

Approved Minutes

Meeting: NHS Golden Jubilee Board Meeting
Date: 28 January 2021, 10am
Venue: Microsoft Teams Meeting

Members

Susan Douglas-Scott CBE	Board Chair
Linda Semple	Vice Chair
Callum Blackburn	Non-Executive Director
Marcella Boyle	Non-Executive Director
Morag Brown	Non-Executive Director
Elaine Cameron	Non-Executive Director
Jane Christie-Flight	Employee Director/Non-Executive Director
Jann Gardner	Chief Executive
Karen Kelly	Non-Executive Director
Mark MacGregor	Medical Director
Stephen McAllister	Non-Executive Director
Rob Moore	Non-Executive Director
Colin Neil	Executive Director of Finance
June Rogers	Deputy Chief Executive / Executive Director of Operations

In attendance

Gareth Adkins	Executive Director of Quality, Innovation & People
Serena Barnatt	Human Resources Director
Anne Marie Cavanagh	Executive Director of Nursing and Allied Health Professionals
Liane McGrath	Head of Corporate Governance
Kevin Kelman	Director of NHS Scotland Academy
Carole Anderson (<i>item 9.1</i>)	Associate Director of Quality, Performance, Planning & Programmes

1 Opening Remarks

1.1 Chairs introductory remarks

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

Susan Douglas-Scott welcomed Kevin Kelman, the new Director of the NHS Scotland Academy, as an observer to the meeting. Kevin Kelman joins the Board from Stirling Council and will commence in post from 22 February 2021.

Susan Douglas-Scott noted the second anniversary of Jann Gardner taking up the role of NHS Golden Jubilee (NHS GJ) Chief Executive and commended Jann Gardner's work to date especially during such challenging times.

Susan Douglas-Scott advised members that the 2021 Young Scot Awards are now open and colleagues are asked to recognise the work of a young person they know by nominating them for one of these prestigious awards.

The programme of Board Virtual Walk Rounds continues today and Members will be joined by the Laboratories Team following the Board meeting.

1.2 Chief Executive introductory remarks

Jann Gardner thanked Susan Douglas-Scott for the kind comments and extended thanks to Board Members and the Executive team for their support over the past two years.

Jann Gardner discussed national capacity and noted that since July 2020 approximately 40,000 procedures have been carried out at NHS GJ. NHS GJ has played a vital role over the last six months to provide flexible support for both urgent care needs as well as planned procedures. Jann Gardner shared that Scottish Government supported NHS GJ in maintaining the status as a National Covid light site and to flex capacity where possible to address prioritised national demand.

Jann Gardner highlighted that as part of the ongoing commitment to expand staff engagement opportunities the first Dialogue session was held this week. This new initiative will take place every month on a dedicated MS Teams channel and gives staff the opportunity to discuss challenges and opportunities with the Executive Team in an informal setting.

Jann Gardner also informed Board Members that Pat Kearns, Consultant Ophthalmologist, would retire this month. Jann Gardner and Board Members commended Pat Kearns' exceptional work at NHS GJ and pivotal role in the development of the Ophthalmic service and more recently the innovative new Eye Centre.

2. Apologies

No apologies were noted.

3 Standing Declarations of interest

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

4. Updates from last meeting

4.1 Unapproved minutes from 19 November 2020 Board Meeting

Board Members approved the minutes from the previous Board meeting subject to minor amendments identified in items 7.1 and 8.3.

4.2 Board Action Log

No live actions noted.

4.3 Matters Arising

There were no matters arising noted.

5. Clinical Governance

5.1 Integrated Performance Report (IPR) Board Summary Report

Jann Gardner highlighted the IPR Board Summary Report and advised that each section would be discussed in detail throughout the Board Meeting.

The Board approved the Integrated Performance Report Board Summary Report.

5.2 Clinical Governance Report

Anne Marie Cavanagh presented the Clinical Governance report.

There were three Stage 1 complaints reported in November 2020, two of which were responded to within the five-day target. There were five Stage 2 complaints reported for October 2020, one of which was responded to within the twenty-day target.

