

Approved Minutes

Meeting: NHS Golden Jubilee Board Meeting

Date: 24 May 2022, 10.00am

Venue: Inspiration Golden Jubilee Conference Hotel/ MS Teams

Members

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| Susan Douglas-Scott CBE | Board Chair |
| Linda Semple (via MS Teams) | Non-Executive Director (Vice Chair) |
| Callum Blackburn | Non-Executive Director |
| Marcella Boyle (via MS Teams) | Non-Executive Director |
| Morag Brown (via MS Teams) | Non-Executive Director |
| Jane Christie-Flight | Employee Director/Non-Executive Director |
| Karen Kelly | Non-Executive Director |
| Stephen McAllister | Non-Executive Director |
| Rob Moore (via MS Teams) | Non-Executive Director |
| Gareth Adkins | Executive Director of Quality, Innovation & People |
| Anne Marie Cavanagh | Executive Director of Nursing and Allied Health Professionals |
| Professor Jann Gardner | Chief Executive |
| Dr Mark MacGregor | Executive Medical Director |
| Colin Neil | Executive Director of Finance |
| June Rogers | Deputy Chief Executive / Executive Director of Operations |

In attendance

| | |
|-----------------|--|
| Lynne Ayton | Interim Executive Director of Operations |
| Serena Barnatt | Human Resources Director |
| Katie Bryant | Head of Clinical Governance |
| Gerard Gardiner | Head of Corporate Governance and Board Secretary |
| Nicki Hamer | Deputy Head of Corporate Services |
| Sandie Scott | Director of Strategic Communications and Stakeholder Relations |
| Graham Stewart | Deputy Director of Finance |

Guests:

| | |
|-------------------------------|---|
| Sharon Stott (Item 9.1 only) | Information Governance Manager |
| Stuart Graham (Item 9.1 only) | Director of Digital & eHealth |
| Carol Scott | Director of Operations NHS Lancashire and South Cumbria |

Minutes

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|----------------|-------------------------|
| Denise Crossan | Corporate Administrator |
|----------------|-------------------------|

1 Opening Remarks

1.1 Chair's Introductory Remarks

Susan Douglas-Scott welcomed all to the hybrid Board Meeting.

Susan Douglas-Scott remarked on it being June Rogers last Board Meeting and thanked her for her enormous commitment and dedication in the many years she had worked with NHS Golden Jubilee (NHSGJ). Board Members wished June Rogers well in all her future endeavours.

Susan Douglas-Scott welcomed Carol Scott, Director of Operations NHS Lancashire and South Cumbria, who will join NHSGJ in October 2022 as Deputy Chief Executive and

Director of Operations. Katie Bryant who started as Head of Clinical Governance on Monday 23 May, was also welcomed to the meeting.

Susan Douglas-Scott reflected that the last in person Board meeting took place in February 2020 and advised that the next full Board meeting in July would take place in Level 5 East Boardroom following the conclusion of improvement works. The extraordinary meeting of the Board to consider the annual accounts would take place on a hybrid basis, with members and attendees encouraged to attend in person if possible.

The recruitment of a Non-Executive Director was progressing well and shortlisting would take place in June prior to interviews in July 2022.

The Annual Review meeting with Maree Todd MSP had taken place successfully. Maree Todd was impressed with expansion, financial performance and activity past and programmed. An invite was extended to Maree Todd MSP to have a future site visit to see the progress with Expansion, the Hospital and the Eye Centre and to understand more about the NHSGJ portfolio. Maree Todd MSP was particularly interested in the inclusive design of the Eye Centre.

The first International Colon Capsule Endoscopy (CCE) Conference took place at The Royal College of Surgeons of Edinburgh, Birmingham Regional Centre and virtually. Colon Capsule is a technique developed through collaboration and now being lead as a national programme by the Centre for Sustainable Delivery (CfSD).

