Minute

Tayside Area Partnership Forum

Minute of the above meeting held at 1.30 pm on Tuesday 26 January 2016, in the Boardroom, Kings Cross.

Present
Mrs J Alexander, Staff Side, UNISON
Mr L Bedford, Interim Director of Finance
Mrs J Bodie, Director of eHealth
Mr M Cafferty, Staff Side, RCN
Mrs G Costello, Nurse Director
Mrs A Crozier, Staff Side, UNITE
Mr G Doherty, Director of HR
Mr A Drummond, Staff Side, UNISON
Ms M Dunning, Board Secretary
Mrs J Golden, Employee Director/APF Joint Chair
Mr A Manley, Staff Side, UNISON
Mr R Marshall, Staff Side, UNISON
Miss K McDermott, Staff Side, SBH
Mrs L McLay, Chief Executive/APF Joint Chair
Mr J McLeod, Staff Side, CSP
Miss H Milosavljevic, Staff Side, BDA
Mr B Nicoll, Director of Primary & Community Services
Mr R Packham, Chief Officer, HSCI, Perth & Kinross
Mr D Riley, Staff Side, UNITE
Mr A Small, Head of HR – Business Management
Mrs J Torbet, Associate Director of HR
Mrs B Tucker, Staff Side, RCN
Mrs L Wiggin, Director of Acute Services

Apologies
Mr K Armstrong, Director of Operations
Mrs R Macaskill, Staff Side, RCN
Mrs E Masson, Staff Side, Society of Radiographers
Mrs L McCallum, Staff Side, UNITE
Dr K Ozden, Director of Mental Health/Associate Nurse Director
Ms F Rooney, Director of Pharmacy
Dr A Russell, Medical Director
Mr D Walker, Director of Public Health
Mr P Williamson, Director of Health & Care Strategy

Attending
Ms L Clarkson, Staff Side (deputising for Mrs McCallum)
Professor John Connell, Chairman.
Mrs J Duncan, Communications Manager
Mrs S Graham, Committee Support Officer
Ms L Hamilton, Mental Health Programme Director
Mrs M Manzie, (deputising for Mrs F Rooney)
Mr M McCabe (deputising for Mrs Macaskill)
Mrs J Mudie, Associate Director of HR
Dr N Prentice, Associate Medical Director (Mental Health)

Ms Lesley McLay in the Chair
1. WELCOME / APOLOGIES

Ms McLay welcomed everyone to the meeting.

Apologies were intimated as above.

2. DECLARATION OF INTEREST

There were no declarations of interest.

3. PRESENTATION

SBH Mental Health Improvement Programme

Dr Prentice gave members a background to the SBH Mental Health Programme Structure, which was split into two phases. He highlighted the priority was to deliver Quality Care.

The Mental Health Clinical Services Strategy, which was approved at NHS Tayside Board in December 2015, proposes to:

- Further shift the balance of care, by strengthening community models of care that support recovery focus, enablement and stepped care.
- Evidence based models of care that support good clinical outcomes
- Continue to deliver good quality, safe, effective person centred care, making best use of resources and infrastructure

Dr Prentice advised a review of all clinical pathways would be undertaken. He highlighted an issue around psychiatric in-patients due to the lack of trained psychiatrists throughout Scotland. Dr Prentice stated that NHS Tayside were not good at retaining medical students or undergraduates. He intimated that last year less than 50% of graduates from the Medical School remained in Tayside. Further work is required around deploying staff.

Dr Prentice reported that a review of accommodation was also being carried out. A few properties are in need of refurbishment, but obviously the financial position was an influencing factor.

Ms Hamilton advised of work undertaken to date in conjunction with Healthcare Planner, Capita.

A series of workshops have taken place to identify key drivers. A piece of work is being carried out by Clinical Leads and Heads of Service to address the criteria for future service model provision to ensure safe and effective care.

