

## NHS GRAMPIAN

Minute of Area Clinical Forum  
on Wednesday 6<sup>th</sup> March 2024 at 15.00  
by Microsoft Teams

Board Meeting  
13.06.24  
Open Session  
Item 13.6

**Present**

Vicky Ritchie	ACF Vice Chair and Chair, Healthcare Scientists Forum
Fiona Campbell	Chair, GAAPAC
Helen Chisholm	Chair, GANMAC
Lynne Davidson	Chair, Area Pharmaceutical Committee
Linda Downie	Vice Chair, GP Sub-Committee
Dympna McAteer	Vice Chair, Consultant Sub-Committee
Carole Noble	Chair, AHPAC
Rachael Regan	Vice Chair, Area Optometric Committee
Murray Smith	Chair, Consultant Sub-Committee

**Attending**

Richard Caie	Public Representative
Adam Coldwells	Chief Executive, NHSG
Susan Harrold	Planning Manager (Item 5)
Gerry Lawrie	Head of Workforce and Development (Item 4)
Shantini Paranjothy	Deputy Director of Public Health, NHSG
Alex Steven	Director of Finance, NHSG (Item 7)
Elizabeth Wilson	HCSA Implementation Programme Manager (Item 4)
Else Smaaskjaer	Senior Administrator (Note)

Item	Subject	Action
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**1 Welcome and Introduction**

Mark Burrell was unable to attend and Vicky Ritchie chaired the meeting.  
Ms Ritchie welcomed all those attending and apologies were noted.

**2 Note of Meeting on 17<sup>th</sup> January 2024**

The minute was approved as an accurate record.

**3 Matters Arising**

There was discussion around distribution of minutes. Some members queried whether the minutes could be disseminated to their advisory committees and beyond and it was advised that this would be possible after the minutes had been approved. At that point the minutes go into the public domain along with other papers for NHS Grampian Board meetings. There was some thought that they could be distributed to advisory committees earlier than this to give higher visibility to items such as the ongoing work in relation to the Health and Social Care Staffing Act.

**To discuss at next meeting on 1<sup>st</sup> May 2024.**

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4	<b>Health and Care Staffing Act</b>	

Gerry Lawrie, Head of Workforce and Development  
Elizabeth Wilson, HCSA Implementation Programme Manager

A presentation was provided to raise awareness regarding the plans for implementation of the Health and Care Staffing Act. The presentation highlighted the duties and requirements outlined in the Act and provided an opportunity to discuss the implications of the Act across professional groups. The Act comes into effect on 1<sup>st</sup> April 2024 with an intention to support the health, wellbeing and safety of patients and the wellbeing of staff to enable safe care and improve outcomes. Key points highlighted:

- Professional groups will have a role in the implementation of the Act and the development of assurance systems and processes.
- Governance in relation to the implementation of both the Health and Social Care Act and eRostering will include input from Clinical, Portfolio, Health and Social Care Partnership and Corporate colleagues. The implementation groups will report through a Workforce Programme Board and an Oversight Board to the NHSG Staff Governance Committee.
- The requirements of the Act are not new but there will be emphasis on consistency of approach and the reporting requirements are intended to support workforce planning and inform service redesign.
- The roles in scope include health care staff, professional clinical staff, those who provide clinical advice and all those employed in delivering care services.
- There are a range of duties incorporated into the Act which include ensuring appropriate staffing, having risk escalation process in place and arrangements to address severe and recurrent risks, ensuring appropriate training and having real time staffing assessments.

Items discussed:

- It is unlikely that any additional financial resources will be made available.
- The reduction in the working week will impact on protected time for training. This is already challenging as staff across the organisation are not currently achieving compliance in relation to mandatory training.
- Job planning is embedded for some professional groups and it would be helpful to have support in place to establish this for those who don't.
- With regard to a timeline for the implementation of the Health and Care Staffing Act and eRostering it is planned to roll out eRostering in some nursing areas. The limiting factor at this time is the lack of interface between eRostering and SSTS which results in manual transfer of data.

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- Arrangements for staff engaged on fixed term/temporary contracts and staff delivering single person services will continue as they are.
- Suggested that a Teams channel similar to the one for Digital Champions where staff can ask questions and others can respond and share information would be useful.

**The Area Clinical Forum thanked Ms Lawrie and Ms Wilson for the informative presentation and discussion. Ms Wilson will share links to further information and contact details for the HCSA Programme Team.**

## 5 NHS Grampian Delivery Plan Update

Susan Harrold, Planning Manager

A presentation provided an update and confirmed the next steps in the development of the Draft NHSG Three Year Delivery Plan. The draft plan has been developed within the framework of the NHSG Strategy 'Plan for the Future' and the Scottish Government's 10 Drivers for Recovery. A main requirement has been to align the Delivery Plan and the Financial Plan for NHS Grampian to ensure that key areas are realistic and deliverable within the Board's financial envelope.

The key objectives remain the same as previously reported with the proposed priorities for People, Places and Pathways RAG rated as follows:

- R**ed – no funding available.
- A**MBER – partial funding/resources available.
- G**reen – funding/resources in place.

- The delivery plan to be submitted to the Scottish Government on 7<sup>th</sup> March 2024 as an initial draft.
- Draft Delivery and Finance plans, plus a Workforce Plan to be presented for consideration at a Closed Board Session on 14<sup>th</sup> March 2024.
- Formal feedback expected from Scottish Government later in March 2024.
- The Delivery Plan will be revised following feedback from NHS Grampian Board and the Scottish Government, and if it is signed off in time will be re-presented to the NHS Grampian Board meeting on 11<sup>th</sup> April 2024.

