend in NHS Scotland but there is theoretically in NHS England. The current situation in the market is that the supply of consultant locums is less than the demand for them. The issue of locum costs has been discussed nationally by DoFs, but the only sustainable solution is training plus recruiting and retaining consultants across the whole of Scotland (and the UK). The reality is that staff will choose to move to areas where they can maximise their earnings and achieve the work/life balance they wish. Mrs Carolan said that the fact that NHS Shetland is able to attract high quality locums, is a plus point for the organisation because many other boards are finding it difficult to do so at any cost.

Members discussed issues and challenges of workforce development and the use of supplementary staff. It was agreed that it was important to continue to attract people to come and live in Shetland and to ensure that NHS Shetland was a good employer and a good place to work.

Mr Robinson added that housing was critical in recruiting staff and was why capacity for 100 people has been included in the Strategic Assessment for a new health and care campus.

Responding to a question from Mr Bell, Mrs Carolan said boards were constrained by the ways in which T&Cs frameworks are implemented in the NHS which drives people to make financial choices about how they want to be engaged by health boards. Often clinicians choose to work through locums models because the existing T&Cs frameworks do not work for them (including pensions). Until the issue of shaping the workforce for the future is tackled at a national level then people will continue to use supplementary staffing.

Mrs Haswell raised the issue of out-of-hours locum cover and the national programmes looking at that specific high cost pressure for boards. It was suggested members would be interested in learning more insight into these programmes.

ACTION: Mrs Hall agreed to present a session at a future Board Development Session

The Board noted the Financial Performance Management Report Update.

2021/22/109 Capital Programme Progress Report (Board Paper 2021/22/61)

Mr Bisset presented the report which updates the board on the work within the Estates, Facilities and medical equipment departments as it faces the challenges of the coming financial year. The relevant points for members to note included:

- It has been possible to secure substantial additional funding through SGov which has put pressure on all the stakeholders including clinicians, project teams and colleagues delivering the on expenditure.
- The board is on track to achieve everything outlined in the report within this financial year.
- If any board member has an interest in a particular project or a service delivery model, they are invited to contact Mr Bisset directly for a more detailed update.

Discussion

In response to a question from Mr Sandilands regarding the continuing impact of restrictions on office space, Mr Bisset said it would depend on the model adopted by SGov. The Estates and Facilities team have done some preliminary work looking at the areas that need to be addressed but the main issue is the increased number of staff since the pandemic began and the organisation is struggling to accommodate that increase. The possibility of sourcing some external accommodation is being explored and that is likely to be in place until the completion of the new campus. There is ongoing work to ensure the best use of space within the hospital for patient facing services and for non-patient facing, trying to find alternative accommodation.

Mrs Carolan added that the trend was moving towards the blended approach of working where MS Teams is appropriate and where it was possible to work remotely then staff would do so. If it was necessary to work in a single space then the board will create some hubs to do so as part of its approach to remobilisation. Mr Marsland reported that the list of health centres due to get electrical charging points did not include Walls because SIC is planning to install charging points as part of their network by the end of March.

In response to a question from Mr Campbell regarding the sale of 92 St Olaf Street, Mr Bisset acknowledged the sale had not progressed as quickly as hoped. There are

some developer building work costs attached to the building which could be the reason for this. Mr Bisset offered to provide a more detailed update outwith the meeting. Mr Marsland added that the closing date on St Olaf Street was 18th February and a clearer idea of the market would be evident after this date.

Mr Carroll asked when board members would be provided with an update on progress with the tendering process for the MRI scanner. Mrs Carolan said there would be a presentation at the Endowment Committee meeting which sets out the indicative timeline. At this point the Capital Management Group would then take over the monitoring of the project and will then be reported to the board report rather than Endowment Committee. The board would be updating partners at the Charitable Trust on progress and the timeline because the project is still dependent on their donation.

Mr Bisset added that there was potentially SGov funding available in the next financial year, predominantly around the sustainability agenda and NHS Shetland would be submitting an application for this. A paper would be presented hopefully to the April board outlining these opportunities and the plan to take advantage where possible.

ACTION: Lawson Bisset

The Board noted the Capital Programme Progress Report.