It was International Nurses day on 12 May 2022 and NHSGJ participated in the 4 Nations #HereForLife social media campaign supported by Sandie Scott and the Communications Team. Susan Douglas-Scott noted her thanks to all of NHSGJ nursing staff for the fantastic work that they do.

NHS Golden Jubilee has expanded its Spiritual Care Team with the recent appointment of Joe Keenan to the new role of Chaplain. Joe comes with substantial experience in delivering spiritual care and will serve as Chaplain to the patients and staff of NHSGJ and represents an investment in pastoral support for patients, visitors and staff at NHSGJ.

1.2 Chief Executive Introductory Remarks

Professor Jann Gardner, Chief Executive, also noted her best wishes to June Rogers and thanked her for the enormously significant role she had in the organisation's development through her strong leadership. Jann Gardner noted that she was personally grateful to June Rogers for the last three years and the role she played as Deputy Chief Executive. Jann noted that June Rogers would return to work on the NECU programme on a flexible basis as a senior advisor with the CfSD.

Jann Gardner also welcomed Carol Scott to the meeting and noted that Carol would join the next cycle of Committee meetings and Board as a guest before joining on 6th October as Deputy Chief Executive/Director of Operations. Carol Scott gave the Board a brief overview of her career which started 37 years ago in Nursing and noted that she is very much looking forward to taking up her new role.

Jann Gardner welcomed Katie Bryant to the organisation and her first Board meeting and noted the varied experience that Katie would bring to the role, from a long career in health and recent experience in the banking sector.

The NHS Event is scheduled for 21st and 22nd June 2022. NHSGJ stands representing the NHS Scotland Academy; CfSD; Golden Jubilee Conference Hotel and the Golden Jubilee University National Hospital.

Jann Gardner reflected on the positive Annual Review meeting which presented the opportunity to note the final year position over performance of 8.6% against Remobilisation Plan 4 (RMP4) activity and a small surplus financial position.

Jann Gardner noted that she was delighted that the Permanent Secretary and Deputy Chief Operating Officers NHS Scotland would visit NHSGJ on 10 June 2022. This is a fantastic opportunity to showcase our evolving portfolio and the positive impact that we play in supporting NHS Scotland.

Jann Gardner informed the Board that a ground-breaking study led by experts from NHSGJ and the University of Glasgow into the effects of Covid-19 on Scottish patients in Intensive Care Units (ICUs) has confirmed evidence that the virus was associated with impaired function of the right side of the heart. The first of its kind, the Covid-RV study aimed to help improve future care and outcomes for those most at risk from Covid-19, by gaining a better understanding of the impact the virus had on the sickest patients who required invasive ventilation. The study was a significant collaboration across NHS Scotland, and was carried out in 10 ICUs across the country, examining 121 critically ill patients who were receiving treatment on ventilators due to the impact of Coronavirus on their system. The study will feature on various news and media outlets over the course of the day.

2 Apologies

No apologies were noted.

3 Standing Declarations of Interest

There were no changes requested to the Standing Declarations of Interest.

4 Updates from last meeting

4.1 Unapproved minutes from 31 March 2022 Board Meeting

The Board approved the minute of the last meeting subject to the highlighted amendments.

| Action No. | Action | Action by | Status |
|---------------|--|-----------------|--------|
| Bpu/220524/01 | Unapproved minutes Remove 'i' from line 3 of paragraph two of item 4.2 | Board Secretary | New |

4.2 Board Action Log

The action log was reviewed and one live action was noted with a completion date of September 2022. Colin Neil advised that the finalised three year Finance Plan would be presented to Board in July 2022.

| Action No. | Action | Action by | Status |
|---------------|---|-----------------|--------|
| Bpu/220524/02 | Board Action Log Date for action Bpu/220331/01 should be updated to 28 July 2022. | Board Secretary | New |

4.3 Matters Arising

There were no matters arising.

5 Clinical Governance

5.1 Clinical Governance Report

The Board was presented with the Clinical Governance Report.

