****Approved Minutes

**Strategic Portfolio Governance Committee**

25 October 2022, 1330 - 1600

Via MS Teams

**Members**

Stephen McAllister Non-Executive Director (Chair)

Anne Marie Cavanagh Director of Nursing & AHPs

Carolynne O’Connor Deputy Chief Executive, Director of Operations

Dr Mark MacGregor Medical Director

Gareth Adkins Director of Quality, Innovation and People

Graham Stewart Interim Director of Finance

Jane Christie-Flight Employee Director

Morag Brown Non-Executive Director

Steven Wallace Non-Executive Director

**In Attendance**

Carole Anderson Associate Director of Quality, Performance, Planning and Programmes

Gerard Gardiner Head of Corporate Governance & Board Secretary

Gordon James Deputy Chief Operating Officer, Performance and Delivery, Scottish Government (observer)

John Scott Director of Facilities and Capital Projects (agenda item 6.2)

Katie Cuthbertson National Director, Centre for Sustainable Delivery (agenda item 6.3)

Kevin Kelman Director, NHS Scotland Academy (agenda item 6.1)

Rory Mackenzie National Associate Clinical Director, Centre for Sustainable Delivery (agenda item 6.3)

Susan Douglas-Scott CBE Board Chair

**Minutes**

Christine Nelson Personal Assistant

1. **Chairs Introductory Remarks**

Stephen McAllister opened the meeting and thanked those present for joining.

**2 Well-being Pause**

Stephen McAllister confirmed that the Committee had taken time before the start of the meeting for this purpose.

**3 Apologies**

Members

Linda Semple Non-Executive Director *(Chair)*

Professor Jann Gardner Chief Executive

**4 Declarations of interest**

 There were no further declarations of interest.

1. **Updates from the Meeting Held on 1 September 2022**

**5.1 Unapproved Minutes of Last Meeting**

The minutes of the meeting held on 1 September 2022 were approved as an accurate record of the meeting.

**5.2 Action Log**

 All actions from the previous meeting were agreed as complete.

* 1. **Matters Arising**

There were no matters arising from the last meeting.

1. **Strategic Updates**

**6.1 NHS Scotland Academy (NHSSA) Update**

 Kevin Kelman presented an update on the NHSSA, highlighting the following areas within the National Workforce Programmes:

* Clinical Skills for Pharmacy: 4 training days per month had been scheduled to the end of the year, providing a total of 344 places to date.
* Preparing for Work in Health & Social Care: Over 1,837 learners had used this resource from territorial Health Boards and Social Care providers.
* Observed Structured Clinical Examination (OSCE): 127 learners had benefitted from the monthly workshops to date.
* National Endoscopy Training Programme: Continue to work towards Joint Advisory Group (JAG) accredited training centres.

Kevin Kelman provided an overview of the programmes being developed, including National Treatment Centres “NTCs”, Assistant Practitioners for Perioperative practice, Bronchoscopy, Cataracts, Biomedical Sciences, Endoscopic Vein Harvesting and an accelerated workforce programme for decontamination roles.

Jane Christie Flight asked how many learners were required for courses to be viable. Kevin Kelman responded that NTCs could have up to 12 and places could be offered to all Boards, not just NTCs. The current difficulty was Boards being able to release staff to attend the training.

Kevin Kelman advised of the potential for mobile OSCE Centres being set up by the Academy. Gordon James suggested an accredited centre could be set up in Scotland, out-with the NTC’s as, while crucial to national ambitions regarding planned care, they only represented 15% of capacity for elective procedures in Scotland.

Stephen McAllister asked who funds community pharmacists, operating in the private sector, to attend the pharmacy training. Kevin Kelman confirmed this was funded by Scottish Government through NHS Education Services (NES).

Kevin Kelman highlighted the portfolio report which provided an update on all projects.

The Committee noted the update provided for the NHSSA and thanked Kevin Kelman for joining the meeting.