There were two Serious Adverse Event (SAE) reviews commissioned in the month of September 2020. Crude hospital mortality figures were noted for the month of November 2020.

Hand hygiene compliance has decreased in some areas and work continues to address this through Clinical/Operational Leads and the Clinical Governance forums. Any issues are highlighted at the point of the audit so that immediate action can be taken.

The Board approved the Clinical Governance Report.

5.3 Clinical Governance Committee Update

Morag Brown gave an overview of the key points discussed at the Clinical Governance Committee meeting held on 14 January 2021, including the following:

- The Committee was provided with an update on SAE's which covered similar issues to those highlighted in the Clinical Governance report (item 5.2).
- Members were reassured that previously reported challenges with the Imaging system had been addressed and a two-step mitigation process had been implemented.
- The Committee noted the hand hygiene compliance figures, this area remains a key focus for Operational Managers and the Medical Director.
- Members were updated on the progress of the Covid Vaccination programme and commended the work undertaken to overcome the logistical challenges presented.
- The Research and Development Strategy was presented to the Committee who expressed their support with a full update to be provided at the next Clinical Governance Committee meeting.
- The Committee noted the ongoing review into patient visiting and support, assurance was given to Members that the Board continues to follow national guidelines while ensuring patients and families are kept up to date via other communication methods.

- Dr Nick Holloway presented a Deep Dive into the work the Orthopaedic Service had carried out during the pandemic. Board Members commended the stringent measures the team have undertaken to ensure the safety of patients and staff at a time when community transmission was high.

The Board noted the Clinical Governance Committee Update.

5.4 Covid Vaccination Update

Anne Marie Cavanagh advised that the Covid Vaccination Programme commenced on 14 December 2020. The Programme is progressing well and the Board awaits confirmation of further vaccination supply to continue the roll out.

The Board noted the Covid Vaccination Update.

6 Staff Governance

6.1 Staff Governance Update

Gareth Adkins presented the Staff Governance Board Update.

The sickness absence rate for November 2020 was noted and the main categories for absence were highlighted to Members.

The Health and Wellbeing Action Plan has been refreshed following approval of the Health and Wellbeing strategy. A key area of focus will be to build on and strengthen current staff support options.

The Turas appraisal completion rate within the year to 30 November 2020 was highlighted. The Appraisal process was paused during the pandemic and this has had an impact on completion rate. Action planning with departmental leads is underway to ensure improvement over the coming month. This is a key focus area and will be further reported on by the Staff Governance Person Centred Committee.

Medical job planning was temporarily suspended during the pandemic response phase. Job planning activity has now recommenced and Clinical Directors are scheduling job plan reviews. The number of job plans agreed and signed off will start to be reported on in the coming months.

The Board noted the Staff Governance Update.

6.2 Person Centred and Staff Governance Committee Update

Marcella Boyle highlighted key points from the Person Centred and Staff Governance Committee which took place on 13 January 2021.

The Committee welcomed progress on medical job planning and were assured of plans to develop this key process further.

The Committee discussed risk relating to Workforce and Staff Governance and were assured that a number of actions were ongoing in this area.

The Committee were presented with the Internal Communications plan and Committee Members noted the development and innovation of the Communications Team.

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

7. Finance and Performance

7.1 Operational Performance Report

June Rogers presented the Operational Performance Board Update and noted the following key points:

- The Outpatient waiting list was outlined, an intentional increase in referrals has been implemented to maximise productivity, particularly within Ophthalmology as the new Eye Centre expands its throughput.
- Progressive increase in Orthopaedic outpatients noted.
- Inpatient waiting list figures were highlighted.
- Cardiac surgery waiting list continues to reduce but starting to see a turnaround in recent weeks.
- The Eye Centre is now running through two theatres and operating at pre pandemic levels. Recruitment remains a challenge.
- 565 Cancer procedures carried out since July 2020.
- Impact of the Four Nation guidance on capacity was noted.
- Cardiac theatre lists converted to support other services where necessary.
- Bed pressures in Territorial Boards has impacted on NHS GJ as patients cannot be repatriated at usual rates, work is ongoing with referring Boards.

