

<b>Meeting:</b>	<b>Grampian NHS Board</b>
<b>Meeting date:</b>	<b>6 October 2022</b>
<b>Item Number:</b>	<b>5</b>
<b>Title:</b>	<b>System Pressure Performance Report</b>
<b>Responsible Executive/Non-Executive:</b>	<b>Caroline Hiscox, Chief Executive</b>
<b>Report Author:</b>	<b>Kate Danskin, Chief of Staff</b>

## 1 Purpose

**This is presented to the Board for:**

- Review and scrutiny

**This report relates to a:**

- Progress against key organisational objectives

**This aligns to the following:**

- Previously agreed Operation Iris key objectives A – C (see below at 2.1)

## 2 Report summary

### 2.1 Situation

The Board agreed a remobilisation plan (v4) covering how health and social care services would be delivered during the period September to March 2022. Following the impact of the new COVID variants, the Board moved into a new phase, Operation Iris, which focused delivery of services based on the following three objectives:

- A. Keep staff safe & help them to maximise wellbeing*
- B. Responding to demand on the health & care system*
- C. Protecting critical services & reducing harm*

Operation Iris concluded in June 2022, however, the organisational objectives set out in Operation Iris remained in place for an interim period until the annual delivery plan, 2022-2023 was endorsed by both the Board and Scottish Government. As agreed at the Board seminar on 7 July 2022 and at Board meeting on 4 August 2022, a new Board performance report – a How Are We Doing? Report (HWD Report) - is to be developed with the aim of shifting performance reporting for the Board from a retrospective position in time to a strategic report setting out overall progress against the strategy.

To ensure the transition to the new Board performance report as it develops in an iterative and co-created manner to meet the needs of the Board, the System Pressure

Performance report will continue to be presented to the Board. This will be stepped down as soon as the HWD report is meeting the needs of the Board.

## **2.2 Background**

The work to develop a refreshed performance assurance framework (PAF) is underway. This will focus on measuring performance against NHS Grampian annual delivery plan and NHS Grampian's strategy- the Plan for the Future. The annual delivery plan 2022-2023 is a later item on this Board meeting.

This is a significant piece of redesign work and the refreshed PAF will be completed for endorsement by the Performance Assurance, Finance and Infrastructure Committee by the end of March 2023. Testing and refining of new approaches to inform the framework has begun, with focused aim of ensuring an effective tiered approach to performance reporting, management and assurance.

This was discussed at the Board Seminar on 7 July 2022. Due to Scottish Government reporting timelines it has not been possible to present in full the data required to provide assurance in the new reporting format for this meeting. An example of the new reporting format is on the agenda for the Closed Board Meeting on 6 October 2022 to allow Board members the opportunity to comment on the format. To ensure that there are no gaps in performance assurance as the new format develops, the system pressure report will continue to be presented to the Board. This is at appendix 1 and the rest of this report relates to this data set.

## **2.3 Assessment**

The data and brief narrative included in the attached data pack sets out an overall summary of the Board's key performance metrics at 15 September 2022.

The Summary on page 3 draws focus to key factors for the Board's attention.

As with previous reports to the Board, the data pack demonstrates the continued capacity pressure across the whole system. Significant programmes of whole system work to advance improvement in both emergency department performance and waiting times performance are underway. These are overseen by Unscheduled Care Programme Board and Integrated Specialist Care Programme Board, in collaboration with Scottish Government colleagues. This is reviewed and considered regularly at Chief Executive Team business meeting. The detail of both programmes will be discussed for assurance at Performance Assurance, Finance and Infrastructure Committee meeting on 19 October 2022.

### **2.3.1 Quality/ Patient Care**

There is weekly oversight of quality in relation to safe, effective, person centred care through a weekly Clinical Risk Meeting (CRM). This is chaired by Medical Director/Executive Nurse Director and considers data collated over the previous

seven days with a view to identifying new clinical risks from across the whole system. This includes risks identified from new major or extreme adverse events, new adverse events in relation to Covid-19 and staffing issues, complaints and feedback/care opinion, Infection Prevention & Control, derogation report, Director of Public Health Care Home report, new or escalated risks, violence and aggression events, RIDDOR events, falls, tissue viability reports and hospital clinical emergency calls. The weekly system pressure report, accompanying this paper, is also considered.

CRM raises any immediate escalations required to Chief Executive Team (CET). Reporting from CRM is to the Quality and Safety Group, which in turn reports quarterly to CET Business Meeting and into Clinical Governance Committee.

It is acknowledged that reporting specifically on the effectiveness or impact on care of the sustained system pressures is extremely challenging to monitor.

National auditing reports on key services' performance against speciality standards. This also allows benchmarking across other Board's performance for these specific areas.

The new PAF development work will include consideration of reporting on quality of care.

### **2.3.2 Workforce**

The sustained capacity pressure across the whole system undoubtedly continues to impact on colleagues' well-being and this remains a critical priority for NHS Grampian. The staff health & well-being programme continues to progress, in tandem with responding to the culture survey results and next phases. CRM considers impact of colleague well-being in relation to incidents and considers Values Based Reflective Practice report at its weekly meeting.

### **2.3.3 Financial**

The Board's financial performance is reported in detail to each meeting of the Performance Assurance, Finance & Infrastructure Committee. An update on that position is set out at appendix 2.

### **2.3.4 Risk Assessment/Management**

Risk assessment and subsequent management of these risks relating to key performance metrics, including Emergency Department four hour standard performance and waiting lists for planned care are recorded on NHS Grampian risk management system.

As described at 2.3.1, new risks or escalating risks are considered weekly at Clinical Risk Management (CRM) meeting.

There is a continued risk of reputational damage and loss of confidence by the population NHS Grampian serves. There is a requirement to continue to review proactive communication. Consideration of public facing performance reporting is being included in review of our performance assurance framework.

The risk escalation system was reviewed by the audit & risk committee at their meeting on August 2 2022. Further development of risk process continue.

### **2.3.5 Equality and Diversity, including health inequalities**

Equality and diversity factors will be considered as part of development of PAF and as part of the project plan, in cognisance of NHS Grampian's strategic intent.

### **2.3.6 Other impacts**

All are outlined above and in attached report.

### **2.3.7 Communication, involvement, engagement and consultation**

The enclosed System Pressure performance report is widely shared in NHS Grampian.

Processes in relation to involvement, engagement and consultation are included in the project planning for the development of the renewed PAF.

### **2.3.8 Route to the Meeting**

The attached system pressure data pack (Appendix 1) was considered at the following meetings:

- Whole System Decision Making Group Meeting, 15 September 2022
- Chief Executive Team Business Meeting, 20 September 2022

## **2.4 Recommendation**

- The Board is asked to review and scrutinise the report and note that the demand across the system continues to challenge the ability to consistently meet the three previously set Operation Iris objectives (described at 2.1 above) and to seek assurance all is being done that can be to meet these objectives.

## **3 List of Appendices**

The following appendices are included with this report:

- Appendix 1 – System Pressures Report as at 12 September 2022
- Appendix 2 – Financial Performance