

Approved Minutes

Meeting: NHS Golden Jubilee Board Meeting
Date: 27 May 2021, 10am
Venue: Microsoft Teams Meeting

Members

Susan Douglas-Scott CBE	Board Chair
Linda Semple	Vice Chair
Callum Blackburn	Non-Executive Director
Marcella Boyle	Non-Executive Director
Morag Brown	Non-Executive Director
Elaine Cameron	Non-Executive Director
Jane Christie-Flight	Employee Director/Non-Executive Director
Jann Gardner	Chief Executive
Rob Moore	Non-Executive Director
Colin Neil	Executive Director of Finance
June Rogers	Deputy Chief Executive / Executive Director of Operations
Mark MacGregor	Medical Director

In attendance

Gareth Adkins	Executive Director of Quality, Innovation & People
Serena Barnatt	Human Resources Director
Anne Marie Cavanagh	Executive Director of Nursing and Allied Health Professionals
Kevin Kelman	Director of NHS Scotland Academy
Liane McGrath	Head of Corporate Governance
Nicki Hamer	Deputy Head of Corporate Services

Apologies

Karen Kelly	Non-Executive Director
Stephen McAllister	Non-Executive Director

1 Opening Remarks

1.1 Chairs Introductory Remarks

Susan Douglas-Scott opened the meeting and thanked Board Members for joining via Microsoft Teams.

The Golden Jubilee Conference Hotel (GJCH) re-opened this week to NHS and Healthcare staff and will re-open to the public in July 2021. Susan Douglas-Scott commended the Hotel staff for their resilience and adaptability while the Hotel had been closed.

The NHS Scotland Event will run from 22 to 24 June 2021 and NHS Golden Jubilee (NHS GJ) are participating in a number of items across the three days. Board Members are encouraged to attend the event.

In April we marked Stress Awareness Month to staff and across NHS GJ social media platforms. NHS Staff have faced many demands during the pandemic and we continue to promote the support that is available to look after our staff's emotional and psychological wellbeing.

The programme of Board virtual walk rounds will continue at the end of the Board Meeting today. Following on from the previous sessions we will welcome the Thoracic Team. Susan Douglas-Scott thanked the Communications Team for their work in creating these videos.

1.2 Chief Executive Introductory Remarks

Jann Gardner attended the Health and Social Care Management Board (HSCMB) this week to present the NHS Scotland Academy (NHSSA) business case and to update on the Centre for Sustainable Delivery (CfSD). HSCMB members endorsed the NHSSA Business Case. HSCMB members requested NHS GJs attendance at a future meeting to discuss the potential role of CfSD in innovation.

Jann Gardner expressed thanks to Anne Marie Cavanagh and Kevin Kelman for their commitment to the establishment of NHSSA.

The Chief Executive Dialogue monthly sessions continue and clinical team meetings have recommenced with a focus on a service by service strategic review.

An Endoscopy Mobile Theatre unit is due on site in June to deliver additional Endoscopy capacity in support of the national Remobilisation plans. This will assist in providing further resource to address the national Endoscopy demand and will lead into the Endoscopy academy.

Jann Gardner advised Board Members that Liane McGrath will leave NHS GJ in June. Jann Gardner extended thanks to Liane McGrath for her commitment to and the development of the Corporate Governance department.

2. Apologies

Apologies noted as above.

3 Standing Declarations of interest

Susan Douglas-Scott CBE	Chair, Independent Living Fund Trustee, Voice Ability
Linda Semple	Non-Executive Director, NHS Ayrshire & Arran
Morag Brown	Board Member, Glasgow Association for Mental Health
Stephen McAllister	Non-Executive Director, NHS Forth Valley
Jane Christie-Flight	Board Member, Scottish Pensions Advisory Board
Jann Gardner	Director of Scottish Health Innovations Ltd (SHIL)

4. Updates from last meeting

4.1 Unapproved minutes from 18 March 2021 Board Meeting

Board Members approved the minutes from the previous Board meeting.

4.2 Board Action Log

No live actions noted.

4.3 Matters Arising

There were no matters arising noted.

5. Clinical Governance

5.1 Clinical Governance Report

Anne Marie Cavanagh presented the Clinical Governance Report.

Anne Marie Cavanagh gave an update on complaint numbers and response times. In March 2021 there were six complaints reported, Stage 1 complaints were mostly responded to within the five-day target. Stage 2 complaint turnaround times continue to be a challenge and work continues in this area. One Stage 2 complaint was resolved and subsequently withdrawn.

Four Serious Adverse Event (SAE) reviews were commissioned in the month of March 2021 and the crude hospital mortality figure for March 2021 was noted.

Anne Marie Cavanagh outlined the year to date figures for Staphylococcus Aureus Bacteraemia (SAB), Clostridiodes Difficile, Gram Negative Bacteraemia and Hand Hygiene.

The programme for 2021 was impacted by Covid 19 response and a number of improvement plans were stepped down as a result. Plans are underway to re-establish improvement works and the planned programme for 2021/22 has been endorsed by Prevention and Control of Infection Committee.

