

Approved Minutes

Meeting: NHS Golden Jubilee Public Board Meeting
Date: Thursday 25 July 2024, 10:00
Venue: Level 5 East Boardroom/MS Teams

Members

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

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
Graham Stewart	Interim Director of Finance
Laura Smith	Director of People and Culture
Nicki Hamer	Head of Corporate Governance and Board Secretary
Claire Hendren	Senior Corporate Administrator
Abhishek Agarwal	Health Improvement Scotland (via MS Teams until 11:40)
Christine McGuinness	Head of Marketing and Stakeholder Relations (Item 5.3)

Apology

No apologies received.

Minutes

Christine Nelson	Deputy Head of Corporate Governance
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1 Opening Remarks

1.1 Chair's Introductory Remarks

Stephen McAllister welcomed everyone to the Board meeting and advised that he would Chair the meeting on behalf of Susan Douglas-Scott, who was attending the meeting remotely due to being unwell. All participated in a short wellbeing discussion.

Stephen McAllister welcomed Abhishek Agarwal from Health Improvement Scotland as an observer, who was currently receiving some mentorship support from Susan Douglas-Scott.

Stephen McAllister welcomed Claire Hendren as an observer, the new Senior Corporate Administrator who would support the work of the Board Secretary/Head of Corporate Governance and the Deputy Head of Corporate Governance.

On behalf of Susan Douglas-Scott, Stephen McAllister shared some highlights since the last Board meeting which included:

- The Chair had been invited to be a keynote speaker for NHS LGBT+ on Thursday 8 August 2024.
- Lindsay Macdonald had taken on the role of Non-Executive Champion for Cyber Security.
- Following the successful turnout of young people, another Careers Information Event was planned for Thursday 12 September from 4pm-8pm and Board Members were encouraged to attend, if possible.

1.2 Apologies

There were no apologies to note.

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:

- University of Glasgow and NHS Golden Jubilee (NHS GJ) renewed the Memorandum of Understanding (MoU).
- The Hospital: Life on the Line series began on Monday 3 June, receiving widespread praise, media coverage and had been one of the most viewed programmes on television each week.
- HMT Lancastria Memorial Service – a special event was held to mark the anniversary of the sinking of HMT Lancastria.
- Directors Letters (DLs) and other Board requests would now form part of the Corporate Governance Quarterly Update to the Board, listing any due date and action required/taken by the Board. Those received recently were detailed.
- JAG accreditation had been awarded to Endoscopy Services for another year.
- Board Chief Executive meeting was held at NHS GJ in June 2024 which included a tour of Phase 2.
- Executives Appraisals had been completed for 2023/24 and Corporate Objectives 2024/25 would be discussed during the private session.
- An all staff email had been sent from the Chair and Chief Executive to celebrate the 76th anniversary of the NHS and to thank staff for their incredible hard work and dedication.
- June marked Volunteers Week with a special celebration event held with our Volunteers.
- NHS GJ celebrated Pride month in collaboration with colleagues from NHS Greater Glasgow and Clyde (NHS GGC) at 'MardiGla' on 20 July 2024.
- Golden Jubilee Conference Hotel (GJCH) attended 'The Meetings Show' in London ExCel in partnership with Venues of Excellence to explore new and existing business connections.
- GJCH hosted the NSPCC Childline Sport Day with some of media's biggest brands. Photography was taken to help promote the outdoor space at the Hotel.
- GJCH was recognised by Tripadvisor for being in the top 10% of 'travellers' favourite businesses around the world', based on guests and visitors ratings and feedback.
- The sustainability initiative for June was 'water conservation' where GJCH staff were encouraged to save water where they could. The Hotel had been raising awareness of responsible water consumption across the hotel and on social media.
- GJCH hosted and took part in the 'Hotel v Hospital' football match and raised £1,600.
- Gordon James met with James Boyce who was taking over Health Sponsorship for NHS GJ.
- Nominations for Scotland's Health Awards 2024 had been launched.

Gordon James advised of the following Upcoming Events:

- A Medical Devices Workshop was to be held at NHS GJ with invitations being circulated by Kerry Chalmers, Scottish Government (SG) to all NHS Health Boards.

Stephen McAllister acknowledged the accolade for GJCH. Susan Douglas-Scott echoed this and requested that the Board's congratulations were passed to Denis Flanagan and the Hotel staff.

The Board noted the Chief Executive update.

