

FORTH VALLEY NHS BOARD

TUESDAY 26 JULY 2022

9.1 Annual Review 2021 Letter For Assurance

Executive Sponsor: Mrs Cathie Cowan, Chief Executive

Author: Ms Kerry Mackenzie, Head of Policy & Performance

Executive Summary

The Annual Review 2020/2021 was held via video conference on Wednesday 27 April 2022 chaired by Maree Todd, Minister for Public Health, Women's Health and Sport and was attended by Janie McCusker, Chair, NHS Forth Valley and Cathie Cowan, Chief Executive, NHS Forth Valley. The Minister was supported by Caroline Lamb, Director General, Health & Social Care and Chief Executive of NHS Scotland.

Recommendation

The Forth Valley NHS Board is asked to:

- **note** the key points contained in the Annual Review 2020/21 letter

Key Issues to be Considered

The Annual Review agenda was split into two sections, 'look back': 2020/21, including the initial response to the pandemic, and 'forward look'.

Following the Annual Review 2020/2021, Maree Todd, Minister for Public Health, Women's Health and Sport wrote to Janie McCusker, Chair, NHS Forth Valley summarising the main points discussed and highlighting any specific actions required moving forward. The letter, at appendix 1, details the following key points:

Look back focussed on:

- The rapid reconfiguration of local health and care services across acute, primary and community settings, including the significant increase in the use of technology to deliver care outside hospitals or clinic settings.
- The performance and contribution of staff in adapting, supporting, and developing local services including, the delivery of the Covid-19 vaccination programme, and Test and Protect.
- Delivery of the elective care programme including cancer services and a wide range of planned surgery, day cases and outpatient appointments, along with mutual aid for neighbouring NHS Boards.
- Pressure within unscheduled care services as a result of frequent high occupancy, limited bed capacity, delayed discharges and staffing gaps including reasons relating to Covid-19.
- Performance in relation to financial management, the 62-day and 31-day cancer targets, Child & Adolescent Mental Health Services and Psychological Therapies.
- Learning from the pandemic experience and the positive engagement with the Area Partnership Forum and Area Clinical Forum.

Forward Look focussed on:

- Support for winter planning.
- The A&E performance and sustained pressures in Forth Valley Royal hospital as a result of consistently high occupancy, limited bed capacity, increasing staffing pressures and high patient acuity, and the work underway to support improvement.
- The ongoing pandemic and the need to maintain a balance between ongoing operational resilience and the effective recovery of services.
- The pressures on the health and social care workforce and the range of support measures for staff in order to promote personal resilience, help prevent mental health issues developing, and to promote overall wellbeing in the workplace.
- Elective care backlog and local plans for recovery.
- The data quality issues affecting mental health services in NHS Forth Valley that need to be resolved and the support from the Scottish Government's Mental Health team.
- The implementation of the Choice and Partnership Approach CAMHS model.
- Financial position for 2022/2023.
- The Health Care Improvement Scotland's (HIS) visit to Forth Valley Royal Hospital and NHS Forth Valley's action plan to address requirements.
- The Emergency Department Improvement Action Plan and the work which the Board is undertaking with support from OD consultants.

The Minister formally recorded her sincere thanks to the NHS Forth Valley Board and staff for the sustained professionalism and commitment displayed, in the face of unprecedented and unremitting pressures during both 2020/21 and 2021/22.

Financial Implications

There are no financial implications in respect of this paper.

Workforce Implications

There are no workforce implications in respect of this paper.

Risk Assessment

Any relevant Strategic Risks are highlighted with the Strategic Risk Register reviewed and updated on a quarterly basis.

Relevance to Strategic Priorities

As one of 14 territorial NHS Boards, NHS Forth Valley is accountable to Scottish Ministers supported by the Scottish Government Health and Social Care Directorates. NHS Forth Valley is responsible for the protection and the improvement of the population's health and for the delivery of frontline healthcare services.

Equality Declaration

The author can confirm that due regard has been given to the Equality Act 2010 and compliance with the three aims of the Equality Duty as part of the decision making process.

Further to an evaluation it is noted that:

- Paper is not relevant to Equality and Diversity

Consultation Process

For wider circulation and for publication on the NHS Forth Valley website.

