****Approved Minutes

**Strategic Portfolio Governance Committee**

5 May 2022, 1300 - 1530

Via MS Teams

**Members**

Linda Semple Non-Executive Director *(Chair)*

Anne Marie Cavanagh Director of Nursing & AHPs

Colin Neil Director of Finance

Gareth Adkins Director of Quality, Innovation and People

Jane Christie-Flight Employee Director

Professor Jann Gardner Chief Executive

Dr Mark MacGregor Medical Director

Morag Brown Non-Executive Director

Stephen McAllister Non-Executive Director

**In Attendance**

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

Caroline Handley Diagnostics Service Manager (agenda item 6.4)

Gerard Gardiner Head of Corporate Governance & Board Secretary

Graham Stewart Deputy Director of Finance

Jessica Henderson Associate Director – Strategic Planning and Programmes, Centre for Sustainable Delivery (agenda item 5.2)

John Scott Director of Facilities and Capital Projects (agenda item 5.1.2)

Juliette Murray National Associate Clinical Director, Centre for Sustainable Delivery (agenda item 5.2)

Katie Cuthbertson National Director, Centre for Sustainable Delivery

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

Lynne Ayton Interim Director of Operations

Rory Mackenzie National Associate Clinical Director, Centre for Sustainable Delivery (agenda item 5.2)

Susan Douglas-Scott CBE Board Chair (from 1335)

**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**

Catherine Calderwood National Clinical Director, Centre for Sustainable Delivery

June Rogers Director of Operations

**3 Declarations of interest**

There were no declarations of interest.

1. **Updates from the Meeting Held on 10 March 2022**
   1. **Unapproved Minutes of Last Meeting**

The minutes of the meeting held on 10 March 2022 were approved as an accurate record of the meeting.

**4.2 Action Log**

There were no outstanding actions from the previous meeting.

* 1. **Matters Arising**

There were no matters arising from the last meeting.

1. **Strategic Updates**

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

**5.1.1 NHS GJ Strategic Planning Update**

Gareth Adkins referred the Committee to the Strategic Planning Update paper circulated and highlighted the key achievements for the reporting period including:

* A nine week Assurance Review for the expansion has commenced;
* Office infrastructure works have commenced on level 5 (former NHS24 area);
* Endoscopic Vein Harvest (EVH): revised business case approved by the Capital Group;
* Strategic Portfolio Development & Management: Further work undertaken with teams and divisions to consolidate portfolios has been presented to relevant Executives and Sponsors for their verification and endorsement. A consolidated set of findings will be presented to Executive Director Group on 9 May;
* Robotics work has been moved to business as usual status. Ongoing work will primarily be research and training, which will be progressed through the NHS Scotland Academy (NHSSA) and through NHS Golden Jubilee Research Institute.

Carole Anderson stated that the Robotics Strategy has been endorsed by the Programme Board and therefore will become a business as usual matter and not included in the Strategic Programmes Summary Report.

Carole Anderson informed the Committee that the emerging initiatives are currently being revised by the Executive Directors and the report will be updated to reflect changes.

Carole Anderson referred the Committee to the Strategic Programme Summary Report circulated and provided some highlights.

Gareth Adkins stated that the innovation programme will be progressed through the Centre for Sustainable Delivery (CfSD) and NHS Golden Jubilee (GJ) will progress the local innovation strategy as part of the research strategy. CfSD’s Innovation work will be aligned to the National priorities and progressed through the Accelerated National Innovation Adoption programme (ANIA)

Gareth Adkins highlighted that the ongoing relationship with University of Strathclyde is more aligned to the Research Strategy and gave assurance that opportunities to collaborate in research will be explored as the partnership progresses.

Linda Semple acknowledged the complexities around the strategic portfolio and the innovation programmes and thanked those in attendance for their presentations.

The Committee confirmed they were content with the progress and updates provided.

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

John Scott presented an update on the NHS GJ Expansion including outstanding defects and issues. A solution to the water flushing issue in phase 1 has now been agreed with the main contractor. Phase 2 assurance review meetings have now concluded. Significant progress has been made on the stage 3 action plan and the stage 4 assurance review process has begun.

