

## Approved Minutes

**Meeting:** NHS Golden Jubilee Board Meeting  
**Date:** 23 September 2021, 10.00am  
**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
Karen Kelly	Non-Executive Director
Mark MacGregor	Medical Director
Rob Moore	Non-Executive Director
Colin Neil	Executive Director of Finance
June Rogers	Deputy Chief Executive / Executive Director of Operations

### In attendance

Gareth Adkins	Executive Director of Quality, Innovation & People
Anne Marie Cavanagh	Executive Director of Nursing and Allied Health Professionals
Gerard Gardiner	Head of Corporate Governance and Board Secretary
Kevin Kelman	Director of NHS Scotland Academy
Nicki Hamer	Deputy Head of Corporate Services

### Apologies

Stephen McAllister	Non-Executive Director
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### Minutes

Denise Crossan	Corporate Administrator
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## 1 Opening Remarks

### 1.1 Chairs Introductory Remarks

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

Susan Douglas-Scott welcomed Gerard Gardiner, Head of Corporate Governance and Board Secretary, to the Board meeting.

First Minister and Cabinet Secretary visited NHS Golden Jubilee (NHS GJ) in September 2021. The session provided an engaging overview of the excellent work undertaken at NHS GJ, through the leadership of the Centre for Sustainable Delivery (CfSD) and at the new NHS Scotland Academy (NHSSA).

The Annual Review date is not yet finalised but is likely to have the same approach as last year. Scottish Government have advised they will record a short session that will be made public via a link on our Board website.

This week was Organ Donation week and the BBC have covered another of NHS GJs patient stories and there has been lot of coverage on Heart Transplant patients.

In relation to the Corporate Governance Annual Report, it was pleasing to see how much as a Board we have undertaken during a very challenging year. This report also outlines work conducted throughout 2020/21 to augment and develop the corporate governance arrangements across NHS GJ.

The programme of Board virtual walk rounds will be continuing at the end of the Private Board meeting today. Following on from the previous sessions we will be welcoming the Pharmacy Team.

## 1.2 Chief Executive Introductory Remarks

Jann Gardner also welcomed Gerard Gardiner and extended thanks to Nicki Hamer for the support over recent months.

There is a planned visit on 20 October 2021 with the Cabinet Secretary for the launch of NHSSA.

CfSD have recently recruited five Associate Clinical Directors who will start in October 2021. These posts will play an important role in linking in with NHS Boards' around their RMP#4s.

Voting has closed for Staff Awards. This year has seen over 155 nominations across all categories. The event will be held online again this year and Sandie Scott and Communications Team are doing excellent work to plan the event.

The iMatter Questionnaire has now closed and so far the response rate is up to 66% and it is good to see that staff have taken the opportunity to have their say. The Executive Team met virtually with staff on 15 September 2021 and further events are planned throughout the year.

We are celebrating the commitment and loyalty of team members who have careers from 10 to 50 years' service in the NHS. Staff who have served in the NHS from 10 years onwards will receive certificates and specially-made pin badges highlighting the amount of years of personal NHS service.

In a Scottish first, NHS GJ Consultants have used innovative imaging technology to see inside heart arteries. The technology is being hailed as the new generation of intravascular imaging which gives higher quality images inside arteries to help treat patients' coronary disease more accurately and in the most appropriate way, resulting in better outcomes for patients.

## 2. Apologies

Apologies noted as above.

### 3 Standing Declarations of interest

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

### 4. Updates from last meeting

#### 4.1 Unapproved minutes from 29 July 2021 Board Meeting

Board Members approved the minutes from the previous Board meeting.

#### 4.2 Board Action Log

The action log was reviewed noting the only live action has a due date of the November Board meeting.

#### 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 July 2021 there were six stage 1 complaints, of which three were responded to within the timescales. There were four Stage 2 complaints, of which there were responded to within the timescales. Improvement plans for response times are continuing.

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

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

The team are stepping up light surveillance around Surgical Site Infection (SSI) controls. There has been positive progress with the Orthopaedic Team and discussions are underway with Cardiac.

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 7 July 2021.

The Committee recognised the impact of self-isolation on staffing and noted that guidance had been updated and implemented for close contacts and close contacts when there was a positive Covid-19 case in the household.

The Committee were provided with a Significant Adverse Events (SAEs) overview report. Members were updated on key actions and associated timelines. The Committee were advised that incidents older than 6 months will be tabled at Clinical Governance and Risk Management Group (GRMG) and included in the Clinical Governance Committee Update.

