

## Approved Minutes

**Meeting: NHS Golden Jubilee Public Board Meeting**

**Date: Thursday 14 December 2023, 10:00**

**Venue: Level 5 East Boardroom/MS Teams**

### Members

Susan Douglas-Scott CBE	Board Chair
Callum Blackburn	Non-Executive Director
Gordon James	Chief Executive
Jane Christie-Flight	Employee Director/Non-Executive Director
Karen Kelly	Non-Executive Director
Linda Semple	Non-Executive Director (Vice Chair)
Mark MacGregor	Medical Director
Morag Brown (via MS Teams)	Non-Executive Director
Rob Moore	Non-Executive Director
Stephen McAllister	Non-Executive Director

### In Attendance

Anne Marie Cavanagh	Director of Nursing
Carole Anderson	Director of Transformation, Strategy, Planning and Performance
Carolynne O'Connor	Deputy Chief Executive/Director of Operations
Nicki Hamer	Head of Corporate Governance and Board Secretary
Jenny Pope	Interim Director of Workforce
Sandie Scott (via MS Teams)	Director of Strategic Communications and Stakeholder Relations
Graham Stewart	Deputy Director of Finance

### Observer

Emma MacLaren (via MS Teams) NHS Scotland Management Trainee

### Minutes

Christine Nelson Deputy Head of Corporate Governance

## 1 Opening Remarks

### 1.1 Chair's Introductory Remarks

Susan Douglas-Scott welcomed everyone to the Board meeting and all participated in a short wellbeing discussion.

Susan Douglas-Scott advised that December was the 'Gift of Sight Month' which had been designed to help and raise awareness regarding the importance of eye health.

On behalf of the Board, Susan Douglas-Scott expressed gratitude and thanks to all NHS GJ staff for their dedication at this time of year.

Susan Douglas-Scott advised that Graham Stewart, Deputy Director of Finance was in attendance at the meeting to deputise for Michael Breen.

Susan Douglas-Scott welcomed Emma MacLaren, NHS Scotland Management Trainee who had joined the meeting on Teams to observe.

Susan Douglas-Scott shared some highlights since the last Board meeting which included:

- A letter of thanks was received from the Trustee of Clan Macfie Trust who held their clan event in NHS GJ Conference Hotel.
- Susan Douglas-Scott attended the Orthopaedic Continuing Medical Education (CME) Day. The Board were pleased to note the orthopaedic teams enthusiasm for the move into the new theatres in Phase 2 Expansion.
- Interviews had been held for the Director of People and Culture, with an external candidate being offered the position.
- On 1 December Gordon James and Susan Douglas-Scott met with Kasra Shaikhrezai, the new Clinical Director for Cardiac Services which included a tour of the department and observing a cardiac procedure.
- Rob Moore and Callum Blackburn attended the HBE Senior Leadership Development Spotlight Sessions. Rob Moore commented that the sessions were beneficial and added that NHS GJ was in a good position.
- Callum Blackburn advised that he and Rob Moore had attended Cyber Resilience Training.

## 1.2 Apologies

Michael Breen	Director of Finance
Marcella Boyle	Non-Executive Director

## 1.3 Declarations of Interest

There were no changes to the standing declarations of interest.

## 2 Chief Executive Update

Gordon James reported the following highlights:

- The NHS GJ robotic programme for colorectal procedures had now treated over 230 patients since it began during the COVID-19 pandemic, giving patients more precise procedures and less time in hospital.
- The Board Annual Accounts 2022/23 were laid before Parliament and had been published on the NHS GJ website.
- The Centre for Sustainable Delivery (CfSD) Earlier Cancer Diagnosis team published NHS Scotland's Optimal Head and Neck Cancer Diagnostic Pathway.
- NHS GJ completed the Blueprint for Good Governance Self-Assessment survey and the results of this survey would be discussed at the Board Development Session on 9 January 2024.
- The Golden Jubilee Conference Hotel (GJCH) achieved the prestigious ECOsmart Gold accreditation. The Hotel was one of only two Scottish venues awarded the Gold accreditation and was commended for their responsible business practices, innovative sustainability solutions and ethical values.
- Golfer Hugh Galloway and his friends raised £3,600 after life-saving aortic valve replacement surgery at NHS GJ.

