****Approved Minutes

**Strategic Portfolio Governance Committee**

18 January 2022, 1000 - 1230

Via MS Teams

**Members**

Linda Semple Non-Executive Director *(Chair)*

Elaine Cameron Non-Executive Director *(Vice Chair)*

Anne Marie Cavanagh Director of Nursing & AHPs

Colin Neil Director of Finance

Gareth Adkins Director of Quality, Innovation and People

Jann Gardner Chief Executive

June Rogers Director of Operations

Mark MacGregor Medical Director

Jane Christie-Flight Employee Director

Morag Brown Non-Executive Director

**In Attendance**

Catherine Calderwood National Clinical Director, Centre for Sustainable Delivery

Jessica Henderson Associate Director – Strategic Planning and Programmes, Centre for Sustainable Delivery (agenda item 5.1)

Katie Cuthbertson National Director, Centre for Sustainable Delivery (agenda item 5.1)

Russell Scott Head of Strategic Planning and Programme Management Office, Centre for Sustainable Delivery (agenda item 5.1)

Kevin Kelman Director, NHS Scotland Academy (agenda item 5.3)

Susan Douglas-Scott CBE Board Chair

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

Gerard Gardiner Head of Corporate Governance & Board Secretary

Graham Haddock Chair of National Endoscopy Training Programme Board (agenda item 5.3).

**Minutes**

Christine Nelson Personal Assistant

1. **Chairs Introductory Remarks**

Linda Semple opened the meeting and thanked those present and in attendance for joining.

**2 Apologies**

Stephen McAllister Non-Executive Director

**3 Declarations of interest**

The Committee noted that Jann Gardner is a Visiting Professor with the University of Strathclyde and that Kevin Kelman is a member of the Advisory Board of the Confucius Institute for Scotland’s Schools, University of Strathclyde.

1. **Updates from the Meeting Held on 4 November 2021**
   1. **Unapproved Minutes of Last Meeting**

The minutes of the meeting held on 4 November 2021 were approved as an accurate record of the meeting.

**4.2 Action Log**

There were no outstanding actions and no further actions were identified.

* 1. **Matters Arising**

There were no matters arising highlighted.

1. **Strategic Updates**

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

Jess Henderson, Katie Cuthbertson and Russell Scott joined the meeting.

Jann Gardner informed the Committee that Katie Cuthbertson took up position of National Director of CfSD on 17 January 2022 on a 2 year secondment.

Jann Gardner provided an overview of the newly agreed governance arrangements for CfSD including the establishment of a Strategy Board, Chaired by John Burns, Chief Operating Officer of NHS Scotland with Jann Gardner as Vice Chair. Proposals and development opportunities for CfSD will be endorsed by the Strategy Group, which will have a membership including National and Territorial Board Chief Executives. This will enable CfSD to provide updates to the Board Chief Executives. Governance arrangements to Strategic Portfolio Governance Committee (SPGC) will remain unchanged and finalised Terms of Reference for the Strategy Board will be shared with the Committee when available.

Susan Douglas-Scott congratulated Katie Cuthbertson on her promotion and recognised the achievement of Jann Gardner to achieve Vice Chair position on the CfSD Strategy Board.

Jann Gardner highlighted that a CfSD Programme Delivery Board is also being established which will provide updates and outcomes to the SPGC.

**5.1.1 CfSD Programme Presentation**

Katie Cuthbertson provided an update on the Key Achievements including the endorsement of the mid-year review by the Health and Social Care Management Board (HSCMB) and the agreement of the new governance structure. CfSD had been confirmed as the host of an Innovation Summit and has coordinated the Accelerated National Innovation Adoption (ANIA) pathway which is now being mobilised.

Priorities for the next reporting period include mobilisation of the new governance structure and the ANIA collaborative governance along with producing a proposal to develop the Business Intelligence function in CfSD.

Katie Cuthbertson asked the Committee to note that progress across the 2021/22 work-plan had been impacted by the Omicron wave of the Covid-19 pandemic, resulting in Boards having less capacity to engage in CfSD initiatives.