Marcella Boyle queried cancellation rates and how these should be categorised in future. June Rogers agreed to consider the categorisation of cancellations to reflect this going forward.

The Board approved the Operational Performance Report.

7.2 Finance Report

Colin Neil presented the Finance update reporting that the financial position for month eight indicated a total surplus of £252k, including income (core and non-core). Income indicated an under recovery of £7k for the year to date and core expenditure (pay and non-pay) reporting an underspend of £262k.

The Golden Jubilee Conference Hotel (GJCH) position was identified separately and Colin Neil outlined financial support received from Scottish Government.

The current income position (excluding GJCH) reflects cumulative under activity due to the pandemic response period, the top slice funding of £20.44m has been reduced to reflect the reduction in activity during the first six months of the year.

Colin Neil outlined the in-year savings targets and highlighted the amount formally implemented to date, the remainder will be captured on a non-recurring basis.

The Remobilisation Plan was discussed and the forecast figure identified a reduction in the requirement of £2.375m. This reduction has been noted to Scottish Government as part of the formal Remobilisation Plan submission.

Colin Neil summarised the presentation and confirmed that the Board remains in a stable financial position in terms of Revenue and Capital. A break-even position is forecast for this financial year. Efficiency savings plans have been disrupted due to the pandemic and although reasonable progress has been made in the current climate, a further assessment will be required in the next Quarter.

The Board approved the Finance Report.

7.3 Finance and Performance Committee Update

Stephen McAllister presented the Finance and Performance Committee update and advised that most of the points discussed at the Committee had been covered within Colin Neil's finance report.

Stephen McAllister advised that Members discussed the possibility of introducing a private session of Finance and Performance Committee when the Agile Governance Group is stepped down. The private session would facilitate the sharing of management information with Committee Members.

The Committee acknowledged the hard work and flexibility of GJCH staff during the pandemic response, with many being redeployed to support other areas of the Board and commended the leadership of the management team.

The Board noted the Finance and Performance Committee Update.

8 Business and Strategy

8.1 Hospital Expansion Phase One and Phase Two Update

Phase One

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

- Focus remains on accelerating recruitment to increase available Theatre capacity. The increase will be incremental as and when recruitment is successful.
- The Expansion Team continue to work closely with the Principle Supply Chain Partner to reduce the snagging/defects list. June Rogers confirmed that this is an expected process with any new build facility and the team are committed to addressing any noted defects promptly.
- The NDAP report received in December 2020 included a recommendation to undertake Post Occupancy Evaluation (POE) process to provide patient feedback on the building.

Phase Two

June Rogers provided an update on the progress with Phase Two and highlighted the following key points:

- Enabling works commenced on 6 July 2020. Historical foundations were found on site which impacted the timeline for piling works. The work has since completed

and it is anticipated that the time slippage will be recovered as the programme progresses.

- Workstream meetings continue weekly to design and plan the refurbishment of the Level 1 area, Orthopaedic Outpatients, Pharmacy and Theatres.
- Breakthrough into main hospital next year will be planned in detail and closely monitored to minimise the impact on activity.
- Work continues on the Assurance Review Report, this is being thoroughly checked for factual accuracy and an Action Plan has been initiated.

Board Members noted the Hospital Expansion Phase One and Two update.

8.2 Strategic Portfolio Governance Committee Update

Linda Semple highlighted key points from the first Strategic Portfolio Governance Committee which took place on 26 January 2021.

The Committee reviewed and approved the Terms of Reference and these will be presented to the Board in March for formal ratification.

The Committee received a number of key programme updates including NHS Scotland Academy, Centre for Sustainable Delivery and Hospital Expansion Programme.

The Boards Remobilisation Plan was discussed by Members and the timeline for approval and submission was noted.

The Committee received a presentation on Portfolio Management Approach. The presentation noted the ambition to further develop the Boards Programme Management Framework. Committee Members recognised the work that had been implemented to date to ensure current programmes are managed effectively and within a robust governance framework.