- High Dependency Unit (HDU) nurse Chris O'Meara shared his story of being supported to progress from working in catering to caring for critically ill patients during Scottish Careers Week. Chris was encouraged to become a Healthcare Support Worker by a ward manager and went on to complete the Open University (OU) First Steps to Nursing course.
- Team Jubilee had once again helped bring the spirit of Christmas to the local community by donating a mixture of 45 gifts and additional jackets, reverse advent calendars, toys, books, gifts and toiletries to local children through Glasgow's annual Spirit of Christmas campaign.
- The transplant patients Christmas lunch returned for the first time since before the pandemic and was attended by more than 70 patients and their families.
- Chris Gee has been appointed to the Associate Medical Director post and Ken McKinley has been appointed as Clinical Director.
- We welcomed Adam Haahr (Assistant Director for Efficiency and Sustainability) and Kevin Daly (Head of Financial Accounting and Governance) to the organisation.
- Sandie Scott has been appointed Deputy Lieutenant of Dunbartonshire. The Board passed on their congratulations.
- Professor Hany Eteiba had been elected as the next President of the Royal College of Physicians and Surgeons of Glasgow. The Board passed on their congratulations.
- Kevin Kelman has been awarded a visiting professorship by the University of Strathclyde's Business School. The Board passed on their congratulations.
- Gordon James attended the CSO 50<sup>th</sup> Anniversary Dinner at the University of Glasgow, the launch of Scan for Safety and Scotland's Health Research, an Innovation Conference at Queen Elizabeth University Hospital (QEUH) and the ANIA Partners Event.
- NHS GJ had retained their Gold Award status for the 'Investors in Young People'.
- The local MP and MSP visited on 1 December. Discussions included the District Heating Project, Phase 2 and winter planning. They also visited the newly expanded Orthopaedic Outpatients department.
- A meeting was held with the Chief Executive of West Dunbartonshire Council (WDC). Discussions included District Heating, Community Planning membership and a joint community event in 2024.

Gordon James advised he had attended the following:

- NHS Innovators Dinner at the University of Strathclyde.
- iMatter Engagement Sessions with the Eye Centre, Orthopaedic Fast Flow Ward and Orthopaedic Ward 4.
- Internal Department meet and greet sessions with the Booking Office, Prevention and Control of Infection, Cardiology MDT and the Cardiac Department.

Gordon James advised of the following Upcoming Events:

- Outcomes from the Medical/Service Planning Sessions and the Strategic Planning Sessions
- Board sessions on the Blueprint and the Annual Delivery Plan/Medium Term Plan planning.

- Children from two local schools would be visiting to sing Christmas carols.
- Final arrangements were being made to decide the winners of the art competition for local schools and families of Team Jubilee staff.

### **3 Updates from last meeting**

#### **3.1 Unapproved minutes from 28 September 2023 Board Meeting**

The following amendments were noted to the minutes of the meeting held on 28 September 2023:

- Page 2: Callum Blackburn did not attend the Scottish Speak Up Week virtual sessions so this will be removed from the minute.
- Page 5: Item 4.3. The Quarter Two Whistleblowing report was presented, not Quarter One.
- Page 7, Item 5.3. Continuing Education Students to be changed to Newly Qualified Practitioners.

The Board approved the minutes of the 28 September 2023 subject to the noted amendments being made.

#### **3.2 Board Action Log**

There were no outstanding actions.

#### **3.3 Matters Arising**

There were no matters arising.

### **4 Clinical Governance**

#### **4.1 Clinical Governance Report**

Anne Marie Cavanagh reported there were two complaints received in August 2023 which had been responded to within required timescales. There had been no whistleblowing concerns reported.

With regard to Health Associated Infections, there had been one Gram Negative/E.coli Bacteraemia (ECB) case reported. Year to date there had been four Staph Aureus Bacteraemia (SABs), one Clostridiodes Difficile (C.Diff) and one Escherichia coli bacteraemia (ECB). Hand Hygiene status remained at 97%.