**The ACF thanked Ms Harrold for the update. She agreed to circulate the slides but asked that as they are still under development they are not circulated beyond ACF members.**

## 6 Updates from Advisory Committees

The ACF considered the introduction of a reporting template for each meeting:

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- The template circulated and ‘pinned’ to the Teams channel is reasonably easy to complete.
- A note a week before each meeting to remind Chairs to provide an update would be useful.
- Submission deadline would be immediately prior to the meeting.
- The update would remain ‘pinned’ and will be downloaded and circulated just before the meeting to provide an opportunity to pre-read.
- At meeting allow reading time then questions.

Items highlighted from update to this meeting:

**AHPAC** had discussed concerns regarding the decision by Aberdeenshire Council to cut funding for 9 WTE Speech and Language Therapists.

- It is anticipated that this will have a significant adverse impact on young people, families and colleagues in education and healthcare services.
- Concerns include that the removal of support for children with communication difficulties will lead to poorer attainment, a decline in wellbeing and mental health and increased behavioural problems.
- SLT staff in Aberdeenshire employed by NHS Grampian were funded by Aberdeenshire Council as part of its education provision. Given the specific skills and proficiencies of their role, it is unlikely that there will be successful redeployment to other services for those staff.

**ACF noted the consequences of this cut in funding.**

**GAAPAC** had considered the challenges experienced by colleagues in Adult Mental Health in accessing clinical space, particularly in primary care, to see patients. The rooms previously used by psychological therapists in the community are no longer available to them.

- Given the importance of building relationships in mental health services through face to face meetings it would be useful to apply fresh thinking to accessing rooms in buildings owned by local authorities and other services.
- Accommodation will continue to be a challenging issue going forward and suggested that if many staff are now home working it could be helpful to explore usage of existing rooms and the possibility of sharing space.
- One of the outcomes of moving staff to Woodhill House is that accommodation on the Foresterhill Health Campus could be freed up for use by clinical teams.

**7 “What Does the Future of Healthcare Look Like Short Term and Long Term Within a Tightening Financial Envelope?”  
(Continue Discussion from Previous Meetings)**

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Alex Stephen, Director of Finance

A presentation provided an overview of the 2023/24 financial position for NHS Grampian and the challenges in developing a financial plan for 2024/25 which will meet the requirements set out by the Scottish Government. Key points highlighted:

- Reduction of the brokerage available from the Scottish Government from £60m to £25m had added to the scale of the challenge in developing a financial plan for 2024/25. The financial gap for NHS Grampian before the budget announcement in December 2023 had been forecast at £39m and this had increased to a gap of £77m.
- Capital funding across Scotland will also be very tight next year with little available in Grampian beyond that required for the Baird Family Hospital and the ANCHOR Centre. The Scottish Government had confirmed that planning for National Treatment Centres in Aberdeen and Elgin should pause. The limited funding available will be targeted at essential maintenance of buildings across the estate.
- The budget letter from the Scottish Government confirmed that Board allocations had essentially been “flat cashed”. The 4.3% headline uplift indicated relates to the pay award funding for 2023/24.
- Discussion at Chief Executive Team Meetings and at Critical Thinking Sessions with system wide representation, including operational teams, had identified a number of areas which could lead to longer term saving. All of these need time and capacity to ensure they are fully evaluated, impact assessed and that implementation is planned appropriately.
  - ~ Regional Working – what is the NHSG approach?
  - ~ Annual Delivery Plan – what’s in, what’s out and what can be delayed.
  - ~ Prescribing – how can NHSG reduce spend/waste?
  - ~ Value and Sustainability – explore new areas of focus to deliver efficiencies.
  - ~ Realistic Medicine – explore all options.
  - ~ Digital Strategy – explore areas for digital automation to release savings.
- A group had been established which will be co-chaired by the Director of Public Health, the Employee Director and the Chair of the Area Clinical Forum to balance financial, clinical and staff governance and take account of the agenda around prevention and self-management in progressing work on the areas outlined above.

Items discussed:

- One of the real consequences of not submitting a financial plan which meets the approval of the Scottish Government will be that NHS Grampian will be placed on a higher level of escalation in the national performance management framework. This will result in

more intervention from the Government and a loss of local control in decision making.

- Communication with staff throughout this exercise had been good and some positive public messaging to encourage behaviours to support prevention and self-management could also help to reduce some expenditure in the longer term. Acknowledged that public messaging would be complex and should not raise anxieties.
- Assistance to IJBs had not been included in the current figures.
- Nationally, it could be useful to look at engaging with health economists when discussing realistic medicine and what brings real clinical value to patients. Clinicians should be encouraged to participate and widen the discussion to include activities as well as medicines.
- There are ongoing discussions regarding best value and effectiveness within professional groups and some national guidance and support would be helpful.
- Energy efficiency measures will be explored and will include solar panels on the Baird Family Hospital and other new builds to meet Scottish Government requirements in relation to Net Zero Carbon. Any funding sources to enable increased energy efficiency will be looked at but it likely that, given the scale of national financial challenges, this funding will be reduced.

**The Area Clinical Forum thanked Mr Stephen for the update and appreciated the opportunity to contribute to these discussions.**

**8 AOCB**

None.

**Dates of Future 2024 Meetings (By Teams)**

Wednesday 1 <sup>st</sup> May	15.00 – 17.00
Wednesday 26 <sup>th</sup> June	15.00 – 17.00
Wednesday 4 <sup>th</sup> September	15.00 – 17.00
Wednesday 6 <sup>th</sup> November	15.00 – 17.00