Appendices:

Appendix 1 - NHS Forth Valley Annual Review letter

Minister for Public Health, Women's Health and Sport
Maree Todd MSP

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Janie McCusker
Chair
NHS Forth Valley

Via email: janie.mccusker@nhs.scot

23 June 2022

Dear Janie,

NHS FORTH VALLEY ANNUAL REVIEW: 27 APRIL 2022

1. Thank you for attending NHS Forth Valley's Annual Review with your Chief Executive Cathie Cowan on 27 April via video conference. I am writing to summarise the key discussion points.
2. As with last year's round of Annual Reviews, in-person Reviews have not proved possible given the ongoing state of emergency as a result of the Covid-19 pandemic and associated pressures. Nonetheless, Annual Reviews remain an important part of the accountability process for the NHS and, as such, we have arranged for Ministers to hold appropriate sessions with the Chair and Chief Executive of each Board via video conference. I was supported in the meeting by: Caroline Lamb, Director General, Health & Social Care and Chief Executive of NHS Scotland.
3. The agenda for this year's round of Reviews has been split into two sections to cover: a look back over 2020/21, including the initial response to the pandemic; and a look forward, in line with the current Board resilience and mobilisation plans.

Look back: 2020/21, including the initial response to the pandemic

4. You provided a helpful overview of the Board's initial response to the pandemic from late February 2020. This required an unparalleled, immediate and radical restructure of both services and ways of working across the NHS in Scotland, including in NH Forth Valley. The Board's response and recovery planning process involved the rapid reconfiguration of local

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health and care services across acute, primary and community settings, including a significant increase in the use of technology, such as *Near Me*, to deliver care outside hospitals or clinic settings, alongside effective, whole system working.

5. Staff at every level have consistently performed above and beyond the call of duty to support both local services and the national effort: for instance, with the unprecedented *Test & Protect* and vaccination programmes, as well as the crucial support and clinical oversight provided to local care homes. An example of this had been the medical physics staff who had worked innovatively and tirelessly in the initial stages of the pandemic to bolster vital critical care capacity by converting anaesthetic machines to ventilators; alongside other largely unsung heroes, such as those who had been instrumental in establishing the new community pathways; and ensuring that key services, such as district nursing and health visiting, had been maintained throughout. Indeed, it is through the consistent dedication and commitment of local health and social care staff, under largely unrelenting pressures, that we have ensured that the NHS has not been overwhelmed at any point during the pandemic, to date. As such, I would want to formally record our deep appreciation to all local health and social care staff for their outstanding work, and give them an assurance that we will continue to do all we can to support them.

6. In terms of the impact of Covid-19 and associated activity, during the financial year 2020/21, NHS Forth Valley had: delivered over 700,000 Covid-19 vaccinations; carried out 9,000 *Near Me* consultations; 193,236 outpatient attendances; 39,125 hospital admissions; 62,950 attendances at the Emergency Department and Minor Injuries Unit; 215,442 district nurse contacts; 2 million contacts with GP practice staff. You confirmed that this activity, and the remarkable service adaptations undertaken at pace, such as the increased use of technological innovations, had been delivered via a highly effective local, whole system command structure: ensuring appropriate oversight and governance alongside delivery.

7. The need to establish capacity to meet the Covid-19 demands placed on health and social care required significant changes in the level of planned care available during 2020/21. During the first Covid-19 wave all planned surgery, with the exception of cancer, was paused. Subsequent surgical capacity was restricted by capacity constraints necessary to follow national Infection Prevention and Control guidelines to protect patients and staff; and the need to continue to adapt to meet the numbers of Covid-19 admissions. Private sector capacity had supported some urgent and cancer activity and, as noted above, access to care was maintained using a combination of face to face consultations and by making use of digital technology. The Board has maintained an elective care programme and continued to provide a wide range of planned surgery, day cases and outpatient appointments. I also recognise NHS Forth Valley's significant mutual aid role played in support of neighbouring Boards for the delivery of breast, plastics and orthopaedics services; with over 3,000 patients treated. The Board continues to offer mutual aid for surgical and outpatient assessment for neighbouring Boards.