Katie Cuthbertson updated the Committee on CfSD programmes and workstreams including current and projected impact for Scottish Access Collaborative (SAC), Modernising Patient Pathway Programme (MPPP) and Cancer Performance and Early Diagnosis.

Jess Henderson provided an update on the Innovation programmes and highlighted Jason White had taken up the role of Head of Innovation for CfSD. Jess Henderson asked the Committee to note that Opera Heart Failure had been identified as the pathfinder for ANIA and that a recommendation had been made for Digital Dermatology to be within the first tranche.

Katie Cuthbertson informed the Committee that 8 Boards have now submitted Heat Maps with a further 5 under review with 2 outstanding.

Katie Cuthbertson reported that blue dot methodology is being utilised to look at outpatient waiting lists, looking at case studies and promoting best practice, for example the Effective Quality Interventions and Pathways (EQuIP) Hernia pathway.

Katie Cuthbertson informed the Committee the Research Electronic Data Capture (REDCap) Database is being utilised to reduce bed days.

Katie Cuthbertson reported that 5 Health Boards are now active with Digital Dermatology work, with almost 4000 patient appointments achieved. More than 4500 SCOTCAP Colon capsule procedures and 2000 Cytosponge procedures have been completed.

Jess Henderson provided an overview on emerging initiatives and an update on the further development of the pipeline highlighting the potential for Active Clinical Referral Triage (ACRT) to move into other specialties.

Other key activities for CfSD were outlined and Dr Catherine Calderwood provided an overview of the Associate Clinical Director (ACD) portfolios. Jann Gardner highlighted that Dr Catherine Calderwood will develop the ACD roles to include Nursing and Allied Health Professional (AHP) representation.

Linda Semple thanked the team for their update, stating it was useful to see the quantity of impact but highlighted the importance of also demonstrating financial impact.

Jess Henderson confirmed that value and impact work is ongoing with a short life working group established. Productivity and finance will be included.

Colin Neil confirmed the importance of financial assurance measures, noting the Deputy Director of Finance will commence employment on 7 March 2022.

Linda Semple shared comments received from Stephen McAllister noting the excellent progress of CfSD and its outstanding potential going forward while recognising that risks remain on the current risk register.

The Committee noted the CfSD Programme Update.

**5.1.2** **CfSD Assurance Statement**

Jann Gardner presented the CfSD Assurance Statement and asked the Committee to note progress, taking into account of the Covid-19 challenges experienced.

Jann Gardner asked the Committee to note and discuss:

* The revised format and content of reporting and highlight any changes required
* The HSCMB decision to establish the Strategy Board and Programme Delivery Board to support governance arrangements.
* The progress with national programmes including strategic priorities and redesign of the portfolio to align with national priorities of the NHS Recovery Plan.
* The risks, current mitigations and planned mitigations.

Linda Semple accepted the assurance the Committee received on the progress of CfSD and will report this to the Board and Scottish Government.

Linda Semple requested consideration be given to re-profiling agenda items and asked the Non Executive Directors for their thoughts on this. Dr Catherine Calderwood suggested an impact statement could be provided with further deep dives/ seminars/ patient journeys being provided separately. The Committee held a discussion around this and it was agreed that Gareth Adkins and Jann Gardner would report back to Committee.

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| **Action No.** | **Action** | **Owner** | **Target date** |
| 180122/01 | Gareth Adkins and Jann Gardner to report to Committee with proposals on the development of more in-depth updates to the Committee, with higher level governance updates provided at SPGC meetings. | GA/JG | 10 March 2022 |

**5.2 NHS Golden Jubilee Strategic Updates**

**5.2.1 NHS Golden Jubilee Strategic Planning Update**

Gareth Adkins provided an overview of the NHS GJ portfolio of strategic programmes. Next steps include moving from an Annual Delivery Plan to a 3 year process for finance, strategy and workforce plans and the implementation of a project management system.

Carole Anderson reported that all initiatives are progressing well with only slight slippage. Some projects have been highlighted amber to reflect updated timeframes, mostly due to the impact of Covid-19. Programme Leads are re-evaluating pipeline dates.

Carole Anderson asked the Committee to note the updated timescales, the key achievements in the reporting period, including the addition of Endovenous Vein Harvesting to the Strategic portfolio, the next steps and issues for the portfolio. Future reports will include benefit measurement.