Accommodation options will be scored against criteria, to ensure fit for purpose.

Communication events have already been undertaken at Strathmartine, Carseview, Murray Royal and Susan Carnegie Centre. Ms Hamilton reported excellent attendance at these events, so far. A further meeting is to take place on 28 January with users and carers. Presentations will also be given to Joint Clinical Board, IJB’s and GP Sub Group, to get user opinions.
Ms Hamilton advised that further communication and engagement would take place over the forthcoming weeks. A paper is to be prepared for the NHS Tayside Board in March. Once a decision is reached it is likely to take a further 6 months of stakeholder engagement, with another 18 months for building refurbishment.

Ms McIlroy took the opportunity of introducing the Chairman, Professor John Connell to the meeting, and asked that members introduced themselves prior to speaking.

Ms McIlroy asked that all communication is circulated to APF members.

Mrs Costello intimated this was a massive achievement for the Mental Health team. She asked for an indication of conversations that had already taken place around nurse staffing roles and what the future workforce would look like.

Dr Prentice advised this work would be undertaken in a different way from previously. Current skills will be addressed and matched to pathways. Future pathways will also be addressed. He reported that one of the main priorities would be training. This will involve change across all groups in future.

Ms Hamilton advised that through workstreams, some groups will be looking at workforce planning. Mrs Costello asked that this work be linked in with Mrs McKenna, who is the professional workforce lead.

Mrs Golden asked about the risk of transporting seriously ill patients from Angus. She advised of a number of staff employed at the Susan Carnegie Centre. She asked about staff unable to travel to Carseview or Murray Royal.

Dr Prentice indicated that the Directorate already had experience of the risks involved with transporting patients. Since August 2015, between the hours of 5 pm – 9 pm, patients have been transferred routinely to Carseview. This practice has not raised any safety issues.

The new plans are to treat patients in their own locality and deliver effective care within the community. Mrs Golden asked if staffing resources were safe. Angus currently has patients located within Dundee and Perth.

Mrs Golden asked about staff not able to transfer. Mr Doherty advised that a suitable alternative would be sought. The organisation has to ensure we have the right staff in the right place. The Organisational Change policy will be followed and any cases will be dealt with individually.

Ms McIlroy stated that the emphasis was on new models of care. She indicated that no other areas had this level of investment. Mr Prentice emphasised we could compromise with accommodation but the organisation has to be able to deliver the right care in the right environment.

Professor Connell highlighted the importance of effective care and the requirement to recruit and retain nursing, medical and AHP staff.

Dr Prentice intimated the model of care would change over time. He anticipated that numbers of medical staff would decrease before it gets better. The organisation has to be confident with its current model, as in the future a better service will be required.
Mr Manley stated that Carseview was the first privately funded initiative (pfi), and asked if there was any scope to spend money on pfi, in terms of reducing burden and making more cost effective use of staff.

Dr Prentice advised that Mr Bill Troup has asked for a workforce meeting to be set up in March.

Ms Hamilton reported that there is a set annual charge for pfi and we had to ensure that buildings were utilised to their capacity.

Mrs Alexander suggested that communication should be undertaken with the public, as it was only 99 days to the election. If a service is taken away from Angus, how will residents react.

Ms McLay agreed we had to address what we can do differently for people in Dundee, Angus, and Perth & Kinross and how we maximise the service we provide. She acknowledged this was a chance for APF members to be engaged. Ms McLay asked for a further update to the next meeting.

4. MINUTE OF MEETING HELD ON 25 NOVEMBER 2015

The minute of the meeting held on 25 November 2015 was accepted as a correct record.

5. MATTERS ARISING AND ACTION POINTS

3. Finance Report – Delivering Care

Ms McLay reported there were some challenges around Psychiatry with close to £1m in resources required.

7. Nurse Rostering Policy

Mr Doherty reported that a small scale pilot will be reported to the Audit Committee. It has been confirmed that an audit tool will be used around policies. Report to next meeting.