Anne Marie Cavanagh reported that there had been one Surgical Site Infection (SSI) in Cardiac Surgery and one in Orthopaedic Surgery confirmed in August. The Vaccination programme was underway with Covid19 community rates and transmission continuing to be monitored closed.

Anne Marie Cavanagh advised that Health Improvement Scotland had carried out an unannounced inspection on 21 and 22 November 2023, with a focus on safe care

and staffing. The first report was expected on 24 January 2024 to the Board which would require a response within one week.

The Board approved the Clinical Governance Report.

## **4.2 Clinical Governance Committee Update**

Morag Brown provided an overview of the Board update report from the Clinical Governance Committee (CGC) meeting held on 14 November 2023.

CGC welcomed the progress the Clinical Governance Team had made on Significant Adverse Events (SAEs) and requested a report was provided for the next meeting giving projected targets for completing the backlog of SAEs.

The Committee noted the following business:

- Improved services for patients and increased productivity on the Scottish Adult Congenital Cardiac Service (SACCS) Magnetic Resonance Imaging (MRI) waiting list.
- A governance review of Orthopaedics which showed improvement in infection and falls rates.
- X-Ray issues continued with solutions being sought as part of the Digital Strategy.
- A patient story which highlighted the challenges to patients receiving surgery away from home.

Mark MacGregor highlighted that the X-Ray issues would improve when Trakcare and Picture Archiving Communication System (PACS) were implemented. In addition Chris Rush, had been recruited as an Imager who was highly experienced in MRI and was working on system improvements.

The Board noted the Clinical Governance Committee Update.

## **4.3 Whistleblowing Quarter Two Report**

Anne Marie Cavanagh confirmed there had been no new Whistleblowing matters escalated and that work to increase awareness of the whistleblowing process and standards continued.

Callum Blackburn provided assurance that the Speak Up work would continue and highlighted the potential for confusion around the Scottish process in response to the news coverage of the Countess of Chester Hospital case in England.

Susan Douglas-Scott highlighted the importance of monitoring the effectiveness of the whistleblowing process and organisational culture. The Board noted that Callum Blackburn, Jenny Pope and Jane Christie-Flight met regularly with the Confidential Contacts and that other methods of reporting concerns were taken into account, for example iMatter and through the Union Representative network. The Performance and Planning team also monitored the data regularly.

Gordon James advised that the reporting would be considered as part of the Integrated Performance Report (IPR) review.

The Board agreed that a regular composite report, perhaps annually, would be beneficial to the Board, to include narrative analysis. Gordon James agreed to discuss this further with the Executive Leadership Team and bring a proposal to the next Board meeting.

The Board approved the Whistleblowing Quarter Two Report.

Action No:	Action	Action By
Bpu/231214/01	Discuss with ELT the potential to provide a regular Feedback composite report to include narrative analysis and present a proposal at the next Board meeting.	Gordon James

## 5 Staff Governance

### 5.1 Staff Governance Report

Jenny Pope reported that the Sickness absence rate for September 2023 was 6% and that work continued to keep the rate low. Anxiety/Stress/Depression and other psychiatric illnesses remained the highest reason for absence at 20.9%, although this had seen a reduction of 4.3%.

Turnover was reported as within control limits at 0.36% in September, a reduction from 10.8% from the previous 12 months.

Agenda for Change appraisals were reported as 65% complete with work ongoing to support improvement.

At 6 October 2023, 4 out of 159 medical appraisals for 2023/24 had been completed. Mark MacGregor reported that as at today's date, 123/128 job plans had been completed.

The Board approved the Staff Governance Report.

### 5.2 Staff Governance and Person Centred Committee Update

Rob Moore provided an overview of the Staff Governance and Person Centred Committee (SGPCC) meeting held on 15 November 2023.

SGPCC welcomed the Staff Turnover update report presented following a review of the turnover rates. A further update would be provided at the next meeting.

The Quarter Two Health and Safety Report advised there had been no adverse incidents or trends identified. SGPCC noted the implementation of updated training which linked to mental health and wellbeing.