3 Updates from last meeting

3.1 Unapproved minutes from 30 May 2024 Board Meeting

The Board approved the minutes of the 30 May 2024 subject to the following amendments:

- Marcella Boyle to be added as a Board Member in attendance.
- Page 6, Item 5.1 – Staff Governance Report. TURAS Appraisal was reported as 68%, not 58%.
- Page 11, Item 6.5 – Annual Climate Change Emergency and Sustainable Development Report. Paragraph 2, to be changed to “Carole Anderson gave recognition to the Team for delivery of the work and the Comms Team for supporting the report”.

3.2 Board Action Log

There were no outstanding actions for discussion.

3.3 Matters Arising

There were no matters arising.

4 Clinical Governance

4.1 Clinical Governance Report

Anne Marie Cavanagh presented the Clinical Governance update from the Integrated Performance Report (IPR) which included the following:

- Nine complaints were reported in March 2024 with a 100% response rate for Stage One complaints and 40% of five Stage Two complaints responded to within the target.
- The feedback improvement report would be presented to Clinical Governance Committee (CGC) in September 2024.
- There were no Significant Adverse Events (SAE) reported in April 2024.
- There were five deaths in April and 7 in March.
- There were no Whistleblowing concerns reported for the period.
- Health Associated Infection (HAI) Activity for April reported two Staphylococcus Aureus Bacteraemia (SABs), 1 Clostridiodes Difficile (CDiff) and 1 Gram Negative/E.Coli Bacteraemia (ECB). Hand Hygiene compliance was 99% for March 2024.
- There were two superficial Surgical Site Infections (SSI's) reported in Cardiac in March and April 2024 and one in Orthopaedics in April 2024. Teams remained alert and responsive to any organisms identified locally and/or nationally.

Linda Semple highlighted a rise in CDiff infections in territorial Health Boards. Anne Marie acknowledged that this had increased slightly recently and advised that any instances would be investigated to understand causes.

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 16 July 2024, highlighting the following:

- The Committee noted the issues highlighted under the SAER report, the sustained progress and the further work required on cleansing the list.
- The Committee approved the Strategic Risk Register noting the balloon pumps escalation. Though there was no immediate risk to patients, some mitigating actions were being put in place, including the risk of any potential cost pressures.
- The Committee discussed the Blueprint for Good Governance Improvement Plan actions, noting that this would be discussed again in November.
- The Committee noted the Prevention and Control of Infection Committee Annual Update, the national and local HAI surveillance targets were noted and the focus remained on continuous improvement for 2024/25.
- The Committee approved the Whistleblowing, Annual Feedback, Duty of Candour and Prevention and Control of Infection Annual Reports.
- The Committee welcomed the Patient Story featuring a positive patient experience of a patient who had received a hip replacement. The Committee noted the work of NHS GJ was not just life-saving but also life changing for patients.

The Board noted the Clinical Governance Committee Update.

4.3 Whistleblowing Annual Report for 2023/24

Anne Marie Cavanagh presented the Whistleblowing Annual Report for 2023/24.

Anne Marie Cavanagh reported that there were no whistleblowing concerns raised during the year 2023/24. Throughout the reporting period, the emphasis had been on increasing staff awareness resulting in an increase in the number of staff accessing the Standards and training.

Callum Blackburn continued to work with the Confidential Contacts and Nicki Hamer attended the National Whistleblowing Network meetings.

A quarterly Whistleblowing meeting was being considered and work continued to ensure there was no complacency, despite no concerns being reported.

Callum Blackburn thanked Anne Marie Cavanagh and Nicki Hamer for producing the report, which could be used to continue to raise awareness in the hope that increased awareness of the process would support confidence in people feeling able to speak up, if required.

Callum Blackburn reported that the number of Confidential Contacts had dropped therefore further training was being looked at to support continued engagement.

Callum Blackburn highlighted that Speak Up Week was planned for September 2024. Rob Moore asked how NHS GJ compared with other NHS Health Boards. Anne Marie Cavanagh responded that due to the nature of Whistleblowing, it was difficult to know this

detail. However, discussion at the network meetings ensured conversations remained purposeful.

Callum Blackburn reported that some NHS Health Boards who had a lot of concerns raised were looking at themes and challenges and acknowledged that NHS GJ having no concerns reported could mean that the process was working or that issues were being solved at an early stage.

Linda Semple commented that due to the nature of Whistleblowing, perhaps the training should be mandatory, especially for Senior Managers. Gordon James responded that mandatory training was being reviewed through the protected learning time work and Whistleblowing Training would be considered, along with Cyber Security Training.