The Board noted the Clinical Governance Report.

5.2 Clinical Governance Committee Update

Morag Brown gave an overview of the key points discussed at the Clinical Governance Committee meeting held on 13 May 2021.

The Committee were provided with a SAE Progress Report. Members were given an update on key actions and associated timelines. The Committee discussed the SAEs and noted the five learning summaries for review that have concluded. The Committee discussed and supported the key learnings noted within the report.

The Committee were advised that the NHS GJ Interventional Cardiology, Cardiac Surgery and SACCS services input data into a national UK audit programme. Members received a report on anticipated changes to this which have been discussed with Scottish Government. Given issues raised, this matter will be put on the Risk Register.

The Committee Members welcomed a presentation on the work and achievements of the Cardiology Department over the past year. Members were assured that the team continued to implement a robust approach to clinical governance throughout the challenging pandemic situation.

The Committee were advised of positive feedback from patients, visitors and staff regarding patient visiting.

The Board noted the Clinical Governance Committee Update.

6 Staff Governance

6.1 Staff Governance Update

Gareth Adkins presented the Staff Governance Board Update.

The sickness absence rate for March 2021 was noted and the main categories for absence were highlighted to Board Members. Ongoing focus and targeted support continues in areas with high absence rates.

The TURAS appraisal rate for March 2021 was noted and the Executive Team are ensuring ongoing scrutiny in this area. It was acknowledged that the high number of new starts for this year will also be having an impact on the appraisal rate.

The Medical Director provided an update on medical appraisals and job planning at the last Staff Governance and Person Centred Committee. Committee members were assured that progress is being made.

Board Members noted the Staff Governance Update.

6.2 Staff Governance and Person Centred Committee Update

Marcella Boyle highlighted key points from the Staff Governance and Person Centred Committee which took place on 11 May 2021.

The Committee received a detailed year-end report from the Communications Team and Committee Members recognised the level of work undertaken by the team this year and in particular for the increase in internal communications.

The Committee received a detailed year-end report from the Occupational Health Team.

The introduction of a more agile induction process was discussed and the Committee noted monitoring of Induction was to be reviewed.

Board Members noted the Staff Governance and Person Centred Committee update.

7. Finance and Performance

7.1 Operational Performance Report

June Rogers presented the Operational Performance Board Update and noted the following key points:

- Recruitment of Nurses, Optometrists and Consultants to support the accelerated opening of the Eye Centre continues.
- The number of cataract procedures and cancellations for the year were noted.
- New Outpatient model has been developed to increase Outpatient throughput with the support of the Performance and Planning Team.
- The figures for Orthopaedic surgery were noted for July 2020 to March 2021 and there has been a positive start to this financial year.
- Saturday Theatre sessions are due to restart by end of June 2021.
- The figures for Cancer procedures carried out between January to March 2021 were noted.

- The phased repatriation schedule for Cancer surgery was highlighted. This capacity will then be converted to general surgery to support robotic training and colorectal work in the first instance.
- The figures for cardiac surgery carried out between July 2020 to March 2021 were noted.
- Cardiac referrals have not yet returned to pre Covid-19 levels.
- Thoracic surgery service remains responsive to waiting list pressures.
- All Cancer tracked patients from May 2020 have met the 31 day cancer target.
- There is a continued trend of increasing referrals in Cardiology.

Board Members approved the Operational Performance Report.

7.2 Finance Report

Colin Neil presented the Finance year end position and noted the following key points:

- The Revenue Resource Limit (RRL) was met with £38k surplus
- Total efficiency savings achieved of £2.409m and a carry forward of circa £1.3m in the Finance Plan.
- Non-core and Capital position were noted as break even.
- Hotel and Conference Centre is also reporting a break even position.
- Hospital staff costs reflect an overall positive position against budget.
- Pays, with the exception of Medical pays, were showing an underspend in total. Medical pays are an area of ongoing focus for 2021/22.
- Non pays difficult year, first quarter of year collapsing a lot of costs. Theatres show an element of pressure and is under scrutiny with divisions.
- The Hotel has impacted positively on the Hospital and Louisa Jordan in supporting activity.
- The Capital Investment figure for 2021/22 was noted.
- The revisions to the RMP were noted, the ask remains the same but Access funding is now accounted for.
- Additional request for Endoscopy Services, funding was agreed by the Access Support Team and the unit is formally on NHS GJ site.
- The Finance Plan remains unchanged for 2021/22 from the last presentation.

The Board approved the Finance Report.

7.3 Finance and Performance Committee Update

Rob Moore presented the Finance and Performance Committee update.

The Committee were assured of the operational performance as at the end of year 31 March 2021. It was noted that the overall performance and activity, in this exceptional year, has been positive with 16,545 procedures carried out against a plan of 17,231. Work is ongoing to optimise patient pathways and clinical teams continue to work with NHS Scotland Boards to support the recovery of waiting times, including cancer services on a national basis.