It was agreed that Item 9 ii be moved up the agenda to accommodate speaker’s other commitments.

Item 9 ii – Property Update

Mrs Bodie advised that the Project Board membership had been extended to include members of the Partnership Group. The group is due to meet next week.

Plans have been drawn up for the next 5 years, which will allow NHS Tayside to pay back brokerage.

Mrs Bodie advised of the three streams as follows:

- Existing buildings declared surplus, which will be moved forward for selling. Most of the staff in these buildings are administrative and clerical.
- Buildings no longer fit for purpose. Work will be taken forward to get them on the market.
- New models of care, which will allow other buildings declared surplus or not fit for purpose to be vacated.
Each property will be scrutinised for current status, along with any political/historical issues.

Dates for vacating premises will not be set without consulting staff regarding alternative accommodation. This may not always be on a like for like basis. Needs will be identified, rather than wants.

Mrs Bodie advised that representation from staffside, HR, IT and Communications was on the group and a 5 Year Property Strategy was to be produced. Reporting will take place on a regular basis to the Transformational Board, F & R, and NHS Tayside Board.

Mrs Bodie advised that this strategy was separate from the Operational Property Strategy.

Work is also being carried out collectively with Councils, looking for capacity within other buildings. Relevant IT systems are in place.

Mrs Golden intimated that Mr Marshall and Miss McDermott had contacted staff organisations asking for members of staff that wished to attend the Property Strategy meetings. She advised they would be attending on behalf of the APF.

Mr Nicoll joined the meeting.

Ms McLay advised that work would be carried out with Local Partnership Fora.

Mr Marshall highlighted that in some cases it was not just a building, but a service, and that staffside had concerns.

Mr Drummond asked for assurance that information is shared with staff side. Ms McLay confirmed that this would happen. Mrs Bodie highlighted the sensitivities around this information.

6. STAFF GOVERNANCE

i. Transforming NHS Tayside

Ms McLay updated Forum members on work currently being undertaken with regard to the right clinical models, right staff and the right skills. The organisation has to deliver on the requirements of the population.

The Board is moving into a 5 year planning horizon to upgrade and improve clinical models of care. How care is delivered will be addressed, with new interventions closer to home. There is a requirement to provide new models of care and enhanced community support for older people.

Ms McLay reported that the 5 year Change Programme will be underpinned by:

- 5 year workforce plan
- 5 year financial plan

This will be clinically led in partnership with other public sector organisations.

It was agreed that this will be discussed further at the next meeting.
Ms McLay reported that the Transformation Board had its second meeting last week, chaired by Professor John Connell, and attended by Non-Executives, Mrs Golden, Mr Bedford, Mrs Costello and Dr Russell.

The main focus will be on the first 2 years of the plan, and a draft document has been produced. This is similar to the work being carried out by other Boards.

Mr Bedford then updated Forum members on the financial position for the 9 months to December 2015.

The organisation is showing an overspend of £10.2m, which is an increase on the figure of £6.8m shown in November. This is partly due to £2.2m being paid out for EDL. Risk assessed efficiency savings have been identified as £23.4m, although £19m has been devolved to individual budget lines.

Workstream programmes will be used to continue the drive for efficiency savings.

A non recurring resource is being made available by Scottish Government, providing a benefit of £7m.

Work is being carried out on the demolition of Little Cairnie and Liff sites to allow a clear site, which will hopefully provide a better return when going for sale.

Mr Bedford highlighted there was nothing left from Board resources. The present forecast return is supported by £15m of non recurring resources. With regard to the position of recurring savings, the target was 60% but the Board has only managed to deliver 30%.

Over the last 4 years the Board has received £15m of brokerage from Scottish Government to close accounts. Recently, 2 assets have been sold, namely, Ashludie and 8 West Avenue, Perth, enabling us to repay £5.5m by the year end. This leaves £9.5m brokerage still to be repaid.