The Board agreed that if issues raised informally could be evidenced then having no whistleblowing issues raised was not a concern, noting that as NHS GJ was a smaller organisation with a relatively flat hierarchy then there would not be many concerns expected.

The Board discussed potential other ways to seek assurance that people felt able to raise concerns in an appropriate way, how this could be monitored and how Confidential Contacts could gain further knowledge and experience.

Stephen McAllister summarised the following:

- The Board noted the various views discussed including the potential of Whistleblowing Training becoming mandatory for staff.
- The Board noted other mechanisms and culture work and that a review of mandatory training was underway.
- Executive Leadership Team (ELT) would discuss training and whether more formal guidance would be beneficial.

The Board agreed that an update provided to Staff Governance and Person Centred Committee (SGPCC) following the discussion at ELT would be useful.

The Board approved the Whistleblowing Annual Report for 2023/24.

4.4 Duty of Candour Annual Report

Mark MacGregor presented the Duty of Candour Annual Report which was a requirement of the Duty of Candour legislation. Definitions of what was reported in the legislative report were included in Appendix One of the report.

Mark MacGregor provided an overview of the incidents reported in Appendix One and the Events section on page 8 of the report.

The Board agreed that the detail provided of the examples and outcomes was useful in providing assurance.

The Board approved the Duty of Candour Annual Report.

4.5 Annual Feedback Report 2023/24

Anne Marie Cavanagh presented the Annual Feedback Report for 2023/24, providing an overview of the layout of the report, how feedback was gathered from service users and the qualitative data included.

Anne Marie Cavanagh thanked the Volunteers for their support in gathering feedback on behalf of the organisation.

Anne Marie Cavanagh reported that there had been an increase of 9% in the number of complaints overall compared to the previous year. Improvement work continued on response rates.

Anne Marie Cavanagh reported that the number of compliments had increased by 24% and acknowledged the importance of balancing complaints and compliments and to share this across the organisation, noting that improvement was still required.

Stephen McAllister acknowledged the increase in compliments and noted the improvement work to support the complaints process.

The Board approved the Annual Feedback Report for 2023/24.

4.6 Prevention and Control of Infection Committee Annual Update

Anne Marie Cavanagh reported the Prevention and Control of Infection (PCI) Committee Annual Update. The following was noted:

- CDiff infection remained the same at 3 cases/5.75 per 100k total occupied bed days.
- Gram Negative/E.coli Bacteraemia (ECB) reported 5 cases/9.59 per 100k total occupied bed days. This was below the local trajectory of 15.5 per 100k total occupied bed days.
- Hand Hygiene rate did not drop below 97% across the year against a 90% target.
- 203 HAI-SCRIBE (Healthcare Associated Infection System for Controlling Risk in the Built Environment) activity was reported, which was almost double the previous year. This reflected the amount of work underway within the organisation and Anne Marie Cavanagh thanked the PCI Team and all areas of the organisation involved for their hard work. A similar number of HAI-SCRIBES was expected in 2024/25 due to the ongoing work.
- Infection rates continued to be low and any issues highlighted would be investigated.

Linda Semple queried if NHS GJ Staphylococcus Aureus Bacteraemia (SAB) figures were comparable to the national trend. Mark MacGregor advised they were probably slightly over but this was not a fair comparison as the figures included community hospital beds, which was not relevant to NHS GJ. In addition, most of NHS GJ services included surgical care which meant a higher risk of infection. NHS GJ level was low, despite this factor.

Anne Marie Cavanagh advised that work had been delayed in looking at the national metrics and acknowledged that Community inclusion was helpful but could dilute the data slightly.

The Board noted the Infection Control Annual Update for 2023/24.

5 Staff Governance

5.1 Staff Governance Report

Laura Smith provided an overview of the highlights and lowlights of the Staff Governance Report for the past quarter including the following:

- Sickness absence due to Anxiety, Stress, Depression or other Psychiatric Illness fell from 30.5% in April to 24.9% in May.
- Turnover reduced by 0.5% to 8.4%.

- TURAS appraisal remained at 68%. Data for the past 4 years showed the highest rate reported was 71%. Efforts would continue to maintain the rate and to reach the 80% target.
- One Fixed Term Contract remained. Confirmation was awaited that the contract was to be made permanent.
- Absence rate had increased by 0.3% to 6.2% in May across all divisions except Heart, Lung and Diagnostics (HLD).