Gerard Gardiner reported that Stephen McAllister had commented that he continued to be impressed by the volume of activity and was supportive of the development of a programme management system to support the recording and overall strategic management of the variety of complex projects under the auspices of SPGC.

Linda Semple praised the reporting processes in NHS GJ and confirmed the Committee’s assurance.

The Committee noted the Strategic Planning Update

**5.2.2 Prioritisation Exercise**

Gareth Adkins provided the background to the prioritisation exercise and reported that the Committee would receive regular updates on the portfolio.

Carole Anderson presented the Strategic Prioritisation Update including:

* A review of all ongoing projects and programmes
* Development, testing and application of an assessment model
* The outcomes of initial examination
* An update on further evaluation
* Planned timescales for conclusion of the portfolio review.

Carole Anderson reported that next steps will include:

* A presentation of further analysis to the Executive team in February
* Agreement reached on any phasing of activity with Senior and Executive Leads
* All major programmes will remain unaffected
* An updated portfolio proposal will be presented to the Strategic Programme Board and SPGC in March 2022
* Adoption of the revised portfolio will be included in the forthcoming Annual Delivery Plan.

Linda Semple commended the approach.

Jann Gardner commended the team, emphasising the importance of collaboration in developing proposals.

Susan Douglas-Scott reported her enthusiasm at the progress of the strategic programmes.

Jann Gardner shared the ambition to develop a health economics based case for future CfSD programmes with the development of a health economics tool to support benefits realisation.

The Committee noted the Strategic Prioritisation Update.

**5.2.3 NHS Golden Jubilee Expansion/National Treatment Centres (NTC) Update**

June Rogers provided the following update on the Hospital Expansion Programme:

* Defects monitoring in phase 1 is ongoing and water flushing issue is near resolution. The facility is working well but not at full capacity due to continued requirement for physical distancing.
* Communications regarding the logistics for connection of phase 2 to the existing building are ongoing with level 1 breakthrough planned for February 2022. The first gateway review for phase 2 is being planned.
* Issues affecting the programme include Covid-19 and supply of some materials. There are no changes to the high risks reported on the Risk Register.
* The NTC Programme Board has reformed and is focusing on ensuring projects are running on time and on budget.

Dr Catherine Calderwood highlighted how well placed CfSD are to be part of NHS GJ in projects like the Cataract Work as this aligns with national work in this area.

June Rogers agreed, highlighting the Indian Eye Centre model and having the new Endoscopy suite will be very beneficial along with the opportunity to consider green Theatres within the new development.

Linda Semple acknowledged that the Elective Treatment Centres are crucial in decreasing waiting lists.

Jann Gardner highlighted that the relationship between NHS GJ, CfSD and NHS Scotland Academy (NHSSA) was very important for Scotland.

Jann Gardner reported on the plan to meet with Ophthalmology and Orthopaedic teams in early February to discuss the strategic vision, visit the new facility and discuss the challenges, with an aim to re-visit projections and aspirations and to realise the original plan.

Carole Anderson reported that a service plan template is being developed and this will be tested on Ophthalmology and Orthopaedics. Links are also being made with CfSD regarding Patient Reported Outcome Measures (PROMS) to ensure an overall view of Orthopaedics.

The Committee noted the Expansion and NTC update.

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

Kevin Kelman and Graham Haddock (Chair of the National Endoscopy Training Programme (NETP)) joined the meeting.

Graham Haddock reported that the purpose of the NETP is to support NHSSA in delivering Endoscopy training. Graham Haddock outlined the membership of the group and explained its focus on waiting lists both for new and surveillance cases due to a low number of trained Endoscopists along with the number of staffed Endoscopy lists.

The pause in activity caused an increase from 6000 to 20000 cases. Challenges are being experienced in training with a lack of courses, sites and faculty to deliver training. The solution identified was to upskill trainers and courses similar to improvements made for Colonoscopy. SLA’s are being considered with Boards’ on annualised contracts and more Joint Advisory Group (JAG) accredited training sites are being developed. Immersion and simulation training is being planned. Health Care Support Workers are being trained to support practitioners and it is hoped this will launch in April 2022.