Anne Marie Cavanagh, Executive Director of Nursing and Allied Health Professionals, reported that there were twelve complaints reported in February 2022, four of which were Stage 1 and seven of which were Stage 2. Of the Stage 1 complaints, none were responded to within the five day target. Of the Stage 2 complaints, five were responded to within the 20-day target. Response times continued to be an area of focus.

The Board noted the commission of four Serious Adverse Event (SAE) reviews, two in February 2022 and two in March 2022. The crude mortality data was noted which remained within control limits. There were no Whistleblowing reports in the period.

Anne Marie Cavanagh provided an overview of the HAIRT report and highlighted the following:

- Staphylococcus Aureus Bacteraemia – 0 cases since November 2021.
- Clostridioides difficile infection – 0 cases since March 2021.
- Hand Hygiene – bi-monthly report indicates overall compliance of 100%.
- Gram Negative/ E.coli Bacteraemia – 0 cases since September 2021.

There had been seven Staphylococcus Aureus Bacteraemia cases in 2021/22 which exceeded the local Annual Operating Plan (AOP) target rate but was below the NHS Scotland rate.

Anne Marie Cavanagh reflected that the Covid-19 Respiratory Pathways were revised in February 2022 and these were now well embedded.

Mark MacGregor, Executive Medical Director, advised that there was a degree of variation between specialities noting that the risk for Endoscopy was for instance lower than that of Cardiac Surgery. Same day testing would be carried out for the higher risk areas and lateral flow tests for any low risk areas. The isolation period had been reduced from three weeks to two days. These factors should correlate with accelerated performance across clinical disciplines, and this would be monitored through usual performance reporting frameworks.

Mark MacGregor noted the recent Monkey Pox outbreak and that one case had been reported in Scotland. The disease was more of a contagion than infectious disease, spread through physical contact, albeit with a significant mortality rate of 3 - 4 %.

The Board noted the Clinical Governance Report.

5.2 Clinical Governance Committee Update

Morag Brown, Chair of the Clinical Governance Committee, provided an overview of the key issues discussed at the meeting held on 12 May 2022.

The Committee were provided with a Significant Adverse Event (SAEs) overview report. Two SAERs had been commissioned in the period under report. The Committee noted that an

SAER Deep Dive would be provided at the meeting of the Committee in June 2022, with this deep-dive providing the opportunity to identify progress and opportunities for further improvements.

Catherine Sinclair, Head of Research and Development (R&D) attended the Committee to present the R&D Steering Group Annual Update. Committee noted that the Steering Group meeting schedule had been maintained during financial year 2021/22. The Committee commended the work of the Research and Development Department, noting the importance of research in developing innovative approaches to care and treatment, and commending the ability of the team to develop innovative approaches despite the challenges of the pandemic.

The Committee received the Claims Bi-Annual Report.

The Committee were presented with a patient story detailing revolutionary cancer treatment which a patient received during the Pandemic.

The Committee received a presentation on the work of the General Surgery service. The Committee commended Professor Susan Moug, General Surgeon and Therese Rolwich, Clinical Nurse Manager and colleagues, on their leadership in developing the service, whose performance in year was commendable.

A full discussion on the Radiology Process and a deep dive on SAEs would take place at the next Committee meeting.

The Board noted the Clinical Governance Committee Update.

6 Staff Governance

6.1 Staff Governance Update

The Board was presented with the Staff Governance Update by Gareth Adkins, Executive Director of Quality, Innovation & People.

Sickness absence was noted at 6% in March 2022 which was the same as February 2022. A report from the Employee Assistance Programme (EAP) indicated that mental health related absences were mostly attributable to non-work related factors.