8. All Health Boards had seen unscheduled care pressures fall in the first phase of the pandemic, with the restrictions having a significant impact on attendances. As restrictions were eased following the initial lockdown, attendances had risen; and Boards faced new

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pressures in A&E Departments and receiving wards due to the higher acuity of some presentations, alongside the maintenance of appropriate infection control measures and streaming of patients. NHS Forth Valley has experienced challenges in delivery against the 4-hour standard with the Board recording the lowest weekly 4-hour performance of all Boards in the week ending 10 April at 54.7% (against national average of 66.2%). There were also 35 over 12 hour patient stays in the week ending 17 April; compared to none from the equivalent pre-pandemic week in 2019. Frequent high occupancy, limited bed capacity and continuing staffing gaps for a number of reasons, including Covid, have been contributing to lengthy delays. Performance has also been impacted by delayed discharge.

9. With cancer service delivery remaining a priority, the Board's performance against the 31-Day standard continues to be met; however, performance against the 62-Day standard continues to be challenging for the Board. You confirmed that improvement work has been undertaken and assured us that actions taken will improve performance.

10. NHS Forth Valley was one of seven Boards escalated for enhanced improvement support for Child and Adolescent Mental Health Services (CAMHS) and Psychological Therapies performance. The Board submitted an improvement plan to the Scottish Government in September 2021 detailing improvement actions and anticipated trajectories to meet the referral to treatment standard and eliminate long waits by March 2023. CAMHS performance was 57.7% at the end of December 2021 with 616 children and young people waiting to start treatment at the end of December; of those 509 have waited over 18 weeks. For Psychological Therapies, performance was 64.1% at the end of December.

11. In terms of financial management, NHS Forth Valley delivered a balanced outturn in 2020/21, following the receipt of additional funding provided by the Government to support financial impact of Covid-19. For 2021/22 the Board is forecasting a full year breakeven position, in line with your financial plans. The position includes the receipt of additional funding from the Scottish Government to meet Covid-19 pressures.

12. All Boards will need to learn from the pandemic experience and adapt; ensuring that the remarkable innovation and new ways of working demonstrated underpin the local strategy for a sustainable future. We also asked the local Area Clinical Forum and Area Partnership Forum to provide brief updates ahead of the Review and were pleased to note the ongoing positive engagement and contribution of both; the Board will need to harness this and ensure full staff support and engagement for the longer term recovery and renewal phase.

13. To summarise, we are most grateful for the outstanding efforts of local staff to adapt and maintain key services during 2020/21 for the benefit of local people, in the face of unrelenting pressures. We must also recognise that the initial pandemic response, which necessitated the prioritisation of Covid, emergency and urgent care, meant that there has inevitably been a regrettable increase in non-COVID health and wellbeing harms, alongside a significant and growing backlog of non-urgent planned care; and that, despite the success of the vaccination programme, we face ongoing risks around the disease, alongside a range of other pressures that are likely to have a significant impact this winter and beyond.

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Forward look

14. Ensuring that the NHS is not overwhelmed remains of paramount importance and, given the myriad of pressures facing us, Boards remained on an emergency footing until the end of April 2022.

The Government had supported NHS Board planning for the most recent winter via the [Health and Social Care Winter Overview](#), published on 22 October. The approach was based on four principles: maximising capacity; supporting staff wellbeing; supporting effective system flow; and improving outcomes. It outlined how we would: protect the public from the direct impact of Covid-19 and other winter viruses; support our staff to deliver high quality care; increase capacity and maintain high quality integrated health and social care; support the public through clear and consistent messaging to make sure they access the right care, in the right place, at the right time; and use digital and financial enablers to achieve these objectives.

15. This approach, supported by the [Adult Social Care Winter Plan](#), is backed by £300 million of recurring funding, aimed at ensuring we have a well-staffed, well-supported and resilient health and social care system. The new multi-year funding will support a range of measures to maximise capacity in our hospitals and primary care, reduce delayed discharges, improve pay for social care staff, and ensure those in the community who need support receive effective and responsive care.

16. Nonetheless, we fully recognise that NH Forth Valley, amongst a number of Health Boards, has been experiencing some of the most extreme pressures of the pandemic so far in the last few months. Forth Valley Royal Hospital experienced consistently high occupancy and limited bed capacity, increasing staffing pressures alongside high patient acuity; with A&E performance remaining very challenged, all of which has resulted in sustained pressures in the hospital.