2021/22/110 Performance Monitoring Report Q3 (Oct-Dec 2021)

(Board Paper 2021/22/62)

Ms Robinson presented the report and said that the plan was to develop the way that performance was reported to enable the board to feel assured of progress against its strategic targets. The team will be working on that for the beginning of April 2022. The main points highlighted to members included:

- Progress continues to catch up following covid and teams worked extremely hard to continue this work.
- Not presented in the report is some of the progress that will have been made by the mobile theatre unit because the period of the report is only up to the end of December.
- It is anticipated that by the end of the next quarterly report, it will be possible to see real improvements.
- One welcome success story is around the Psychological Therapies Plan which has improved greatly in terms of what the team is achieving, and the number of people they are seeing within a good timescale.

Discussion

Mr Campbell acknowledged the significant improvement in the psychological therapies service and congratulated the team on their noteworthy progress despite the challenges of staff shortages etc.

In response to a question from Mrs Haswell regarding the replacement of the endoscope washer/disinfector that is due in 2022, Mr Marsland reported that the item was part of the capital plan, is due to be installed by 31 March 2022 and had been ordered but had to come from a supplier Canada.

Mr Robinson raised the issue of vaccinations and the drop in MMR uptake in recent quarterly reports. Ms Robinson reported that a Vaccine Co-ordinator had been appointed to support the work of the Public Health team and working closely with HVs and midwives. Dr Laidlaw explained that MMR uptake had been an issue in Shetland for several years and had increased before recently falling again and there will be some work required to get it back up to previous levels. There was evidence that some people delay the MMR vaccination until after the monitoring is done so the priority was to encourage them to bring it forward to the correct times. It was hoped that once the covid vaccination programme was complete, the team can start working on the other sets.

The Board noted the Performance Monitoring Report Q3 (Oct-Dec 2021).

2021/22/111 Digital Security Framework (Board Paper 2021/22/63)

Mr Chapman presented the paper which sets out a refresh of digital security (cyber security) and expands the different areas into separate sections which will make it easier to address a certain area when required.

The framework is divided into 2 pillars - the digital security element and the information governance element. Digital security covers access and the controls and tools whilst information governance is about the behaviours around data. The paper brings together the 10 policies that sit under the summary framework tackling each area of the tools of digital security.

Discussion

In response to a question from Mr Robinson, Mr Chapman confirmed that the Digital Security Framework had been approved by eISG and but due to working in a governance light environment at the time of writing 4 month ago, it had not been presented to Clinical Governance Committee.

Mr Campbell said the board could feel assured that digital security risks were being minimised or controlled as far as was possible.

Mr Chapman described how the policies would be rolled out to all users. There would be promotion in the staff newsletter plus offering an online workshop via MS Teams to discuss any concerns and offer support. Staff in NHS Shetland have a reputation for being a very responsible workforce so there are no major issues envisaged.

Mrs Haswell flagged the requirement for training around behaviours and the use of Teams for sensitive verbal conveyance of patient information and security in buildings that we have no control over. Mr Chapman said that resources in Staff Development were being explored including around peoples' use of new technologies particularly around the Microsoft 365 suite. There is a lot of good literature available that could be localised for NHS Shetland for use alongside the strategy, policies and a number of guides and best practice that will put in place.

Mrs Hall described how nationally, SGov have been trying to create a 'Once for Scotland Home Working Policy' and are engaging with the board's eHealth and IT leads around sections to ensure they have got the elements of confidentiality and security covered. Reminders are issued to staff when working remotely to reinforce the

importance of confidentiality and security of data. Members were encouraged to participate in the Scottish Business Resilience Centre's 'Cyber Executive Education Programme' run over 3 evening sessions from 6-8pm. Topics included the implications and risks for public sector organisations and which could be taken into organisational resilience planning.

ACTION: Members interested in the course should contact Mrs Hall

Mr Robinson said it was reassuring to hear that NHS Shetland staff take cyber security seriously but the organisation still needed to maintain its guard.

Mr Chapman informed the board that it was expected that the Information Governance Strategy would be tabled at the April board meeting.

The Board noted the Digital Security Framework.

2021/22/112 Approved Committee Minutes for noting
Members noted the committee minutes.

2021/22/113 The meeting of Shetland NHS Board will take place on Tuesday 26th April 2022 at 9.30am via Microsoft Teams.

The public session of the meeting ended at 10.45am.