The Committee discussed the Risk Register and were advised that a review of RA S20 will be undertaken with the Clinical Directors and Clinical Governance. Themes and learnings will be shared to ensure continued improvements where appropriate.

The Committee were updated that a new interventional procedure, Endoscopic Vessel Harvesting (EVH) – Cardiac, had been approved by CGRMG. A business case will now be prepared for Board approval.

A proposal that the Scottish National Radiology Reporting Service (SNRRS) Bank was adopted as Business as Usual following the securing of long term funding, a successful 12-month pilot and the creation of a team who will transfer to NHS Golden Jubilee.

The Committee noted and welcomed the increase in heart transplant numbers this year (36), and commended the rapid debrief approach which assists learning and improves performance.

The Committee were given an overview of the activities of the Drugs and Therapeutics Committee and the Antimicrobial Team for the year 2020/21.

Anne Marie Cavanagh confirmed that the Covid-19 Booster Programme will commence on 30 September 2021 and a communication will be distributed today.

The Board noted the Clinical Governance Committee Update.

## 5.3 Duty of Candour Report

Mark MacGregor informed Board members that it is a legal requirement to publish an annual Duty of Candour Report. The number of incidents where Duty of Candour was triggered were noted and the detail of these can be found on page five of the report.

Mark MacGregor advised that not all Serious Adverse Events (SAEs) reviews become Duty of Candour. The Clinical Governance Committee review all SAEs and the Committee can scrutinise and challenge any they feel should be Duty of Candour. There have been no Covid related Duty of Candour events during the period of the report.

The Board approved the Duty of Candour Report.

## **6 Staff Governance**

### **6.1 Staff Governance Update**

Gareth Adkins presented the Staff Governance Board Update.

The sickness absence rate for July 2021 was noted. Covid Special Leave has increased following a previous drop reported at the last Board meeting, this is in line with other Boards'.

Work is ongoing to promote Mental Health pathway and early referrals. There has been an increase in referrals to the support mechanisms that are available. A Stress Risk Assessment Policy has been introduced which includes an individual stress risk assessment.

Appraisals remain an area of focus, NHS GJ recognises that there is work to be done to surpass the target and execute quality appraisals for staff. This area has been discussed in depth at Staff Governance Person Centred Committee (SGPCC). Progress has been made against the 6 month recovery plans and data is reviewed at regular Executive meetings.

The Board 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 (SGPCC) which took place on 7 September 2021.

Appraisals and Staff Development continue to be an area of scrutiny for the Committee. The Committee are assured of the focus from the Executive Team and cascading through line management.

The Committee had a detailed discussion on staff turnover. Staff retention is not a significant issue for NHS GJ. Gareth Adkins along with the HR Team have looked into the statistics and no trends have been identified in relation to grades or tenure.

The Committee formally approved the Staff Governance Submission and noted the wide range of work in progress across the staff governance standards

The Committee formally recognised the work Liz Rogers had undertaken prior to retirement. There will be a refresh of the Volunteer Action Plan and Strategy from 2022.

The Board 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:

- The year to date figures for cataract procedures and cancellations were noted.
- Activity plan was not met in July due to Consultant availability and the complexity of cases.
- Service continues to be impacted by physical distancing
- Clinical flow has improved with standardised templates with the support of the Performance and Planning Team.
- The year to date figures for Orthopaedic Surgery were noted.
- Reduced Theatres currently in response to the number of vacancies and absences that are present. Need to consider whether and how much we reduce Outpatient Clinics.
- Robotics training is progressing well. Two Lanarkshire Surgeons have completed robotic training. Second cohort training starts in October 2021.
- The ‘on the day’ Theatre cancellation figures for General Surgery and Endoscopy were noted. These figures are under close review.
- Endoscopy position recovered in July 2021 and continues to recover.
- Sickness absence rates are high in General Surgery and Surgical Day Unit.
- The Thoracic Surgery service remains responsive to waiting time pressures and is performing in line with expectations. The In-Patient cancer target continues to be achieved.
- The Cardiology figures were noted. The shortfall noted is due to the increased number of urgent patients, resulting in the cancellation of elective lists to accommodate them.
- Growing number of patients waiting over 12 weeks which is due to the growth in urgent referrals.
- Experiencing a gradual increase in referrals in Cardiology and this is expected to continue.
- Developing plans to support NHS Boards’ across Scotland to support during this pressurised period.
- There is significant staff absence particularly in Theatres. There are a number of vacancies across clinical teams but this is consistent with other Boards’.