17. We also recognise that these pressures are being felt right across the system: in acute hospitals, in primary and community care and in social care. Clearly, the pandemic is not over. Covid-19, alongside other pressures, will continue to have an impact on the NHS for some time. Looking forward, we will need to maintain the right balance between ongoing operational resilience and the effective recovery of services that had to be paused. Our NHS must remain adaptive and responsive through this uncertain, transitional phase.

18. We also remain very conscious on the cumulative pressures on the health and social care workforce and were pleased to note the steps NHS Forth Valley is taking in terms of the wellbeing and resilience of local staff. You confirmed that the Board has established a range of support measures for staff in order to promote personal resilience, help prevent mental health issues developing, and to promote overall wellbeing in the workplace. These measures will also play a pivotal role during the essential recovery period, following on from the height of the pandemic, and in rebuilding staff resilience.

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19. Whilst our recent focus has necessarily been on resilience, we remain ever conscious of the backlog of elective care and associated harms. We continue to assist NHS Boards, including NHS Forth Valley, with local plans for recovery, in light of the more than £1 billion of targeted investment driving the remobilisation of our NHS as part of our Recovery Plan, announced in August 2021.

20. On elective surgery, the Board has expanded day surgery beds, going from 14 beds to 24, to protect elective care and, as a result, has at times increased activity to over 100% of pre-Covid levels. The Board is also continuing a pilot to utilise procedure rooms for minor surgery and as a result has freed up space in main theatres for major surgery. The Board continues to support the National Treatment Centre Programme at Forth Valley Royal Hospital through the expansion of MRI imaging, the opening of two new operating theatres and the creation of an additional 30-bed in patient ward for patients undergoing hip and knee surgery; which will provide an additional 1,500 orthopaedic joint replacements per year. The centre is expected to be fully operational by December 2022. There has also been a positive approach to reducing the outpatient waiting list; recently reducing this by around 1,000 patients per month. In terms of cancer, the Board are developing an action plan to fully implement the framework for effective cancer management, including the investment of the £547,336 from Cancer Waiting Times funding that has been allocated to NHS Forth Valley.

21. As referenced above, NHS Forth Valley's A&E performance remains very challenging and we note the work underway locally as part of a range of improvement programmes, including continuing to develop your Redesign of Urgent Care programme, Discharge without Delay, and Interface Care; and will keep progress under close review.

22. There are significant data quality issues affecting mental health services in NHS Forth Valley that need to be resolved. You stated that support is being received from Scottish Government's Mental Health team to help improve and we welcomed your assurance that the Board is addressing this and that the situation is improving. We welcome the adoption of the CAPA CAMHS model and look forward to full implementation, which you expect to be by December 2022. Scottish Government Mental Health officials will continue to work closely with the Board to support development and implementation of plans to strengthen and stabilise local services.

23. For 2022-23, NHS Forth Valley are forecasting a year-end breakeven position. This is dependent on delivery of your target of £29.3 million savings. The key financial risks for the Board include staffing costs, prescribing costs and energy prices. The Scottish Government will continue to regularly engage with the Board to monitor your position and to assist with longer term financial planning.

24. We took the opportunity to raise Health Care Improvement Scotland's (HIS) recent return visit to Forth Valley Royal Hospital on 19 April. You assured me that you take the concerns raised seriously and that you will put in place an action plan to address any requirements and recommendations as a matter of priority. Patient safety is paramount and I expect NHS Forth Valley to fully implement any improvement action plan that Healthcare Improvement Scotland produce and publish and Scottish Government officials will keep in touch with the Board on this matter. We also touched on the Emergency Department

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Improvement Plan and the work which the Board are undertaking with OD consultants, the focus of which is to encourage and facilitate stronger team working, coherence and co-operation across the system as a whole. Scottish Government officials will also keep in touch with the Board in relation to this work and anticipated impacts.

Conclusion

25. I hope that by the time of the next Review we will be free of some of the more extreme recent pressures and able to focus fully on local service recovery and renewal. I am, nonetheless, under no illusion that the NHS continues to face one of the most challenging periods in its history and remain grateful for your ongoing efforts to ensure resilience. We will continue to keep both local activity under close review and to provide as much support as possible.

26. I want to conclude by reiterating my sincere thanks to the NHS Forth Valley Board and staff for your sustained professionalism and commitment, in the face of unprecedented and unremitting pressures during both 2020/21 and 2021/22, for the benefit of local people.

Yours sincerely

MAREE TODD

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