SGPCC noted that improvement work was underway to raise compliance rates for Fire Safety Training and commended the improvement work underway for medical appraisal compliance.

The Draft Succession Planning Framework was noted with further updates to be provided to SGPCC.

SGPCC acknowledged the outstanding effort undertaken in general recruitment and for Phase 2 of the expansion.

The Strategic Risk Register, Whistleblowing Report, Integrated Performance Report (IPR), Staff Governance Monitoring Submission and Governance Meeting Dates were approved.

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

## 6 Finance and Performance

### 6.1 Operational Performance Report

Carolynne O'Connor presented the Operational Update for September 2023 which included the following:

#### Heart, Lung and Diagnostics (HLD)

- Heart and Lung were 6% behind plan, with a 1% improvement on the previous month. Cardiac was driving the deficit due to the anaesthetic workforce challenge and reduced bed capacity. Bed capacity had been increased with NHS GJ funding this internally.
- Radiology was just behind the Service Level Agreement (SLA) target but ahead on cardiac and GJ "internal" work.
- Challenges included a delay to implementation to the operational plan for delivery and a continued increase in the number of patients waiting over 78 weeks due to ongoing gaps in the anaesthetic and perfusion workforce and Cath Lab availability.
- Cardiothoracic activity was reported ahead of plan.
- Interventional Cardiology overall activity was 9% behind plan although a 1% improvement had been made since the last report. Weekend sessions were planned for Transcatheter Aortic Valve Implantation (TAVI) to improve activity and additional beds had been funded to support the Segment Elevation Myocardial Infarction (STEMI) 72 hour target.
- Electrophysiology (EP) activity was 5% behind activity. Plans were in place to reduce long waiting patients.
- TAVI was on track to achieve the 229 planned activity although referrals continued to out strip capacity.
- Seventeen transplants had been carried out at month 6 (22 year to date). The second National Services Division (NSD) pod opened on 13 November 2023. A Full Business Case (FBC) to support 35 transplants per annum was continuing through the governance process.
- Reduced activity was ongoing in Scottish Adult Congenital Cardiology Service (SACCS). The outcome report from a major review was awaited.
- A FBC to support £458k and 5.96 whole time equivalent (WTE) staff over 3 years was being processed through Governance Committees.

Karen Kelly highlighted that Thoracic continually performed well and asked if there was anything that could be implemented in the areas which were underperforming. Carolynne O'Connor responded that the Thoracic demand and capacity were

matched, adding that a sixth surgeon was now in place and a good multi-disciplinary approach had been implemented.

Mark MacGregor advised that the Thoracic team consisted of experienced workforce which included some very high calibre surgeons and highlighted that the lung cancer screening programme could potentially impact on activity with a potential increase of 25%.

### National Elective Services

- Ophthalmology reported 926 cataracts were carried out. The service was 3% ahead of year end plan and 100% of patients continued to be treated within 12 weeks. Lists of 8 patients or more had increased from 47% to 61% in September, using a double scrub model.
- Orthopaedic surgery reported 431 procedures carried out against a plan of 424. Year to date (YTD) rates were ahead of plan in all sub specialties. The Day of Surgery Admission (DOSA) rate was above 60% for the fifth consecutive month. The four joints per session rate continued to increase at 62.7% for September, an improvement of 15% on the previous reporting period. Discharge trajectories continued to exceed or meet targets. Inpatient waiting list reported activity of 1849, with 801 patients waiting over 52 weeks. This was as a result of 2023/24 allocations continuing to be for patients waiting over 104 weeks. The Orthopaedic Improvement Steering Group continued to monitor the improvements agreed at the Orthopaedic away day.
- A total of 813 Endoscopic scopes were carried out in September against a plan of 1107. The activity plan had been set when Phase 2 was due to open in September. A plan was in place to recover the activity plan. The team continued to focus on reducing cancellation rates and support NHS Grampian waiting lists with weekend sessions.
- A total of 167 General/Colorectal procedures were carried out against a target of 212, 11% behind year end plan. General Surgery activity was behind plan due to Heath Boards being unable to identify sufficient numbers of long wait day case patients. Measures had been put in place resulting in an increase in referrals. A trial was underway with NHS Lanarkshire and the National Elective Co-ordination Unit (NECU) to support the outpatient waiting list. A Theatre Improvement Group had been established to maximise use of theatre capacity with a focus on reducing the cancellation rates.