Board Members noted the Strategic Portfolio Governance Committee Update.

8.3 EU withdrawal

Anne Marie Cavanagh referred to the circulated paper and confirmed that no significant impacts had been experienced since withdrawal from the EU.

Anne Marie Cavanagh assured Board Members that the situation remains under close monitoring. NHS GJ Resilience and Service Leads remain alert to any changes and close to National Networks.

Board Members discussed potential impacts on medicine supply chains and it was noted that robust plans are already in place at a national level across NHS Scotland to ensure any risks are mitigated against.

Board Members noted their assurance that sufficient control measures are in place to manage any impacts associated with the EU withdrawal.

Carole Anderson joined the meeting.

9 Business and Strategy

9.1 The Remobilisation Plan and Financial Plan

Carole Anderson noted that NHS Scotland Boards have been asked by Scottish Government to submit a third iteration of their Remobilisation Plan (RMP) by the end of February 2021. This RMP will cover the period from 1 April 2021 to 31 March 2022.

The RMP should take account of the following areas; Living with Covid, Remobilisation, Recovery from Impact of Winter, Pandemic Surge and Impact of EU Withdrawal.

Carole Anderson highlighted the following key areas that will be emphasised in the RMP:

- NHS GJ intention to maintain a Covid-safe environment for all, including NHS GJ remaining a 'Covid-light' site.
- The implementation of lessons learned.
- Continued remobilisation and recovery of NHS GJ clinical services, including where possible return to 'business as usual'
- Modelling activity forecasts and Treatment Time Guarantee (TTG) waiting list projections for 2021/2022.
- Mutual aid, surge capacity and collaboration with partners.
- Future Board Strategy.
- Further development as NHS Scotland's National Hospital.
- NHS Scotland Academy.
- Centre for Sustainable Delivery.

The timetable for development, Board approval and submission of the RMP was noted:

- Draft RMP and activity modelling to be presented through NHS GJ Agile Governance Group 18 February 2021.
- Formal sign-off by the Board in March 2021 following Scottish Government review and feedback.

Colin Neil presented the first draft of the Financial Plan 2021/22 and highlighted the following key aspects:

- Publication Scottish Parliament budget is planned for 28 January 2021.
- There have been two different scenarios agreed via Scottish Government/ Corporate Finance Network (CFN) for financial plan modelling.
- A 3% pay uplift against all pays was agreed with Scottish Government/CFN for Financial Plan modelling subject to published budget policy.
- High level 2021/22 Covid forecast return indicates additional cost to £15.8m. Recovery Plan will be a key element of this (£12m last year).
- Funding has been identified in collaboration with Scottish Government as part of Infrastructure funding for Director of the NHS Scotland Academy and project management support. The Financial Plan assumes a cost neutral position.
- The forecast for the CfSD workforce was outlined. This covers posts from Director level through to programme support and administration and associated non-pay costs.
- Current models suggest the efficiency savings programme is likely to be between £3.2m and £4.3m.

Colin Neil assured Board Members that any submissions to Scottish Government will be clearly identified as 'Draft - subject to full Board approval'.

The Board noted the Remobilisation Plan and Financial Plan updates and approved the proposed RMP submission timetable.

Carole Anderson left the meeting.

10 Minutes for Noting

10.1 Clinical Governance Committee Approved Minutes

The Board noted the Clinical Governance Committee approved minutes for the meeting held on 4 November 2020.

10.2 Person Centred and Staff Governance Committee Approved Minutes

The Board noted the Person Centred and Staff Governance Committee approved minutes for the meeting held on 5 November 2020.

10.3 Finance, Performance and Planning Committee Approved Minutes

The Board noted the public Finance, Performance and Planning Committee approved minutes for the meeting held on 4 November 2020.

11 Any Other Competent Business

There was no other competent business to record.

12 Date and Time of Next Meeting

The next scheduled meeting of the NHS GJ Board is Thursday 18 March 2021 at 10am.

The meeting closed at 12:10pm