June Rogers highlighted that NHS GJ do not have JAG accreditation and asked if this was common. Graham Haddock gave assurance that NHS GJ are progressing towards accreditation. The new Endoscopy Suite at NHS GJ is unlikely to be open until 2023 but the aim was to have at least one room functioning at the required level.

Susan Douglas-Scott urged colleagues to prioritise space as soon as possible to enable NHS GJ to take a leading role in the programme.

Jann Gardner thanked Graham Haddock and his team for the progress on this work and stated that this opportunity was very exciting for Scotland.

Graham Haddock agreed having state of the art facilities and trainers are both crucial elements to this programme.

Mark MacGregor stated that there had been long Endoscopy waiting lists for a long time and it was exciting to see a national approach to deal with both quantity and quality.

Graham Haddock highlighted that having resource to invest in training could be built into Consultants’ time to help attract applicants to the service.

Morag Brown welcomed the national approach and asked if there was a future plan to increase surgical capacity as a result of Endoscopy results or mitigation practices to support clinicians with waiting lists. Graham Haddock responded that there are concerns regarding surgical capacity. NTC staffing needs considered and surgical training had expanded but more was needed. The immediate focus was on catching up but acknowledged that forecasting was important.

Linda Semple thanked Graham Haddock for the update.

Kevin Kelman provided an update on the NHSSA 7 key programmes and an overview of training courses available for technical and non-technical skills for Health and Social Care workers.

Emerging developments included:

* Expanding perioperative practice beyond NTCs.
* National Midwifery Council (NMC) Observed Structured Clinical Examination (OSCE) Prep Centre was being developed.
* NHS Education Services (NES) are developing an education programme for Medical Associate Professionals.
* Scottish Government had commissioned training for Band 2 Health Care Support Workers with NES.
* Business cases are being developed for Bronchoscopy and EVH training.
* Training opportunities are being explored for Ophthalmology, Sonography, Healthcare Scientists, Augmented/Virtual and Mixed Reality and Robotics.

Kevin Kelman outlined the planned next steps with the next Strategic Programme Board planned for 15 February 2022 and a development session along with the Annual Operating Plan and key strategic performance indicators.

Linda Semple noted the Venn diagram stating that it appeared NHS GJ, CfSD and NHSSA are fitting together well.

Susan Douglas-Scott agreed that it was good to see this coming together.

Linda Semple highlighted that young people are not always made aware of the breadth of opportunities in the Health and Social Care (H&SC) Sector and NHSSA work was encouraging.

Morag Brown queried the relationship between NHSSA and the Alliance H&SC Academy. Jann Gardner responded that Kevin Kelman’s role had been instrumental in the positive relationship between NHS GJ and NES.

Jann Gardner confirmed that consideration was being given on how more effective links to the H&SC setting could be made but acknowledged this would take time.

Gareth Adkins reported that the Alliance H&SC Academy dates back approximately 4 years and was a virtual forum, unlike NHSSA.

Kevin Kelman highlighted that the new Director of Social Care post in NES should help to enhance existing connections.

Linda Semple noted the significant amount and speed of work carried out by NHSSA.

The Committee noted the update provided for NHS Scotland Academy.

**5.4 University of Strathclyde**

Jann Gardner confirmed that the submission to the University of Strathclyde regarding University status had now been sent and a response was awaited. An update will be provided to the Committee when confirmation is received.

Colin Neil as the procurement lead reported that Angela Smith, Head of Procurement at NHS GJ was linking with National Procurement to enable a more rapid response to research requests as they were received.

Linda Semple agreed this work was very positive.

Gerard Gardiner reported that Stephen McAllister had commented that this initiative remained an outstanding piece of work, which he continued to support and was happy to approve.

The Committee approved the process of NHS GJ requesting University status with University of Strathclyde.

**6 Any other Competent Business**

There was no further business raised.

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

Linda Semple confirmed the main points that the Committee was content to provide assurance to the Board on is the work of CfSD, NHSSA and University of Strathclyde.

**8 Date and Time of Next Meeting**

Thursday 10 March 2022, 1000 – 1230.