Jann Gardner noted that there is growing interest from Scottish Government and First Minister’s office around the utilisation of NHS GJ. Jann Gardner continues to highlight the challenges NHS GJ are facing when having to make last minute changes to service plans. NHS GJ will clearly set out to Scottish Government the capacity available to allow the Performance Team within Scottish Government to fill these slots. This is consistently being worked through week by week.

Linda Semple suggested quantifying the support NHS GJ have provided in the last 18 months illustrating how quickly we have adapted and responded.

Action No.	Action	Action by	Status
210923/01	Quantify the support that NHS GJ has provided to NHS Scotland Boards’ over the last 18 months.	March 2022	New

The Board approved the Operational Performance Report.

## 7.2 Finance Report

Colin Neil presented the Finance position for Month 4 and noted the following key points:

- A total outturn surplus reported of £0.204m for core revenue and income.
- 2021/22 Total Efficiency Savings target of £4.044m. The total identified to date is £2.599m.
- Non-core and Capital position were noted as break even.
- Income has an over recovery of £0.205m some of which is related to the Golden Jubilee Conference Hotel (GJCH). The Hotel is forecasting a break even position following the incorporation of £3m identified in the Remobilisation Plan.
- Across Pay and no Pay, showing an overall break even position.
- As previously reported £3.9m of funding has been allocated as a first general payment to NHS GJ within the June 2021 RRL letter. Formal assessment of the RMP4 submissions on performance transition from RMP 3 will appraise forecast against total original £10.142m.
- Original schedule of the Remobilisation Plan included Endoscopy Unit but this will be funded from Access funds.
- Access funding £11.568m, incorporates Endoscopy Unit, the core element of Phase 1 funding (staff and fixed costs, excludes marginal costs), includes £3m workforce for Phase 2, includes half of allocation for Ophthalmology weekend activity and includes infrastructure staffing.
- Outstanding balance £1.4m for Efficiency savings. Recurring element is still a challenge and this is being seen across Scotland. Reasonable advancement has been made to date with £1.151m achieved.
- Bids have been submitted for MRI Scanner and other equipment to a National fund, expected to hear output on that in the coming weeks.
- Pay awards have been announced for Medical and Dental and Bands 8 and 9. Received confirmation that this will be fully funded through Scottish Government. Across medical and dental and AFC bands uplift in the region of £0.5m.
- Deep dive at next Finance and Performance Committee on Efficiency Savings and Medical Staffing.

The Board approved the Finance Report.

## 7.3 Finance and Performance Committee Update

Rob Moore highlighted key points from the Finance and Performance Committee (FPC) which took place on 6 September 2021.

The Committee are aware of the continued challenging operating environment for NHS Golden Jubilee.

The Committee are seeing a number of cancellations and staffing issues on weekends and this has been exacerbated by both staff absence and vacancies. This is also leading to some issues with waiting lists.

The Committee noted the 3% medical and dental award and await the outcome of discussions with Scottish Government in relation to how this is to be funded.

In relation to the Research Institute, the Committee noted the gradual reopening of the unit and the associated increase in activity although there is a possibility that targets will not be met due to recent events relating to COVID with the closure.

The Board noted the Finance and Performance Committee Update.

#### **7.4 Procurement Strategy**

Colin Neil presented the Procurement Strategy.

The Procurement Strategy has been approved by the Audit and Risk Committee and the Senior Leadership Group. The Strategy covers the period 2021 to 2024 and will be reviewed and presented to the Board annually.

The Board approved the Procurement Strategy and its onward publication.

### **8 Strategic Portfolio Governance**

#### **8.1 Hospital Expansion Programme Update**

##### **Phase One**

June Rogers informed Board Members that there are no further updates on Phase One.

##### **Phase Two**

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

- Precast façade complete
- Concrete to floor slabs poured on level two, three and four
- Installation of partitions commenced
- Tower cranes removed
- Started sealing of lift shafts
- The breakthrough programme is due to commence in November 2021. Extensive stakeholder engagement has taken place.
- Timeline has been shared with Senior Users Group and Programme Board.
- Refurbishment will commence soon in the Outpatients Orthopaedic Department.
- PSCP have intimated that supply of some materials continues to be of potential concern. Steel supply could well be a problem; no timeline delays have been forecast as of yet.

The Board noted the Hospital Expansion Programme Update.