Mr Bedford advised that bank and agency costs had decreased at the end of December. The Audit Scotland report highlights that agencies cost three times the cost of a NHS Tayside member of staff, and this figure has to be driven down.

He highlighted that the whole organisation had to delay, defer and stop spending. There is an expectation that the Scottish Government will not support our position.

Mr Marshall asked about emerging risks. Mr Bedford advised this was the banding for Laundry staff. Mr Doherty advised that the settlement position was not costed in the original plan.

Mrs Golden asked about the recruitment freeze for non patient facing positions.

Mr Doherty highlighted there was not a recruitment freeze, but a Vacancy Prioritisation. Managers are being asked to see if anyone else can provide the service.

Mrs Alexander suggested the Vital Signs after the APF meeting included a paragraph regarding the embargo on all vacancies so that staff have clarity.
Mr Doherty advised we have to be informed by workstreams and workforce plans as to the next steps for supporting services. Mrs Golden asked if the workstreams could include staff side representation from the start. She indicated the difficulties some colleagues face trying to get away from the workplace.

Mr Doherty advised that Mr Pattinson had emailed all workforce leads asking them to ensure partnership representation. It was agreed an update would be provided for the March meeting.

Mrs Golden highlighted that agency costs in Angus sit at £0. She suggested that Managers be asked how they manage.

Mrs Costello highlighted that the organisation can only stop using agency staff if it is safe to do so. Where possible, the cheaper agencies are used. Work is currently being carried out recruiting staff onto the Nurse Bank. A lot of applications have been received.

Work is to be carried out to inform areas that have a greater need using a traffic lights system. Work will also be carried out identifying experience staff to manage patients. Professional judgement is required to determine how many staff are required, i.e., newly qualified nurse, with an experienced Nurse and one Healthcare Assistant. Further help will also be given to support Senior Nurses with eRostering to ensure that rosters are more effective.

Ms Wiggin advised that 15 new Registered Nurses had recently been recruited. Another 50 candidates to be interviewed for the bank, so we can use our own staff instead of agencies.

Mrs Alexander advised that a lot of staff joined agencies because of flexibility and this should be addressed. Ms Wiggin stated the organisation was willing to look at this, thus ensuring we have our own sustainable workforce.

Mr McCabe stated that over the last 4 years NHS Tayside has required brokerage and he asked what happened 5 years ago and what was done differently.

Mr Bedford advised that non recurring savings had gone down and this has had an impact on delivery.

Ms McLay explained that, basically, the organisation had been living beyond its means over the last 5 years. She indicated there were 3 mains areas of overspending, namely; Prescribing, Workforce and Maintenance. Ms McLay explained that Tayside had more sq. ft. than any other area.

An independent person had been asked to carry out a piece of work benchmarking NHS Grampian and NHS Lothian using ISD data from October/November 2015.

Both Lothian and Grampian have managed to break even over the last few years. They spend 7.9% on workforce in their areas. Tayside spends far beyond this figure. NHS Tayside are the worst performing Board with regard to the Acute Services treatment times guarantee. NHS Tayside are also spending over 10% more than the Scotland figure for Psychiatrists as 11 out of 15 are Locum posts, while Lothian are underspending.
Support Services spend over 10% more than in other areas on portering and maintenance and management and administration costs are overspent nearly £12m above funded level.

Decisions will have to be taken to reduce the workforce and work to make resources more effective. This will be done through natural wastage, retirement etc.

Ms McLay reported that NHS Tayside were the highest spending Board on Prescribing, although managing people with medicine is helping keep people out of hospital.

Ms McLay advised that NHS Tayside workforce numbers were a lot higher than compared with other Boards.

Mr Bedford advised that the Board did not know if the Scottish Government would provide brokerage, and if not NHS Tayside would report a deficit position.