Laura Smith reported the areas that ELT were focussing on which included the following:

- Monitoring appraisal rates on a monthly basis.
- Mandatory Training migration to TURAS with the new reporting starting in August.
- Progress of workforce data reporting to Power BI.

Rob Moore asked if turnover data reported included internal moves as well as external leavers. Laura Smith confirmed it was external leavers and highlighted that often these leavers were moving to promoted posts, which was a positive circumstance.

Stephen McAllister acknowledged the improvement in the absence figure for stress, anxiety, depression and other psychiatric illness and asked if there was any reason attributed to this reduction. Laura Smith responded that although there had been a change in categorisation, it was important to note the continued work being done across the organisation on attendance management and it was felt that this was making a difference.

Gordon James highlighted the Occupational Health and Physiotherapy Service and the Time to Talk programme, that absence management was aimed at the health and wellbeing of staff and to support them to be able to return to work. Marcella Boyle acknowledged the work on absence management, as outlined by NHS Scotland, but highlighted the importance of safe attendance at work.

The Board approved the Staff Governance Report.

5.2 Staff Governance and Person Centred Committee Update

Marcella Boyle provided an overview of the Staff Governance and Person Centred Committee (SGPCC) meeting held on 4 July 2024 which included in-depth discussion around medical appraisal, commending the hard work that had been put in and the improvement achieved as a result.

The Committee asked Mark MacGregor to feed this back to the appraisers on behalf of the Committee.

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

5.3 Marketing and Communications Annual Report 2023/24

Gordon James welcomed Christine McGuinness to the meeting to present the Marketing and Communications Annual Report for 2023/24.

Christine McGuinness presented the report, focussing on what went well and identifying areas for improvement. The following was noted:

- Instagram and SharePoint accounts were introduced. Viva Engage (Yammer) was not implemented due to national issues.
- Social Media statistics increased with the exception of engagement. This was being looked into in more detail.
- There was a 45% increase in films, now with over 1 million viewings/ hits on YouTube. Patient and staff experience videos continued to perform well.

- Website engagement had increased with the improvement of the NHS Scotland Academy (NHSSA) and Centre for Sustainable Development (CfSD) websites.
- A Digital Support resource was being recruited to the team.
- The Make a Difference recruitment campaign raised awareness of recruitment overall which included billboard and radio advertising, with a positive response received.
- The website information for recruitment was redesigned for national and international purposes.
- Banner stands and dedicated campaign flyers were produced to support recruitment fairs and QR codes were introduced.
- Targeted marketing was adopted for recruitment to some individual roles.
- Readership and engagement of internal communications increased with further improvement on “deep read” rates required where appropriate.
- The first All Staff Session attracted around 250 staff with further sessions being scheduled.
- Phase One of the new intranet was implemented.
- An overview of communications and engagement plans was in progress and future plans for the following 9 months was provided.

Rob Moore commended the Communications Team on their achievements throughout the year but highlighted that the tone of the report was slightly negative and it could have focussed more on what was achieved rather than what was not achieved, mostly due to low staff resource. Susan Douglas-Scott agreed with this point and asked for the report to be edited to reflect this.

Stephen McAllister asked if there had been an increase in communications as a result of the Channel 5 Documentary. Christine McGuinness advised it had been referenced in interviews and communications but it was difficult to gauge any direct result.

The Board noted the Marketing and Communications Annual Report for 2023/24.

Christine McGuinness left the meeting.

5.4 Diversity and Inclusion Strategy – Year Three Update

Laura Smith presented the highlights of the Year Three Update of the NHS GJ Diversity and Inclusion Strategy 2021-25, noting the report summarised the good work that was being undertaken throughout the organisation and highlighted the breadth of work and how strong NHS GJ were in this space, despite the size of the organisation.

Laura Smith highlighted the intention to have an increased focus on some protected characteristics over the next year.

Morag Brown commended the report and highlights provided and suggested that a focus on Mental Health and Learning Disability inclusion could be looked at and consideration given to how this could be enhanced. Further information could be accessed on Easy Read.

It was noted that SG were progressing a Learning Disability and Autism Bill.

The Board noted the Diversity and Inclusion Strategy Three Year Update.

5.5 Learning and Organisational Development Team 2023/24 Annual Report

Laura Smith presented the Learning and Organisational Development (L&OD) Team Annual Report for 2023/24 and highlighted the review of the year summarised in page 4 of the

report, which showed the breadth of work and key achievements of the Team and demonstrated the varied learning and development needs of the organisation and its people.