#### **8.2 Strategic Portfolio Governance Committee Update**

Linda Semple highlighted key points from the Strategic Portfolio Governance Committee (SPGC) which took place on 2 September 2021.

The Committee received the required Statement of Assurance from the Centre for Sustainable Delivery (CfSD) which confirms that they are delivering as per the requirements. The Statement of Assurance will then be presented to Scottish



Government. The CfSD Statement of Assurance will be appended to future SPGC Board updates.

Linda Semple noted the complexities of the current landscape and recognised the challenges faced by the Executive Team and staff.

The Board noted the Strategic Portfolio Governance Committee Update.

## **9 Corporate Governance**

### **9.1 Corporate Governance Annual Report**

Jann Gardner informed Board members that the Corporate Governance Annual Report outlines work conducted throughout 2020-21 to augment and develop the corporate governance arrangements across NHS GJ. Jann Gardner commended the work that had been done to date.

Gerard Gardiner endorsed the report and extended thanks to Nicki Hamer and the team for the efforts in producing the report and their contribution over the last number of months. The Action Plan will be a live document and will help contribute to the Board's decision making processes as the year progresses.

Nicki Hamer informed Board members that the Blueprint for Good Governance was published in February 2019 and emphasises the importance of good Corporate Governance to maintain high standards of staff, clinical and financial governance. The workplan is an evolving piece of work, will be flexible and subject to change and will be reviewed on a regular basis. The NHSSA is a separate subject and does not sit within the Blueprint.

Marcella Boyle commented that the paper was well presented and commended that the Board has continued to develop in a difficult year.

The Board approved the Corporate Governance Annual Report.

### **9.2 Cyber Security**

*Stuart Graham and Sharon Stott joined the meeting.*

Colin Neil informed Board members that a comprehensive discussion on Cyber Security took place at the August Board Seminar. An output from the ongoing NIS Audit is that Cyber Security will be a standing agenda item at every Board meeting.

Stuart Graham and Sharon Stott delivered a presentation on the Cyber Security position and NIS Directive, noting the following key points:

- NIS Directive came into force in May 2018. Providers of essential services have to evidence compliance with the Directive.
- The Directive is the first piece of EU-wide cyber security legislation.
- It aims to achieve a high common level of cyber security across critical infrastructure.
- Audits taking place across NHS Scotland. Completed in two stages. Stage 1 was the submission of evidence in September 2021.
- Interim report received February 2021. Second stage of audit takes place in November 2021 with a site visit and final report expected in February 2022.

- Interim report broke down into 5 categories. There were 105 recommendations in total.
- A black (critical) recommendation is defined as ‘fundamental absence or failure of controls’. One recommendation within that category was a lack of standing agenda items within the Board agenda.
- Cyber Security is now a standing item on the Board Agenda.
- Working with Local and National Procurement to ensure robust security assessments are in place for Third Party Providers.
- Security considerations are now included at early project development stage.
- Commissioned penetration testing is now underway. Report expected in the coming weeks.
- Developing a more robust Joiners/Movers/Leavers (JML) process.
- Producing Policies and Guidelines to support current good practice.

Board Members discussed NHS GJ position in relation to other Boards’. NHS GJ are slightly below the average rating in Scotland. Board members were reassured that a lot of findings came under black red amber, these do not reflect the fact that cyber security practice within the Board is very good.

Board agreed that Cyber Security is an important area and the Board looks forward to receiving further updates at forthcoming meetings. In relation to the areas of recommendation within the interim report, Jann Gardner assured Board members that this area was a priority for the Executive Team to address these points.

Board Members noted the Cyber Security Update.

*Stuart Graham and Sharon Stott left the meeting.*

## **10 Minutes for Noting**

### **10.1 Clinical Governance Committee Approved Minutes**

The Board noted the Clinical Governance Committee approved minutes for the meeting held on 7 July 2021.

### **10.2 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 9 July 2021.

### **10.3 Finance and Performance Committee Approved Minutes**

The Board noted the Finance and Performance Committee approved minutes for the meeting held on 8 July 2021.

### **10.4 Strategic Portfolio Governance Committee Approved Minutes**

The Board noted the Strategic Portfolio Governance Committee approved minutes for the meeting held on 1 July 2021.

## **11 Any Other Competent Business**

There was no other competent business to record.

**12 Date and Time of Next Meeting**

The next scheduled meeting of the NHS GJ Board is Thursday 25 November 2021 at 10am.