He emphasised that NHS Tayside had to start on a downward trend of spending, particularly in relation to energy, procurement and prescribing.

Mrs Golden asked if the presentation could be shared with APF members. Ms McLay advised this was highly sensitive and confidential information and would prefer not to at this stage.

Professor Connell intimated this was an organisational problem and that some of the data was difficult to interpret and suggested that some of the relevant information could be contained in a Vital Signs.

He stated he did not know what the Scottish Government would do regarding NHS Tayside’s situation and expressed one of his concerns was that an external team would be put in. Professor Connell highlighted that the organisation had now to demonstrate that we understand there is a problem and that collectively we have a 5 year plan to take this forward.

Mr Riley commented that a few members of staff had commented that this same situation happens every year towards the end of the financial year. He intimated that he did not think that staff appreciated how serious the situation was and there was an urgent need to let staff know that it is not the same as every year.

Ms McLay agreed this was a useful suggestion.

Mr Doherty reported that most of the work with workstreams will be at local level and we had to help promote engagement and necessary discussions. Mrs McLay suggested further conversation around workstreams take place at the March meeting.

Mr McCafferty suggested that it would be useful for a copy of the bar chart to be put up in every Senior Charge Nurse’s office to highlight the differences to staff.

Mrs Alexander asked about the administration review and who was leading this piece of work. Ms Dunning advised she was leading this piece of work although it was in its early stages. She advised that she would ensure partnership engagement.

Mr Doherty asked Mr Marshall to provide staff side names for workstreams to Mr Pattinson.
Mr Drummond advised that a review was carried out within Perth & Kinross by Alison Wood, and it may be useful to share this information. Mr Nicoll advised that he had already asked Ms Dunning to liaise with Miss Wood.

Mr Bedford advised that any allocation from the Scottish Government would have a financial deficiency on it.

ii. Staff Survey

Mrs Golden referred to the NHS Tayside report results and suggested results are passed down to local Partnership Fora for discussion and results fed back to APF. Mr Doherty agreed that common themes could then be identified. Mrs Alexander suggested that a return date is set.

Ms Wiggin advised that all co-chairs have a development session for Local Partnership Fora in relation to iMatter. This could be extended to include Staff Survey and other operational matters.

It was agreed that it would be useful for Secretariat to have a discussion with Mrs Jenni Jones and Ms Diane McLeish. Mrs Golden and Mr Doherty to take forward.

7. CLINICAL GOVERNANCE

i. Clinical Governance Framework

Mrs Anderson advised that APF members were asked to:

- Endorse the ongoing development of the Draft Joint Framework for Clinical Care and Professional governance across the four partner organisations
- Note the ongoing development of the Integrated Joint Board Local Professional Forums (R2)
- Support the development of key performance indicators for clinical, professional care governance.

This framework is to ensure quality of service across the 3 Local Authority areas.

Mrs Anderson reported there are nine national Health and Well-being outcomes, which provide a strategic framework for the planning and delivery of health and social care services.

Accountability will be shared by the Nurse Director, Medical Director, Pharmacy Director and AHP Director, delegated by the Chief Executive. Each area will develop what is right for them. Engagement will be undertaken with Area Clinical Forum.

Mrs Golden asked about timeframes and what changes would affect staff. Mrs Anderson advised that guidance would be provided.

Mr Packham advised of a significant change with regards to Social Justice and Equal Dimension and Human Rights legislation which was brought to our attention by Social Work colleagues. This will have an impact on staff as it is difficult for NHS Tayside staff to understand the different language.

Mrs McLay advised that integration within the three H&SC Partnerships had received an excellent rating from Internal Audit.
ii. **NMC**

Mrs Costello reported that staff due to go forward for revalidation for the first time, require to have applications submitted by 1 April 2016.

Support has been offered to colleagues over a range of events as well as working in partnership with the pilot in Tayside.

Different levels of practice have been involved and Senior Nurses throughout the organisation are gaining confidence in the practice.