The cost of living pressures were reported noting the possibility that these could result in increased work related anxiety and absence rates. Given the potential impact of these challenges, consideration was being given to include this as a risk on the Board Risk Register. Gareth Adkins noted that this would be discussed further with Colin Neil, Director of Finance as part of the review of the board risk register and may be proposed through further updates to the risk register and discussion with the board.

| Action No. | Action | Action by | Status |
|---------------|--|--------------------------|--------|
| Bpu/220524/03 | Staff Governance Update Gareth Adkins to discuss reporting of cost of living pressures and associated impacts on staff well-being and attendance within Board Risk register arrangements, and report to future meeting of the Board. | Gareth Adkins/Colin Neil | New |

Agenda for Change (AfC) appraisal rate for March 2022 was 52%, a dip from the 65% reported in February 2022. Assurance was provided on a monthly basis to the Executive

Team to support and encourage colleagues to increase as a marker of staff development and support.

The Medical Appraisal rate was noted as 31.6% in February and rose to 84% in March 2022. 68.7% of Job Plans had been completed for 2022/23. Gareth Adkins commended Mark MacGregor for the work progressed in this area.

The recent innovative recruitment event held in the Eye Centre had proven extremely successful and a number of offers of employment had been made on the day. Learnings from the event would inform future events.

Stephen McAllister commended the deep dive undertaken on the mental health related absences and noted the recent publication of the Mental Health Strategy by Scottish Government.

The Board noted the Staff Governance Update.

6.2 Staff Governance and Person Centred Committee Update

Marcella Boyle, Chair of Staff Governance and Person Centred Committee, noted that the majority of points from the meeting held on 3 May 2022 had been covered within item 6.1.

Marcella Boyle echoed the comments of Gareth Adkins in commending the work progressed in Medical Appraisals and job planning.

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

7 Finance and Performance

7.1 Operational Performance Report

June Rogers, Executive Director of Operations, provided a presentation on the Operational Performance position as at March 2022. The year-end figures for Ophthalmology, Orthopaedic Surgery, Endoscopy, Colorectal Surgery, Cardiac Surgery, Cardiology and Radiology were noted.

In Ophthalmology, the Inpatient and Outpatient waiting lists increased since the last period due to staffing challenges in staffed theatres and reduction in outpatient clinics respectively. However, overall a graph was presented which depicted the positive growth in Ophthalmology activity from 951 procedures in 2011/12 to a total of 12,104 in 2021/22.

The Orthopaedic Team had faced challenges in relation to staff absence, ability to open the fifth Laminar Flow Theatre and with day zero patients lower than expected. However, they had also experienced successes, in particular, the Day of Surgery Admission (DOSA) rate had increased for a fourth month in a row, the number of 4 joint sessions increased and Enhanced monitoring equipment was being installed in 2 West rooms to increase in patient capacity.

Endoscopy continued to perform well against a challenging target. The cancellation rate decreased slightly in March 2022 from 10.8% to 10%. Covid related issues continued to drive the high cancellation rate.

General Surgery cancellations had increased significantly from 4.4% in February to 12.7% in March 2022 which was predominantly due to the high number of 'Did not Attend' (DNAs) and patients unfit for surgery on the day of presentation. June Rogers commended the work and

commitment of the General Surgery Team to get this excellent service 'off the ground' and for positive service and team development with positive patient outcomes and experience.

The Cardiac Surgery Inpatient Waiting Lists had continued to be impacted by the reduced Theatre capacity since September 2021 and priority continued to be ensuring urgent patients were treated in a timely manner. The Cardiac Surgery cancellation rate in March 2022 was 18.1%, an increase from 14.4% reported in January 2022. Robust multidisciplinary analysis of the causes of cancellation takes place on a weekly basis with active improvement plans.

It was reported that there were zero patients waiting over 12 weeks in Thoracic Surgery and all tracked patients from May 2020 to date had met the 31-day cancer target. This service was commended for excellent and consistent performance.

Cardiology continued to be a busy and under pressure service due to the increased number of urgent patients resulting in cancellation of elective lists, lab equipment breakdown, staff shortages and a spike in Covid related cancellations in March 2022. Urgent referrals had surpassed previous levels of a 50:50 split to a 65:35 split.

Radiology had faced significant workforce challenges due to short and long-term sickness and maternity leave in February and March 2022 however there were robust plans to address.