Laura Smith noted that the future challenge of the L&OD Team was not to look at how much more could be achieved but how targeted their approach could be in light of the current and future financial restraints.

Marcella Boyle noted the amount of work undertaken by L&OD and that the requirement to support staff to do their current role but also support development of those staff and asked what help was required to do this. Marcella Boyle acknowledged that a large part of personal development was the responsibility of the individual and staff should be encouraged to access self-service channels and training.

Gordon James acknowledged that TURAS included lots of training options and advised that third party training information was often shared through the GJ Managers Hub.

Rob Moore commended the look and feel of the report.

Linda Semple highlighted that often staff became managers during their career but were not always given appropriate training to support this transition and asked if this should be encouraged and evidenced. Laura Smith agreed this was sometimes the case.

The Board discussed this in more detail and the following was noted:

- Scottish Vocational Qualifications (SVQ) type training could be further explored.
- There was a significant level of investment and training available across Scotland.
- Home grown training could be utilised by using the resource of existing staff.
- There were accredited coaches within the organisation.
- Succession Planning was underway within the organisation.
- Some caution was sensible around developing staff to a certain extent as this could create expectation that there were promoted roles available.
- NHS Education Scotland led on much of this work, for example through the Aspiring Directors programme.
- A lot of informal mentoring took place within the organisation which had a positive impact and outcome.
- A cross Board mentorship programme was in place with a number of staff involved.
- There were different approaches across different services throughout the organisation.

The Board noted the Learning and Organisational Development Team 2023/24 Annual Report.

6 Finance and Performance

6.1 Operational Performance Report

Carolynne O'Connor presented the Operational Update for Month 1 for April 2024, which included the following:

Heart, Lung and Diagnostics (HLD)

- Radiology activity position was above target – 9% with overachievement across non Service Level Agreement (SLA) activity, notably Computed Technology (CT) and Ultrasound. There had been significant improvement in waiting lists for Computer Technology Coronary Angiogram (CTCA). The Ultrasound Academy continued to

perform above target with agreed funding for planned expansion from Quarter Three. SG funding had been approved for additional Radiology in Quarter One.

- Cardiac activity was under target, 2% behind plan. April was the fourth consecutive month with a reduction in the number of patients breaching the 12 week Treatment Time Guarantee (TTG). Complex planning with full team support was in place for long waiting patients for Scottish Adult Congenital Cardiology Service (SACCS) when the patients were ready for treatment.
- Thoracic Surgery Activity continued to perform ahead of plan by 2%. The Date of Surgery Admission (DOSA) rate was 21%. Around 70% of patients benefitted from the Day Zero Programme being transferred directly to the ward from Recovery, thus saving Thoracic High Dependency Unit (HDU) beds. The 31 day Cancer target was met.
- Cardiology overall activity was on target for the annual plan. Transcatheter Aortic Valve Implantation (TAVI) was reported 25% behind the revised plan with 20 cases against 27 on the Annual Delivery Plan (ADP) due to an ongoing focus on urgent inpatients and long waiting patients. Mobile Catheterisation Laboratory (Cath Lab) sessions were planned for June and July along with weekend sessions to support displaced coronary activity. Electrophysiology (EP) was 9% behind the activity plan as all long waiting patients required General Anaesthetic. Additional resource would be available from August 2024. The Device Service was 17% ahead of target. As sick inpatients required urgent care, elective EP capacity was displaced. Planned care bids for TAVI and EP were approved and additional session plans had been compiled to deliver activity.
- Successes included the plan and funding for Cardiology “Flow” beds being approved, six transplants being carried out (11 year to date for 2024/25) and the HLD Values and Efficiency Project Board was established.
- Challenges included the growing number of patients waiting over 78 weeks for EP and TAVI as demand outstripped capacity. A mitigation plan was in place.
- Regional Planning Group for the Cardiac Service was looking at Cardiac and Cardiology procedures and strategy going forward.

Marcella Boyle asked if any feedback had been received from SG regarding additional investment for the increased demand for heart transplants. Carolynne O’Connor advised that the Business Case had been developed for National Services Division (NSD) but there had been challenge around the financial element. There was currently a £1.1m deficit for Scottish National Advanced Heart Failure Service (SNAHFS), shared with NSD and SG which would challenge the ability to deliver activity later in the financial year. Monitoring processes were in place and monthly meetings were taking place with NSD.