The Board requested that future Operational updates included a breakdown of which referrals were over the waiting time target when referred to NHS GJ and which were as a result of NHS GJ not meeting the required timescale. Carolynne O'Connor agreed to provide this information in the next report.

The Board approved the Operational Update.

Action No:	Action	Action By
Bpu/231214/02	Future Operational Updates to include a breakdown of referrals over the waiting time target at time of referral to NHS GJ and those	Carolynne O'Connor



	that were as a result of NJS GJ not meeting required timescales.	
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## 6.2 Financial Report as at 30 September 2023 (Month 6)

Graham Stewart presented the Month 6 Financial Report which included the following:

- The Board approved a 2023/24 breakeven Financial Plan which required c. -£6.66m of budget savings/in-year efficiencies by March 2024.
- A reviewed ledger structure had been implemented to improve reporting and drive improvements.
- £68.936m of core allocated funding had been released against an anticipated allocation of £137.872m for 2023/24. In year ring-fenced allocations were still to be agreed by Scottish Government (SG) in relation to pay increase costs.
- Other income of £46.529m equated to an over-recovery against budget of £44.751m by £1.777m. This was related to SLA's, Hotel income and other variances including a VAT rebate and SNRSS.
- Key Expenditure points at September 2023 included an overall overspend of -£1.994m made up of -£664k adverse pay costs and -£1.329k adverse non pay costs. Non pay costs were partly attributed to a requirement for more complex pharmacy items, over-performance on NSD contracts resulting in more surgical supplies being used and increased costs for utilities and clinical waste.
- The Financial Plan assumed c-£6.66m of budget savings/in-year efficiency savings with non-recurring savings of c£4.16m identified and potentially £1.79m of recurrent savings from recovery monies within HLD. This left a remaining gap of c -£0.72m. Work was underway with the Finance Improvement Group to drive further sustainable savings.
- An overview of key risks and current assumptions was provided.

Susan Douglas-Scott stated it was reassuring that a breakeven position was anticipated.

Linda Semple assurance regarding: NSD; Non-pay pressures; Surgical supplies; Clinical waste costs; and year end outturn. Graham Stewart advised that the agreed value for 2023/24 was still to be agreed with NSD, which would be offset against the overspend. Nursing vacancies continued to be challenging with an aim to move to non-recurring schemes in future. Procurement opportunities were being reviewed which offered opportunities to make improvements. Other areas of the organisation were being considered to carry out similar cost reviews to the transplant review.

Linda Semple thanked Graham Stewart for his response, acknowledged the challenge with territorial Health Boards around SLAs and increasing costs and suggested consideration was given to direct funding.

Linda Semple asked what the reserve situation was. Graham Stewart confirmed that contingency and costs measures were in place and that 3% recurring savings were required to be made each year, which would require some innovative working.

Carole Anderson highlighted the Sustainability and Value programme with all resources due to be in place in Quarter Four. Forward planning ahead of the next financial year to support reducing costs pressures would be carried out.

Linda Semple noted a large financial pressure was contributed by Locum costs and asked if a bank share scheme was an option. Anne Marie Cavanagh advised that NHS GJ utilised NHS Greater Glasgow and Clyde nursing bank and that consideration was being given to a National staff bank by the Ministerial Task and Finish Group.

Mark MacGregor highlighted that a medical bank facility was available for some services and that there was potential that e-Rostering could support joint working across Health Boards.

The Board approved the Financial Report for September 2023.

### 6.3 Finance and Performance Committee Update

Stephen McAllister provided an overview of the Finance and Performance Committee (FPC) Board update from the meeting held on 14 November 2023.

FPC reflected on the operational performance noting the continued challenges around Cardiology driving deficit and the internal funding of additional beds due to lack of agreement between West of Scotland Boards.