A piece of work had been undertaken to support people within the Nurse Bank and staff due to re-register in April, May and June have been identified.

Information has been secured from the NMC to identify all members of staff due to register.

Mrs Costello advised of fortnightly national Webex meetings which have been attended by Mrs D Weir.

Mrs Costello highlighted that there had been no lapsed registration in December for the first time. She advised that all events, staff were emphasising the option to ask for help.

Ms McLay applauded the support mechanisms that had been put in place.

iii. **HSE Updates**

Ms Wiggin reported that a HSE visit took place on 25 November 2015, around the Management of Sharps at both Ninewells Hospital and Dundee Dental Hospital. Six improvement notices were served, 3 for Ninewells and 3 for Dundee Dental Hospital, two of which were to be carried out by 21 January 2016.

COSH Assessments around standard operating procedures have been remedied.

A huge piece of work re Local Exhaust Ventilation in Dental Laboratories was undertaken by Tayside Contractors and completed by 21 January 2016.

In Ninewells, an improvement notice was served within Surgery and Intensive Care as staff were unable to evidence training on Sharp’s management. Further investment in training and education is under way.

A system has been put in place so sharps incidents are investigated. This is now compulsory with the Datix system.

Ms Wiggin advised of a group that has been set up to address risk assessment for Nursing and Medical students, chaired by Mrs Warden. Staff side representation is sought.

She reported that further work was to be undertaken on skin surveillance as this is an issue within both Ninewells and Dundee Dental Hospital.
8. **FINANCIAL GOVERNANCE**
   
i. **Finance Update**
   
   Discussed earlier in the meeting.

9. **OPERATIONAL STRATEGY**
   
i. **Health and Social Care Integration**
   
   Mr Nicoll advised of the key date, 1 April 2016, for the transfer of all remaining partnerships to IJB’s. He advised the organisation was well placed to deliver.

   He referred to the Audit Scotland report and advised that a lot of hard work had already been carried out around due process. This remains a challenge for Local Authorities and NHS Tayside with the current financial position.

   Terms and conditions for staffing are unaffected. Management structures are being put in place and seven key roles have been populated.

   Mr Nicoll advised that communication will be circulated through the Communications Department.

   Mrs Mudie advised that the first Transition Team meeting would take place on Monday 1 April 2016. She indicated that Chief Officers and IJB’s were having discussions with appropriate colleagues from Councils. Already there are indications that Councils will explore partnership working.

10. **POLICIES/PROTOCOLS**

   i. There were no policies for approval.

11. **FOR INFORMATION ONLY**

   i. Record of Attendance
   
   ii. iMatter Update
   
   iii. Attraction & Recruitment Strategy
   
   iv. Annual Review Feedback
   
   v. STAC Band 1 Review

   **Minutes of Meetings**

   vi. Minute of Staff Governance Committee held on 20 October 2015
   
   
   viii. Minute of Communities Partnership Forum held on 11 November 2015
   
   ix. Minute of Mental Health Partnership Forum held on 15 August 2015
   
   x. Minute of Dundee CHP Partnership Forum held on 12 August 2015
   
   xi. Minute of HSCI Partnership Board held on 24 November 2015
   
   xii. Minute of Operational Risk/Health & Safety Management Group held on 28 Aug 15
   
   xiii. Minute of Pharmacy Partnership Forum held on 22 July 2015
12. **ANY OTHER COMPETENT BUSINESS**

   **Item 11 v – STAC: Band 1 Review**

   Mr Marshall suggested this item is referred to the Agenda for Change Steering Group. Mr Doherty agreed with this suggestion.

13. **DATES AND TIMES OF FUTURE MEETINGS**

   **APF Agenda Planning**  Wednesday 24 February at 1330 hours in Boardroom, Ninewells.

   **APF**  Wednesday 23 March 2016 at 1330 hours in the Boardroom, Kings Cross.