Gordon James advised that a National Specialty Screening Committee would decide on Business Cases for all national work and reminded the Board that £4.6m had been awarded to NHS GJ but this was not the full amount requested. Gordon James had raised the issue with the Chief Operating Officer at the last Sponsorship Meeting and at the Quarterly Performance Review with NSD. There was a continued focus on monitoring the situation and the Risk Register.

Graham Stewart advised that the situation was being flagged through the running rate in the financial position and it was a live issue with SG as it was one of the largest risks to achieving a break even position.

National Elective Services (NES)

- NES ADP finished 7% ahead of target.
- TURAS completion was being closely monitored and remained high at 75%.
- Ophthalmology reported a total of 901 cataract procedures against an original plan of 1023 during April 2024. The underperformance was due to annual leave and was forecast to improve during May. A Bank Ophthalmologist was appointed to provide cover in clinics and theatres across June and July, which would support activity during

peak annual leave months. 64% of on the day cancellations were replaced during April 2024.

- Endoscopy reported completion of 762 procedures against a plan of 575, 32% ahead of plan. This was achieved through weekend working and replacing short notice cancellations where possible to maximise theatre utilisation. This supports the recovery plan to achieve the 2024/25 ADP due to the delay in Phase 2 opening.
- Orthopaedics finished 18% ahead of plan and 34 Joints cases ahead during April 2024. All other Orthopaedic specialties over performed in month which supported recovery of the delay to Phase 2 to the 2024/25 ADP position. Early mobilisation continued to improve with mobilisation rate (pre-midnight) reaching 45%, the highest percentage achieved to date.
- General Surgery/Colorectal was ahead of target by 1% which was largely due to more general surgery being performed to maximise theatre utilisation. General Surgery finished 13% ahead of plan. Eighteen colorectal procedures were carried out against a plan of 30 during April. This was due to operator leave and recovery of this position was planned for May.

Linda Semple asked that since NHS GJ were performing so well, was there a way to benchmark activity against UK performance. Carolynne O'Connor advised that this was being looked at.

The Board approved the Operational Update.

6.2 Financial Report as at 31 May 2024 (Month 2)

Graham Stewart presented the Month 2 Financial Report, which included the following:

- There was no change to the current Financial Plan Gap of £9.994m with a reported deficit of -£764k. Efficiency targets would be finalised for month three.
- The Prioritised Capital Expenditure Plan had been revised to match the confirmed Core Capital Resource Limit (CRL).
- Phase Two Expenditure Phasing for 2024/25 and 2025/26 was still to be finalised with the Cost Advisors.
- Income to date of £41.87m was ahead of the year to date budget of £41.81m, resulting in a positive variance of £0.056m.
- Expenditure to date was £40.259m, which was ahead of the year to date of £39.457m, resulting in an adverse variance of £0.746m.
- Core Funding of £154.475m was anticipated. June's allocation letter only confirmed recurring baseline at that time.
- SLA income of £13.985m was ahead of planned budget of £13.913m by £72k (Non West of Scotland Cardiac and Thoracic activity).
- Hotel and other income of £2.140m was below planned budget of £2.155m by £16k.
- Revenue expenditure position for May 2024 reflected an overall adverse variance of £802k.
- Pay lines had been realigned to ensure funding was at the correct level.
- Some challenges remained regarding medical staffing vacancies in some specialties.
- Pay costs were £0.107m overspent and Non Pay costs were -£0.695m adverse.
- Surgical supplies expenditure related to over performance in Orthopaedics and Endoscopy. The trajectory was being looked at across the year.
- Personal Protective Equipment (PPE) was an ongoing pressure but was a general trend on non-pay costs, as it was aligned to both Divisions.
- Within the adverse pay costs for medical, clinical and support staff costs, General Anaesthetics and General Surgery were the biggest pressures along with some

Ophthalmology due to vacancies. There remained some nursing vacancy factors but this remained underspent.