FPC commended the high level of service being provided amongst continual juggling to maintain activity.

The Committee approved the Procurement Annual Report.

The Board approved the Finance and Performance Committee update.

### 6.4 Audit and Risk Committee Update

Karen Kelly referred Board Members to the Audit and Risk Committee (ARC) Board update from the meeting held on 16 November 2023.

The Committee extensively discussed audits in eHealth and security services which provided assurance.

ARC commended the positive approach of staff throughout audit processes, welcomed the Director of Pharmacy to the meeting and noted the planned developments in Pharmacy.

Susan Douglas-Scott asked Nicki Hamer to look into Cyber Resilience Training to understand if this was mandatory for Non-Executive Directors,

The Board noted the Audit and Risk Committee Update.

Action No:	Action	Action By
Bpu/231214/03	To understand if Cyber Resilience Training is mandatory for Non-Executive Directors	Nicki Hamer

## 6.5 Procurement Annual Report 2022/2023

Graham Stewart presented the Procurement Annual Report which was produced in compliance with the Procurement Reform (Scotland) Act 2014. The approved report would be published on NHS GJ website and linked to the three year strategy.

Callum Blackburn highlighted that some suppliers had been listed more than once. Graham Stewart confirmed that there were multi-supplier frameworks for some areas.

Susan Douglas-Scott noted the criticality in the progression and compliance of the report.

The Board approved the Procurement Annual Report 2022/23.

## 7 Strategic Portfolio Governance

### 7.1 Strategic Portfolio Governance Committee Update

Linda Semple provided an overview of the Strategic Portfolio Governance Committee (SPGC) Update Report for the meeting held on 7 November 2023.

The Committee discussed the draft Anchor Strategic Plan, noted the significant amount of work undertaken and that the programme fitted well with the NHS GJ Values.

The Committee approved the CfSD Assurance Statement 6 month update and noted the significant delivery of programme work for NHS Scotland.

The Committee discussed the difficulty in finding programme staff across the organisation and agreed this required further consideration by the Executive Leadership Team.

The Board noted the Strategic Portfolio Governance Committee Update.

### 7.2 NHS Golden Jubilee Anchor Strategic Plan

Carole Anderson informed the Board of the requirement for all Health Boards to develop an Anchor Strategic Plan. This would include local procurement, fair work opportunities, utilise land and assets for the benefit of the local community and economy and to set out governance arrangements to progress the Anchors Strategic Plan.

The draft plan had been submitted to SG in October with feedback expected early 2024, along with a measurement framework which would require to be submitted to SG by the end of March 2024.

Carole Anderson advised that a first draft had been developed with focus areas identified. Public Health Scotland were providing support, the Joseph Rowntree framework was being utilised and NHS GJ were linking with a UK wide Anchors Network.

Carole Anderson asked the Board to discuss the paper and advised that this project would be considered as part of the Strategic Portfolio and would therefore be monitored by SPGC.

Linda Semple expressed enthusiasm for the project, especially with the significant and recognised values in NHS GJ, noted the Community Planning membership would be beneficial and commended the use of the Joseph Rowntree Framework.

Callum Blackburn queried whether WDC planned to develop the river side path through the NHS GJ site. Carole Anderson responded that the current status of this plan was unknown but the Anchor Strategic Plan provided an opportunity to think differently about the site.

Gordon James highlighted that capital and planning requirements would require to be taken into consideration.

The Board noted the NHS GJ Anchor Strategic Plan.

### **7.3 Annual Delivery Plan 2023/24 Update**

Carole Anderson reported that formal feedback received from SG had been incorporated into the Annual Delivery Plan (ADP) and the final version was being presented to the Board for approval, with future update reports provided quarterly. The commissioning guidance for next year had been received with a focus on a three year plan for 2024/25 and signposting of future years.

Callum Blackburn highlighted that the Sustainability Manager post had been recruited to and asked if the submission could be updated to reflect that fact. Carole Anderson advised that it was not routine practice to re-write and update the ADP from the final agreed version with Scottish Government but noted that given that the new ADP was due in March, the new plan would reflect any changes.