Members were provided with a NHS GJ Remobilisation Plan (RMP) update. This included a workforce development plan to provide sustainable clinical and infrastructure support to meet the requirements of the Remobilisation Plan. It was advised that the RMP4 plans are at an early stage and further information will be available in July 2021.

The Committee approved the recommended amendment of the Key Performance Indicators (KPIs) for the Integrated Performance Report (IPR). It was noted that the Hotel indicators will be reviewed when it is fully operational. Research and Innovation indicators will be reviewed when the new strategy is finalised. It is anticipated that the revised format of the KPIs will be reported for the June 2021 Committee meetings.

The Annual Report for the Finance and Performance Committee 2020/21 was presented and approved. In addition, the Committee work plan for 2021/22 was approved by Members.

The Board noted the Finance and Performance Committee Update.

7.4 Audit and Risk Committee Update

Morag Brown presented the Audit and Risk Committee Update. The Clinical Governance Committee, Staff Governance and Person Centred Committee, and Finance and Performance Committee Draft Annual Reports were presented for noting. Members approved the Audit and Risk Committee Annual Report subject to minor amendments.

The Board Risk Register was presented and Members noted the current status. The Risk Register remains under review and will be reviewed at the next Committee meeting.

The Procurement Strategy was presented to the Committee. The three-year strategy will be refreshed and presented on an annual basis. A further review of the vision and mission statement from the strategy will be undertaken and any changes will be endorsed by Members via email.

Updated Terms of Reference for 2021/22 for the Committee were reviewed and approved.

Internal Audit Progress Report was presented and Members were informed that work is progressing. The Internal Audit Report and opinion will be presented at the next Committee.

Financial Sustainability Part Two Audit was presented and overall conclusion from the review was 'reasonable assurance'. Committee members welcomed scrutiny in this area and were assured that robust processes are in place.

The Committee were advised that External Audit are in the planning stages for the final audit visit in May 2021. Works continues to plan towards the June 2021 Committee deadlines

Board Members noted the Audit and Risk Committee Update.

7.5 Annual Key Performance Indicator (KPI) Review

The annual review of the construction of the IPR was recently carried out and suggested amendments to measures within the IPR Performance Dashboard for 2021/2022 were presented to Board Committees in May 2021.

The proposals were reviewed and supported at the relevant Board Committees and reporting under the revised format will commence from June 2021

The Board noted the Annual Key Performance Indicator (KPI) Review.

8 Strategic Portfolio Governance

8.1 Hospital Expansion Programme Update

Phase One

June Rogers noted progress with Phase One and highlighted the following key points:

- Defects monitoring continues.
- Focus remains on accelerating recruitment
- Reviewing performance against business case and service planning assumptions.

Phase Two

June Rogers noted progress with Phase Two and highlighted the following key points:

- The Assurance Review Report has been issued.
- Construction work is moving at pace and the second floor is in place.
- Design team are reviewing the potential for an additional two Endoscopy rooms.
- Challenges with West Dunbartonshire Council in relation to the sign off of building warrants but it is an improving situation.
- A Soft Landings Group will be established to ensure a smooth a transition from the construction to occupation phase of the project with a view to optimising performance in the new facility.

Marcella Boyle queried the under recruitment for Phase One. June Rogers responded that recruitment is a challenge but it has not been flagged as an ongoing issue. Mark MacGregor added that the target for Phase One is an ambitious one.

Board Members noted the Hospital Expansion Programme Update.

8.2 Strategic Portfolio Governance Committee Update

Linda Semple presented the Strategic Portfolio Governance Committee Update.

Linda Semple reflected that the meeting took the format of a consolidation meeting. The meeting focused on the way in which Strategic Programmes would be managed and the infrastructure within the organisation. The Committee were provided with an overview on progress reporting.

The CfSD Team presented their annual workplan and an outline of future reporting to the Committee.

Anne Marie Cavanagh and Kevin Kelman presented an update on NHS Scotland Academy programme. The Committee welcomed the presentation and supported the key actions and approaches being taken to support the development of NHS Scotland Academy to date.

Board Members noted the Strategic Portfolio Governance Committee Update.

9 Minutes for Noting

9.1 Clinical Governance Committee Approved Minutes

The Board noted the Clinical Governance Committee approved minutes for the meeting held on 3 March 2021.

9.2 Staff Governance and Person Centred Committee Approved Minutes

The Board noted the Staff Governance and Person Centred Committee approved minutes for the meeting held on 3 March 2021.

9.3 Finance and Performance Committee Approved Minutes

The Board noted the Finance and Performance Committee approved minutes for the meeting held on 4 March 2021.

9.4 Audit and Risk Committee Approved Minutes

The Board noted the Audit and Risk Committee approved minutes for the meeting held on 16 February 2021.

9.5 Strategic Portfolio Governance Committee Approved Minutes

The Board noted the Strategic Portfolio Governance Committee approved minutes for the meeting held on 26 January 2021.

10 Any Other Competent Business

There was no other competent business to record.

11 Date and Time of Next Meeting

The next scheduled meeting of the NHS GJ Board is Thursday 24 June 2021 at 10am.

The meeting closed at 11:05