- An efficiency target of £9.994m had been agreed by ELT. A breakdown of workstreams had been identified.
- An overview of the savings identified year to date and forecast projections was provided, mostly of non-recurring savings. The nursing vacancy underspend was still coming through the system with an expected full year underspend of £2.6m.
- Savings had been identified to date had been removed from each area and further work was progressing as part of month 3. A breakdown of the key areas of workstreams with most risk of delivery was provided, resulting in total potential slippage of -£3.1m.
- A review of the financial plan as part of month 3 would identify some part-year savings in funding set aside, together with the return of the 2023/24 surplus this level of flexibility may off-set the remaining gaps in savings in 2024/25.
- Confirmation of an ongoing 3% recurring efficiency target was required to deliver a break even position.
- Key areas of focus would include continuing to develop a more structured programme management approach in the identification of workstreams including robust governance within the “Achieving the Balance” programme.
- The non-core position anticipated a break even position. This area would cover depreciation charges, annual managed expenditure items and any impairment of assets which would be reviewed as part of Quarter One (linked to Phase Two).
- Only the Core Capital Formula had been confirmed of £2,691m along with the final element of the lift replacement. It was anticipated that a further £1.1m of 2023/24 slippage would be returned in 2024/25. This would be highly challenging this year as there was only £4.6m core allocation. SG would honour the remaining balance for Phase 2. Regular contact with the SG Capital Team continued.
- No confirmation had been received regarding any further capital funding.

The Board discussed the Financial Report at 31 May 2024 and the following was noted:

- The current year to date variance linked to pay costs reflected the current overspend but this would balance out later in the year when performance increased.
- The pressure on NSD income would continue in month 3, especially in relation to transplants.
- The Finance Team were continuing to work with divisions to identify efficiencies.
- At the end of month two there was still £4.5m shortage reported on efficiency targets. This would continue in month 3 but it was still early in the trajectories and was more challenging through West of Scotland and HLD SLA's. This would require to be managed closely.
- It was important to ensure that Corporate Services were not cut to the extent that this resulted in failure to deliver clinical services. Assurance was given that corporate services would be reviewed as part of a full organisational and service review.
- Significant savings could potentially be made in shared services across NHS Scotland. NHS GJ were working with SG and other NHS Health Boards to support this work.
- Incremental drift costs were not significant within NHS GJ and were factored into budgets. Acknowledgement for the need to consider corporate overheads for CfSD.

The Board approved the Financial Report as at 31 May 2024 (Month 2).

6.3 Finance and Performance Committee Update

Rebecca Maxwell noted that much of the business discussed at Finance and Performance Committee (FPC) on 11 July 2024 had been or would be discussed at the Board meeting and therefore did not review the update in detail. A thorough discussion had taken place on performance, especially around the challenging mix of demand versus expansion.

The Board approved the Finance and Performance Committee update.

6.4 Audit and Risk Committee Update

Lindsay Macdonald referred Board Members to the Audit and Risk Committee (ARC) Board update from the meeting held on 18 July 2024 which included:

- The Committee approved the quarterly Counter Fraud update report and noted two cases of fraud had been closed with no wrong doing identified and there were no outstanding fraud cases. The Committee was assured of the robust process around drug management at NHS GJ.
- The Committee received an update on the External Audit and Final accounts. An additional seventh related party transaction risk had been identified by KPMG. Four of the 7 risks were complete, with another two forecast to be completed by the end of September and the final one would be closed off by March 2025. The Committee congratulated Graham Stewart and the Finance Team on their hard work over the year.
- The Committee approved the Strategic Risk Register.

The Board noted the Audit and Risk Committee Update.

6.5 Procurement Strategy 2024-2027

Graham Stewart presented the Procurement Strategy for 2024-27 and commended Iain Skene, Head of Procurement, on the report which had been presented through the appropriate governance route with some detailed discussions taking place.

Graham Stewart advised that NHS GJ had an obligation to publish a Procurement Strategy, outlining plans over the next three years, along with an Annual Plan. This supported strategic planning and ensured visibility and transparency and standardisation across the organisation.

Graham Stewart outlined the key priorities of the Strategy.

Marcella Boyle thanked Graham Stewart for his report and asked if it was possible to identify what percentage of procurement was spent in West Dunbartonshire area. Graham Stewart confirmed that local business was encouraged, especially through the Hotel but agreed improvements could be made and would aim to provide further information in future.

Carole Anderson confirmed there was a plan in place for procurement as an Anchor Institution.

Gordon James advised there was an NHS Scotland online Community Benefits Gateway which aimed to align suppliers with needs across Scotland and perhaps NHS GJ could promote this service locally.

Callum Blackburn emphasised the importance of sustainable procurement and opportunities for Achieving the Balance too. However, through experience, people tended to require a long time to respond and identify solutions.

Lindsay MacDonald highlighted the difficulty in adopting a strategic approach to procurement with the number of suppliers and resources locally. Developing multi-year relationships with suppliers was beneficial, but this may not be possible locally.

Gordon James acknowledged that savings would more likely be achieved through longer term contracts with bigger suppliers. Graham Stewart advised that £1.3m procurement

savings had been identified and national frameworks were being considered, although this would require clinical engagement.