In relation to the current position, June Rogers highlighted the following key points:

- Exceptional team effort to achieve year end performance;
 - 83,459 in patients/diagnostic examinations against a plan of 76,815 equating to (8.6% over plan)
 - 76% of patients treated within 12 week TTG
 - Record year for transplant surgery (24 heart transplants)
- Plan to open 3.6 Ophthalmology theatres – 5 theatres operational;
- Promising start to FY 2022/23 with a plan to revisit planned activity at end of Q1 with a view to updating;
- Work towards exceeding the 2022/23 (RMP5) activity plan by 10-15%;
- Focus on further expansion of services/ accelerated opening of Phase 2;
- Risk around impact of Phase 2 breakthroughs into theatre.

Board Members commended June Rogers for her commitment and dedication over the years of service to NHS Golden Jubilee and also commended the Operational Teams for delivering such significant activity. Board Members commended Anne Marie Cavanagh and Mark MacGregor for their personal and team contribution. Thanks noted to Executive team and all staff. A query was raised in relation to the number of patients not fit for surgery and how this could be improved. June Rogers responded that General Surgery has always had a high number of cancellations due to Pre-Operative assessments being carried out by the referring Board. Pre-Operative assessments are now carried out within NHSGJ and the same would happen with Endoscopy. A Waiting List Coordinator was being recruited and this would allow appropriate management of the waiting list and the ability to backfill patients.

The Board approved the Operational Performance Report.

7.2 Finance Report

Colin Neil presented the Month 12 financial position as at 31 March 2022. Month 12 noted a surplus of £0.18m for core revenue and income which would be subject to year-end audit. The efficiency savings target was noted as £4.044m and the total identified to date was £3.004m, with £1.127m recurring and £1.876m non-recurring. Leaving a balance of £1.040m

which was covered by Remobilisation Plan (RMP) 4 funding. The non-core and Capital position were noted as breakeven.

Income had been managed to a break-even position, with corresponding gains being converted to finance schemes for issue to related pressures. The main gains in income included Cardiology and Thoracic Non-WoS activity, SNRRS Income performance, and NSD increases, with all having an impact on expenditure levels. The hotel position closed at break-even when incorporating the allocation within the Remobilisation Plan. All general income streams were in line with expectations.

Expenditure position reported an underspend of £108k. However, there were a number of offsetting variances to drive this year end outturn. Pays were £1.4m underspent and non-pay (£1.3m) overspent. The key pressure areas were Medical Staffing & Surgical Supplies.

In relation to RMP funding, the Board was informed that the allocation from Scottish Government amounted to £11.976m for the financial year. Efficiency Savings coverage amounted to £1.040m for the financial year, coverage of Hotel and other income £0.46m were covered in full and total value in line with forecast provided earlier in the year and at the quarter three position.

The Access Funding position remained unchanged from Month 10. Adjustments to marginal costs were actioned at the financial year end based on year end activity to ensure a balance position on these funds and associated marginal costs.

The current Efficiency Savings position identified cash releasing schemes totalling £3.004m. This position had reduced the gap against the overall £4.044m Board's target from early year expectations. Further review of the full year effect (FYE) position and budgetary reviews would result in a FYE carry forward of c£1.3m unachieved savings, which currently for part of the 2022/23 Financial Plan.

The baseline core capital allocation for the Board was noted as £2.691m, and the original FBC funding associated with the elective centres was circa £32m. The Board had previously agreed with Scottish Government (SG) that the spend for phase two in the current year was to decrease to an initial value of £22m given early forecasts. However detailed review of the spend for phase two had been undertaken over recent months and an additional £4.930m of spend had been identified that related to committed work in the current financial year, therefore, the spend for Phase two in 2021/22 was reported at £26.930m. This alteration would result in the phasing being adjusted for 2022/23 as the overall value remained the same for the capital project.