The Board approved the Annual Delivery Plan 2023/24 update.

### **7.4 2023/24 Annual Delivery Plan Quarter One and Quarter Two Update**

Carole Anderson presented the ADP update and explained that SG required assurance that drivers and deliverables were being closely monitored.

Carole Anderson provided an overview of the NHS GJ status at the end of Quarter Two, highlighting the changes in status and the associated reasons for those changes since Quarter One.

Carole Anderson outlined the projections for Quarter three which was expected to present a better position from Quarter Two. SG had recognised Quarter four could be pressured therefore had requested Quarters three and four were amalgamated and submitted at the end of Quarter four. Further updates would be provided on a new measurement framework due to be distributed by SG.

Susan Douglas-Scott asked if the plan would be on target by the year end. Carole Anderson advised that the majority would be and that a more accurate projection would be available at the end of Quarter three.

The Board noted the Annual Delivery Plan Quarter One and Quarter Two Update.

## **7.5 Climate Emergency and Sustainable Development Six Month Update.**

Carole Anderson advised that the Climate Change and Sustainability Strategic Group had been established along with five sub groups to undertake the associated work. In addition the Sustainability Manager had been recruited along with the Programme Support Officer and NHS Green Theatres Project Lead.

Carole Anderson informed the Board of the plan to reduce the requirement to sterilise battery packs for orthopaedic joint surgery resulting in a reduction in cost and time.

Carole Anderson advised that NHS GJ was a partner in the Green Transition Ecosystem project Design HOPES with the first main project being supported by a post-doctoral fellow from the University of Strathclyde Design School working with the NHS GJ Project Team on re-usable theatre caps.

The NHS GJ Green Theatres Project Group was looking at identifying clinical champions across all specialties, leads from key areas, looking at Bundle One programme actions as well as setting an annual workplan and prioritising waste segregation to reduce waste incineration.

A Climate Risk Assessment Workshop had been held with a Climate Risk Action Plan being developed from the outcomes of the workshop.

A six monthly Climate Change and Sustainability Portfolio report would be provided to the Finance and Performance Committee commencing March 2024.

The Board noted the Climate Emergency and Sustainable Development Six Month Update.

## **8 Corporate Governance**

### **8.1 Strategic Risk Register**

Graham Stewart presented the Strategic Risk Register for November 2023 which had been presented to the relevant Governance Committees.

The Board approved the Strategic Risk Register.

### **8.2 Corporate Governance Meetings 2024/25.**

Gordon James referred the Board to the proposed Corporate Governance meeting dates for 2024/25. Nicki Hamer advised of some changes to FPC and ARC meeting dates to better align to the Financial Reports.

The Board approved the proposed Corporate Governance meeting dates, subject to Nicki Hamer confirming with Stephen McAllister his availability for the May and September FPC meeting dates and the availability of the new Non-Executive Directors when they take up post in January.

Action No:	Action	Action By
Bpu/231214/04	To look at FPC Chair availability for dates in May and September and include the availability of the new Non-Executive Directors	Nicki Hamer

## 9 Minutes for Noting

### 9.1 Clinical Governance Committee Approved Minutes

The Board noted the CGC approved minutes for the meeting held on 7 September 2023.

### 9.2 Staff Governance and Person Centred Committee Approved Minutes

The Board noted the SGPCC approved minutes for the meeting held on 5 September 2023.

### 9.3 Finance and Performance Committee Approved Minutes

The Board noted the FPC approved minutes for the meeting held on 5 September 2023.

### 9.4 Strategic Portfolio Governance Committee Approved Minutes

The Board noted the SPGC approved minutes for the meeting held on 29 August 2023.

### 9.5 Audit and Risk Committee Approved Minutes

The Board noted the ARC approved minutes for the meeting held on 12 September 2023.

## 10 Any Other Competent Business

There was no further business raised.

## 11 Date and Time of Next Meeting

The next meeting of NHS GJ Board had been scheduled for Thursday 28 March 2024 with Board Seminars scheduled for 9 January, 26 January and 25 February 2024.