The Board approved the Procurement Strategy.

7 Strategic Portfolio Governance

7.1 Strategic Portfolio Governance Committee Update

Carole Anderson provided an overview of the Strategic Portfolio Governance Committee (SPGC) Update Report for the meeting held on 9 July 2024 which included the following:

- The Committee received the Digital Improvement Plan update and noted the issues relating to the Digital Portfolio and in particular the delays to TrakCare.
- The Committee received the CfSD Annual Work Plan for 2023/24 and Annual Report for 2024/25, noting that the suite of programmes were progressing well. However, the Committee noted concerns around Fixed Term Contracts for some element of the programmes overseen by NHS GJ and requested ongoing sight of this area.
- The Committee noted the continuing work of NHS Scotland Academy Programmes.
- The Committee discussed the Blueprint for Good Governance Implementation Plan and noted the actions for the Committee.

Morag Brown endorsed the update provided by Carole Anderson.

The Board noted the Strategic Portfolio Governance Committee Update.

7.2 Three Year Delivery Plan 2024/2027

Carole Anderson presented the NHS GJ three Year Delivery Plan for 2024-2027, reporting that SG feedback had been received on 20 June 2024, which indicated that SG were broadly satisfied that the plan met requirements and acknowledged the challenges faced across NHS Scotland.

Carole Anderson reported that the only update to the plan since it was last presented to the Board was to incorporate the TAVI funding award.

NHS GJ had responded to the feedback and gave assurance that areas highlighted within the feedback would be addressed, including working with SG Planned Care Policy and Performance Team on actions needed on their associated Planned Care Plan.

The Board approved the Three Year Delivery Plan 2024-2027 which would be published on the Board website.

8 Corporate Governance

8.1 Strategic Risk Register

Graham Stewart presented the Strategic Risk Register for June 2024 which had been presented to the relevant Governance Committees, providing an overview of changes in risk status throughout the reporting period.

Risk S17 Recovery Plan risk had been closed as it had been merged with the Waiting Times Risk. Risk ID 09, waiting times management had been increased to reflect the current waiting lists within TAVI and EP and the perceived risk to patient safety. B006/22,

International Recruitment, had been reduced by SGPC as the last cohort of international nurses had been recruited at the end of March 2024.

Graham Stewart highlighted an emerging risk around capital planning requirements in excess of current anticipated funding through core capital resource limit. This would be monitored by FPC. An additional emerging risk was noted due to the ongoing recruitment challenges within procurement services.

The Board approved the Strategic Risk Register.

8.2 Blueprint for Good Governance Implementation Plan for 2024/25

Carole Anderson presented the Blueprint for Good Governance Implementation Plan for 2024/25 update.

Carole Anderson advised that the workshop planned for the Setting the Direction action was planned as part of the Board Seminar in October 2024.

Discussions were underway with West Dunbartonshire Community Planning Management Board to look at whether general endowments could be utilised to support Anchor activity.

As part of succession planning, the Chair and Chief Executive would try to influence the public appointment process where possible to support diversity, skills and experience work. The Board noted that the skills matrix would be reviewed in September 2024.

Within the roles, responsibilities and accountabilities section, it was noted that NHS GJ had good coverage across national groups.

As part of the Assurance Framework work, a Key Performance Indicator (KPI) Review was underway to look at the future of the IPR along with a review of functional committees below Board level.

The Board approved the Good Governance Implementation Plan Update for 2024/25.

9 Minutes for Noting

9.1 Clinical Governance Committee Approved Minutes

The Board noted the CGC approved minutes for the meeting held on 9 May 2024.

9.2 Staff Governance and Person Centred Committee Approved Minutes

The Board noted the SGPC approved minutes for the meeting held on 7 May 2024

9.3 Finance and Performance Committee Approved Minutes

The Board noted the FPC approved minutes for the meeting held on 14 May 2024

9.4 Strategic Portfolio Governance Committee Approved Minutes

The Board noted the SPGC approved minutes for the meeting held on 9 May 2024

9.5 Audit and Risk Committee Approved Minutes

The Board noted the ARC approved minutes for the meeting held on 16 May 2024

10 Any Other Competent Business

Stephen McAllister advised that Long Service Award recipients would be joining the Board for lunch to be presented with their awards.

11 Date and Time of Next Meeting

The next meeting of NHS GJ Board had been scheduled for Thursday 26 September 2024 with a Board Seminar scheduled for Thursday 29 August 2024.