The core capital position had significant additional investment in year. Following submissions to SG for additional funding for capital, the Board had received an additional £9.617m of core capital funding therefore the core capital funding in year is now £12.308m. The additional funding included £1.57m for Olympus scopes, £138k for additional ultrasounds for the NHS Scotland Academy (NHSSA) and £1.5m for the replacement of an MRI and additional infrastructure within estates including urgent lift replacement. Colin Neil commended the eHealth, Estates and Procurement Teams for exploring and progressing the opportunities for additional capital investment.

NHSGJ has therefore secured and actioned spend against significant capital investment and in doing so had met its Capital Resource Limit (CRL). The annual valuation of land and buildings had been actioned and the final report was awaited for annual accounts inclusion.

Colin Neil concluded the presentation and reflected that he was pleased to note that CRL and RRL had been met given the statutory obligations related to those. It was welcomed that the Efficiency Savings carry forward to 2022/23 had been reduced to a reasonable level.

The Board commended Colin Neil, the Executive team and the wider financial team for the reported year-end financial position.

The Board approved the Finance Report.

7.3 Finance and Performance Committee Update

Stephen McAllister, Chair of Finance and Performance Committee, provided an overview of the salient points discussed at the meeting held on 3 May 2022.

The Committee commended the year-end performance figures and noted a good starting position for 2022/23.

The Committee extended thanks to Gareth Adkins, Carole Anderson and the wider Performance and Planning Team for their continued commitment to various projects across NHS Golden Jubilee and for the quality of the reports produced.

The Committee had an in-depth discussion on the urgent, elective Cardiology split and welcomed that a recovery plan would be presented at a future Committee meeting.

The Committee approved the Finance and Performance Committee Workplan for 2022/23. The Committee approved, in principle, the Capital Plan. The final plan would be presented at the July Committee meeting.

The Board noted the Finance and Performance Committee Update.

7.4 Senior Responsible Owner Role (Expansion)

Jann Gardner advised the Board that the Phase 1 and Phase 2 Expansion Capital Programmes required the position within the Board of a Senior Responsible Owner (SRO), which had been fulfilled by the Executive Director of Operations and Deputy Chief Executive, June Rogers.

The Phase 1 element of the project had been completed, with Phase 2 in active implementation. Due to the retirement of June Rogers, the Board were asked to note that the SRO for the project would pass to the Interim Deputy Chief Executive/Director of Finance, Colin Neil from 25 May 2022.

It was noted that the Expansion Programme would feature at future Board Seminars and colleagues from NHS Assure and Kier would be invited to these discussions as had been the case for Phase 1.

The Board approved the recommendation that, with effect from 25 May 2022, Colin Neil, Interim Deputy Chief Executive/Director of Finance, would formally take on SRO responsibility for the Phase 2 Expansion Programme. It was noted that any further required changes would be reported to the Board for approval.

7.5 Audit and Risk Committee Update

Karen Kelly, Chair of Audit and Risk Committee, provided an overview of the salient points discussed at the meeting held on 20 April 2022.

The Committee were presented with the Draft Annual Reports for the Board Committees. The Audit & Risk Committee will receive the reports for final approval at the meeting on 16th

June 2022 ahead of the consideration, by the Board of NHS Golden Jubilee, of the final accounts for financial year 2021/22 on June 30th 2022.

The Committee were presented with the Draft Governance Statement for consideration. The Committee would receive a further report at the meeting in June for inclusion in the final accounts.

The Committee received assurance that the timetable for presentation, scrutiny and comment on the annual accounts and financial statements remain on schedule.

The Board noted the Audit and Risk Committee Update.

