Board Meeting 13.06.24 Open Session Item 5

## **Chief Executive's Report**

13 June 2024 Board Meeting

Dr Adam Coldwells, Interim Chief Executive

## Purpose of this report



This report updates Board members on priority issues since the last Board meeting which are not covered elsewhere on the agenda.

## 1. Route to Net Zero

Clean Air Day takes place across the UK this month (20 June), shining a spotlight on air pollution and the activities underway aimed at improving it. This should remind us of NHS Grampian's ongoing commitment to the environment and sustainability, which has already seen us decommission our nitrous oxide pipelines, saving the equivalent of up to 1274 tonnes of carbon dioxide on an annual basis. However, there is much more to be done and we are currently undertaking work that will provide us with the knowledge required to develop an implementation plan that underpins NHS Grampian's <u>Climate Emergency & Sustainability Strategy</u> and support NHS Scotland's 2040 net-zero emissions target.

I therefore wanted to provide an update on two pieces of work which will help us understand the condition of NHS Grampian's building portfolio and supports the development of a phased approach to decarbonising our estate. Firstly, Programme Initial Agreement (PIA) work is underway to identify the relative condition of our buildings and the investment that would be required in order for them to meet environmental sustainability standards in the future. Whilst the systematic, detailed evaluation of our extensive estate will take time, it is our intention to share the outputs of this work with the Scottish Government by spring 2025.

In the interim and parallel to this piece of work, NHS Grampian is identifying a list of trial sites across a range of building types and functions which will be evaluated using a range of factors such as intervention costs, operational savings and carbon savings. This will enable meaningful comparisons to be made and a decision model for either targeted or phased intervention to be taken, focused on either carbon or operational cost reductions.

Whilst we don't know what different technologies will be available to assist us with the transition to net zero in the future, we do know that a multi-pronged approach to decarbonising our estate will be necessary. So, we are also exploring investment pathways for building decarbonisation and the implementation of innovative technologies through Power Purchase agreements.

## 2 Unscheduled Care

In my report to the Board in March, I shared details of a number of pieces of work that are increasing capacity and supporting flow in the whole Unscheduled Care pathway, which in turn, contributes to a reduction in ambulance waits. The Clinical Governance Committee also recently considered a paper setting out risks and improvements plans at their meeting on the 14 May 2024. Our ambulance wait times remain an outlier in NHS Scotland and I recognise the significant impact this has. We continue to earnestly pursue any opportunities to reduce ambulance delays and make improvements wherever we can. Today I wanted to provide an update on some of the ongoing work taking place across our system.

As part of our newly established joint escalation framework with the Scottish Ambulance Service, we now have agreed plans in place for the rapid release of ambulances to respond to life threatening calls in the community, as well as to expedite care and treatment to any patient who shows signs of deterioration whilst waiting in an ambulance. These have been successfully implemented and are helping to mitigate the clinical risk that ambulance queuing represents.

In a recent report, the Centre for Sustainable Delivery (CfSD) concluded that NHS Grampian is already one of the most efficient unscheduled care systems in mainland Scotland achieving middling performance against the Emergency Access Standard whilst operating within a significantly smaller bed base. However, the CfSD did highlight several 'Productive Opportunities' worthy of increased focus, including a reduction in the total number of people spending more than 14 days (+14 day patients) in hospital. Though it is notable that NHS Grampian already has one of the lowest total number of +14 day patients in hospital across acute and community sites per head of total population of any mainland health board. Therefore the scope for improvement is lower in NHS Grampian than in other boards. Our Unscheduled Care Programme Board is now reviewing this and the other opportunities highlighted by the CfSD and will align them to our forward plans as appropriate.

Dr Adam Coldwells, Interim Chief Executive

6 June, 2024