**6.2 NHS Golden Jubilee (GJ) Strategic Updates**

**6.2.1 NHS GJ Strategic Planning Update**

Gareth Adkins referred the Committee to the Strategic Programmes Summary Report, explaining that reporting on strategic programmes continued to evolve. Gareth Adkins highlighted the structure outlined on page 2 of the Report and highlighted that tracking and reporting of the digital portfolio was the subject of discussions between planning and performance and digital and e-health departments.

 Gareth Adkins shared the aspiration to include more detailed milestones and financial planning as well as further work on business cases in future reports.

 The key elements for the Committee to note were:

* Progression by the NES division to accelerate the opening of services in Phase 2 Surgical Centre.
* Establishment of work-streams to deliver the nine sub-strategies of the Orthopaedic Strategy 2022-2025 including revision and soft tissue.
* The evolution of the Radiology programme
* In Heart, Lung and Diagnostics Division Dashboard, repatriation of ICD activity to referring hospitals whilst retaining CRT activity was flagged as amber due to the service and funding model awaiting approval by the Regional West of Scotland Strategic Group.

Carole Anderson reported that the portfolio reporting was maturing and that phasing of each programme and ensuring understanding interdependences on cost and other programmes were being considered.

Gareth Adkins stated that the Director of Finance would discuss the governance around capital/estates including the site masterplan and this would be included in portfolio reporting moving forward.

The Committee noted the Strategic Planning update.

**6.2.2 NHS GJ Expansion/National Treatment Centre (NTC) Update**

John Scott provided an update on the Hospital Expansion Programme including the following:

* The outstanding defects for Phase 1 would not be signed off by the end of October 2022 but were being resolved.
* Phase 1 was shortlisted for the Building Better Healthcare and NHS Assure Design Excellence Awards.
* An update on Phase 2 Surgical Centre works on site and that the lifts and external doors were now installed.
* Most of the materials impacted by supply issues were now on site.
* An alternative design had been identified to overcome the supply issue of fan coil units.
* Keir were now working in the Access to L2 Endoscopy Decontamination Area.
* Weekly engagement continued with theatre teams around noise and vibration levels of work being carried out.
* NHS Scotland Assure had supported Phase 2 progression to the next stage although acknowledged the key issues. An action plan had been developed on the remaining 69 relatively low category issues.
* Commissioning of the key stage review was expected early 2023. Regular meetings with the assurance team were taking place.

Morag Brown asked what feedback had been received from colleagues regarding disruption and if interim arrangements had been sourced. Morag Brown noted recent discussion at the Clinical Governance Committee at which staff had reported inconveniences associated with the expansion. John Scott responded that regular meetings with departments affected by changes had been held and would continue to be held, with issues escalated as appropriate.

Gareth Adkins gave reassurance that the specific issue raised by orthopedics, and which Morag Brown had queried, was mostly due to staff adapting to changes. In addition meeting space across the organisation was being looked at with a view to providing more capacity.

Morag Brown recognised the pinch points and different perspectives among stakeholders affected by the expansion and added it was good to have a process to discuss and identify solutions.

Susan Douglas-Scott highlighted the importance of considering staff wellbeing and that meetings with Orthopaedic staff and Jann Gardner were taking place to ensure staff were kept updated on changes taking place.

Gordon James asked if a full project evaluation would be completed for phase 1 and phase 2. John Scott confirmed this was planned for early 2023 for phase 1 when it reached working at full capacity and the remaining issues are resolved.

Gareth Adkins confirmed the plan to look at benefits realisation for all programmes of work.

Carolynne O’Connor confirmed she will chair the State of Readiness Working Group for the expansion. This Group is leading on mobilisation/operational preparedness to move into the new build. It was confirmed that reports from this Group would follow to the Committee as relevant.

Susan Douglas Scott confirmed that principal governance oversight of the State of Readiness for the expansion would be via the Finance & Performance Committee.

The Committee noted the Expansion update. John Scott left the meeting.

**6.3 Centre for Sustainable Delivery (CfSD) Updates**

 Katie Cuthbertson and Rory Mackenzie joined the meeting to provide an update on behalf of CfSD.

 Katie Cuthbertson highlighted the recent key meetings held including Strategy Board, Cabinet Secretary and Heat map meetings with Boards.