8 Strategic Portfolio Governance

8.1 Hospital Expansion Programme Update

The Board received an update from June Rogers on progress with Expansion Phase 2 – Surgical Centre and were presented with the following key information:

- Work progressing well in line with timeline plan and budget;
- Assurance Review Meetings now concluded with significant progress made on the Stage 3 action plan. This has been issued to NHS Scotland Assure for review and comment;
- Stage 4 Assurance Review commenced on 25 April 2022;
- Significant amount of critical work ongoing. Programme Plans had been shared and would be subject to regular scrutiny;
- The HAI SCRIBE (Construction) for the Level 1 breakthroughs was completed and hoardings were now in place;

The Board welcomed an opportunity for Non-Executive Board Members to visit the Phase 2 site.

| Action No. | Action | Action by | Status |
|---------------|---|---|--------|
| Bpu/220524/04 | <p>Hospital Expansion Programme Update</p> <p>Consideration to be given to holding a Board Seminar focused on Phase 2 with a visit to the site, with NHS Assure and Kier invited, and reported to Board when arranged.</p> | Board Secretary/Executive Director of Finance | New |

The Board noted the Hospital Expansion Programme Update.

8.2 Strategic Portfolio Governance Committee Update

Linda Semple, Chair of the Strategic Portfolio Governance Committee, highlighted the matters arising at the Committee held on 5 May 2022.

Linda Semple reflected that the Committee received regular comprehensive presentations and the details of which could be found in the minutes from the meeting. The Committee take a very clear view on the assurance process on various programmes of activities. Linda Semple recommended that the Non-Executives who are not members of the Committee should attend a Committee meeting if they could.

The Committee noted that reporting on programmes of work is robust.

The Committee noted the Radiology Strategy Update and noted that this would become a feature of the wider strategic portfolio.

The Committee was assured with the progress reported on the work of the Centre for Sustainable Delivery.

| Action No. | Action | Action by | Status |
|---------------|---|-----------------|--------|
| Bpu/220524/05 | Strategic Portfolio Governance Committee Update Board Secretary to circulate dates of Strategic Portfolio Governance Committee to all NEDs. | Board Secretary | New |

The Board noted the Strategic Portfolio Governance Committee Update.

9 Corporate Governance

9.1 Cyber Security

Stuart Graham and Sharon Stott joined the meeting.

Sharon Scott provided an overview on Information Governance, noting the following key points:

- Legally obliged to ensure when processing data the Board is required to ensure applying appropriate information governance;
- There had been an increased use of third party apps such as WhatsApp and Gmail within the Board;
- The sharing of sensitive and identifiable information being shared across these platforms could result in data loss;
- The associated risks with unsupported data processing were noted as:
 - Data controller has lost control of the data;
 - Messages can be hacked;
 - Non-compliance with NIS, UKGDPR, DPA2018;
 - Reputational damage;
 - Loss of trust from patients and families; and
 - Enforcement Notice and Monetary Penalty.
- Approved methods are NHS email such as @gjn.scot.nhs or MS Teams. NHS Scotland has deemed these to be safer methods of communication. Contracts are in place and risk assessments and sharing agreements to support their use are also in place.
- The team continue to update the Risk Register, drafting robust guidance for staff which is shared through the Information Governance Group (IGG) and most importantly educating staff ensuring they have all the information needed.

Board Members had a short discussion. Stuart Graham advised that MS Teams had been developed to allow almost the same functionality as WhatsApp. Stuart Graham reflected that there was an aspiration to develop the Microsoft Office 365 Training incorporating best practice from organisations like NHS National Education Scotland.

A query was raised in relation to the controls on the apps staff can download on NHS devices. Sharon Scott responded that there was technical wraparound in place to prevent the download of unsupported apps on Board devices. Unsupported apps on MS Teams have also been disabled until these are appropriately risk assessed before being deployed for the end user to access. There is a reliance on education and training, making staff aware of the

risks associated with the use of these unsupported apps to enable them to make better educated decisions when processing personal identifiable and special category data.

The Board noted the Cyber Security Update.

Stuart Graham and Sharon Stott left the meeting.

| Action No. | Action | Action by | Status |
|---------------|---|------------|--------|
| Bpu/220524/06 | <p>Cyber Security</p> <p>Update to be provided at next board meeting on plans to refresh education and training for staff to improve awareness of cyber security risks associated with unsupported apps and best practice including using approved apps such as MS Teams</p> | Colin Neil | New |

9.2 Board Risk Register

The Board were presented with the Board Risk Register, which had been discussed at Committee meetings and endorsed at the Audit and Risk Committee meeting on 20 April 2022.

Colin Neil highlighted that a new risk had been added in relation to eHealth Resources. The Audit and Risk Committee also supported the removal of risk S12 EU Withdrawal from the risk register. Colin Neil added that the format of the Risk Register was being reviewed.

The Board noted the Board Risk Register.

9.3 NHS Golden Jubilee Code of Conduct

The Board were presented with the NHS Golden Jubilee Code of Conduct for approval. The Board Secretary had previously circulated to Board Members a copy of the Model Code of Conduct for Devolved Public Bodies, subsequent to approval of the Model Code by the Scottish Parliament in December 2021.

Following the approval of the Model Code, the Board Secretaries Group, together with the Corporate Governance Steering Committee within NHS Scotland and the Standards Commission, worked on production of a “Once for Scotland” Code for each NHS Board.

All NHS Boards are being asked, by 16 June 2022, to approve a Code of Conduct on the basis of the “Once for Scotland” approach. The proposed NHS Golden Jubilee Code of Conduct was included as Appendix 1 of Paper 9.3.

Gerard Gardiner, Board Secretary, noted that revised guidance from the Standards Commission had also been published, reflecting comments provided by the Board Secretaries Group and the Corporate Governance Steering Committee. This Guidance, together with the NHS Golden Jubilee Code of Conduct had been placed in the Board Development folder on Admin Control.

It was recommended that for accessibility reasons the underlining on page two of the Code of Conduct should be revised and the final version circulated to Board Members.

The Board approved the NHS Golden Jubilee Code of Conduct subject to the highlighted recommendations.

| Action No. | Action | Action by | Status |
|---------------|---|--------------------|--------|
| Bpu/220524/07 | Code of Conduct Revise Code of Conduct for accessibility purposes and circulate final version to Board Members. | Board Secretary | New |

9.4 Redress Scheme for Survivors of Historical Child Abuse

The Board Secretary reminded those present that the Board had approved, at its meeting of 30 March 2022, the involvement of NHS Golden Jubilee in the Redress Scheme for Survivors of Historical Child Abuse.

Scottish Government had, on 7 May 2022, written to the Board Chief Executives Group to advise of practical formalities required of each Board to permit their inclusion in the public list of contributing bodies. These requirements were that Boards' confirmed the extent of their initial financial contribution to the scheme and that they publicised their participation on their website. NHSGJs requirements have been discharged.

Colin Neil reminded Board Members that, as reported at 30 March 2022 Board meeting, the financial requirement for NHS GJ was 0.01% for every £100k which would equate to £10 therefore the financial risk for NHSGJ was limited.

The Board noted the Redress Scheme for Survivors of Historical Child Abuse update.

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 3 March 2022.

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 3 March 2022.

10.3 Finance and Performance Committee Approved Minutes

The Board noted the Finance and Performance Committee approved minutes for the meeting held on 8 March 2022.

10.4 Strategic Portfolio Governance Committee Approved Minutes

The Board noted the Strategic Portfolio Governance Committee approved minutes for the meeting held on 10 March 2022.

10.5 Audit and Risk Committee Approved Minutes

The Board noted the Strategic Portfolio Governance Committee approved minutes for the meeting held on 1 March 2022.

11 Any Other Competent Business

Marcella Boyle, Chair of Volunteers Forum, highlighted that Volunteers week would take place between 1 and 7 June 2022 and a virtual Volunteer session had been scheduled for 8 June 2022. Board Members were invited to attend this if they were available.

12 Date and Time of Next Meeting

The NHSGJ Board Extraordinary Annual Accounts is scheduled for Thursday 30 June 2022 at 11am and the next scheduled meeting of the NHS GJ Board will be Thursday 28 July 2022 at 10am.