 The Boards have been keen to work with CfSD on their heat maps and identifying productive opportunities.

 Katie Cuthbertson reported that the National Elective Co-ordination Unit (NECU) work continued and shared some data on progress to date on validation, outpatient and surgical capacity.

 Katie Cuthbertson outlined the planned next steps for the productivity bundle to focus on productive opportunities in a more targeted way including theatre utilisation, looking at infrastructure to implement theatre productivity, virtual pre-operative assessment and workforce models, shorter stay and day cases as well as an enhanced recovery model. Access to relevant data will be important to monitor impact on productivity.

 Katie Cuthbertson reported that the University of Strathclyde independent evaluation interim report on the Rapid Cancer Diagnostic Service (RCDS) (formerly Cancer Diagnostic Centres) was due to be published on 31 October 2022. Two new RCDS sites for Lanarkshire and Borders had been announced by the First Minister.

 Katie Cuthbertson provided an overview of the Accelerated National Innovation Adoption (ANIA) pathway, the Innovation Design Authority Stage Gates Decisions and highlighted the risk that ANIA workforce funding was non recurrent resulting in a potential difficulty in attracting applicants.

 Rory Mackenzie highlighted digital dermatology as an example of collaborative working in developing a business case and added that there had been good engagement with the clinical community.

 Susan Douglas-Scott commended the work being carried out, commending the ANIA assurance model as very robust and noted the importance of effective communication of success stories to drive engagement with other Boards.

 Rory Mackenzie responded that engagement was carried out early with enthusiasm from Primary Care as the value for patients was evident.

 Steven Wallace asked if the waiting list data was static or if patients continued to drop in. Katie Cuthbertson acknowledged that pressures were significant but validation was helping to reduce numbers and create capacity.

 Gordon James commented that waiting lists tended to fluctuate slightly but the number of longest waiting patients was declining.

The Committee noted the CfSD assurance statement for onward reporting to NHS GJ Board and the Annual Report for FY 2021/2022.

Katie Cuthbertson explained that the Draft Annual Plan for 2022/2023 set out the strategic priorities for CfSD with a focus on the Clinical Lead model, Green theatres and Primary/Secondary Interface and that milestones were being tracked for all areas.

The Committee noted the CfSD Draft Annual Plan for 2022/2023.

Katie Cuthbertson presented the CfSD Purpose, Vision and Mission Statements for the Committee’s information.

Morag Brown commended CfSD on progress made with both the work and reporting and that the work was providing reasons to be optimistic and hopeful for the future.

Katie Cuthbertson thanked Morag Brown and agreed to feedback comments to CfSD staff.

Katie Cuthbertson highlighted the national conference scheduled for 23rd November 2022 to discuss how hope could be put back into the system and encourage Boards to identify what can be put in place immediately.

Susan Douglas-Scott reiterated Morag Brown’s comment and was encouraged to see results and changes that can be made in the system.

The Committee noted the CfSD Programme Update.

**7 Key Issues for Reporting to NHSGJ Board**

The Committee agreed the items to be included in the update to the Board should incorporate the following:

* The Committee noted the work of the NHSSA, acknowledging the breadth of access across the country and industry sectors.
* The Committee noted the expansion programme update, taking cognisance of the feelings of colleagues regarding the disruption and noted a state of readiness report will be developed, principally for FPC, and reporting to SPGC as required.
* The Committee welcomed the GJ portfolio update, noting it was assured as to the progress reported across all programmes.
* The Committee noted the progress and breadth of work of CfSD with the aim of putting hope back into the system and approved the CfSD assurance statement.

**8 Any Other Competent Business**

Due to the maturing of programmes reported to the Committee, Gareth Adkins agreed to discuss the duration of future meetings with Linda Semple.

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| **Action No.** | **Action** | **Owner** | **Target date** |
| SPGC221025/01 | Discuss duration of future SPGC meetings with Linda Semple | GA | 17.01.23 |

**9 Date and Time of Next Meeting**

Tuesday 17 January 2023, 1330 – 1600.