John Scott highlighted the issues affecting progress of the programme, adding that the high risks identified remain unchanged.

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

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

Jess Henderson, Rory Mackenzie and Juliette Murray joined the meeting.

Katie Cuthbertson referred to the CfSD Assurance paper circulated to the Committee and highlighted the current key priorities, including:

* Progressing the proposal for National Elective Co-ordination Units (NECU), which is proposed to be established to support capacity nationally. An operating framework is to be submitted to Scottish Government (SG) by Friday 13th May.
* Meetings are currently being held with Health Boards who completed Heat Maps last year. The Heat Maps for 2022/23 are being simplified and will be more focused. A national Heat map forum has been held to share approaches and challenges. Heat maps will be formalised through SG guidance.

Katie Cuthbertson informed the Committee that the CfSD Strategy Board endorsed the following:

* Clinical Leadership model with refinement of Specialty Delivery Groups (SDGs) and recruitment of Nursing and AHP National Associate Clinical Director (NACD) roles;
* Establishment of NECU;
* Review of Heat Maps;
* Accelerated National Innovation Adoption (ANIA) endorsements and approvals to move to test and development of Chest X-Ray Artificial Intelligence and not to proceed with Heartflow programme proposal; and
* Scoping of the Green Theatres workstream, with engagement with SG around resourcing to move the project forward, working closely with other Health Boards.

Jess Henderson provided an update on the current project status for ANIA, which will be launched formally at the NHS Event in June.

Katie Cuthbertson highlighted the current risk around access to data and analytical capability in order to demonstrate the impact of CfSD.

Katie Cuthbertson outlined the upcoming areas of focus, which are:

* NECU;
* Data Capture and Analysis;
* ANIA further strategic assessments;
* Scoping of Green Theatres Workstream; and
* NHS Scotland Event and ANIA launch.

Katie Cuthberston confirmed that SG will confirm the priority specialties for the SDGs.

Gareth Adkins asked for more detail on the decision not to take Heartflow through the ANIA process. Jess Henderson explained that the decision was taken based on cost benefit and level of transformational change. It is available on a national procurement contract and IT integrations are not complex. Gareth Adkins requested that the outputs of the assessment be shared with the NHS Golden Jubilee when appropriate for consideration locally

Katie Cuthbertson confirmed that the Heartflow programme is still linked into the Cardiac SDG and CfSD will continue to work on this. The decision made only related to the programme not being adopted for the ANIA process.

Jann Gardner highlighted that CfSD are working with SG on how best to communicate this type of decision with Health Boards and discussions are taking place with the NHSGJ Communications team.

Rory Mackenzie stated that future programmes will be discussed by SDGs to reach consensus before programmes reach the stage of Heartflow.

Morag Brown asked about patient involvement in SDGs. Rory Mackenzie confirmed that discussions are underway including what stage to involve users, how best to access users and how national or external organisations could access the SDGs. Morag Brown responded that it is best to encourage involvement as early as possible.

Gareth Adkins suggested using patient panels and lived experience.

Juliette Murray gave reassurance that patients have been involved in SDGs in the past and will continue to be inter-woven to ensure input is as productive as possible.

Morag Brown encouraged legitimate patient bodies to be invited and to ensure equitable involvement in service design.

Jane Christie-Flight suggested early engagement with Staffside would be beneficial on any changes that would impact workforce.

Rory Mackenzie provided an update on the plans for SDGs to include nurse, AHP and Primary Care representation. The remit of the SDGs will align with the key priorities of CfSD with an initial focus on improvements.

Juliette Murray confirmed the aim to have both clinical and operational representation from every Health Board to ensure stakeholder support from an early stage of project evolution.

Gareth Adkins asked if there were any challenges identified with existing groups. Juliette confirmed the need to balance capacity and demand and agreed the need to be clear on remit and focus.

Rory Mackenzie highlighted the attraction for SDGs is the ability to influence processes. It was confirmed that CfSD could offer Secretariat and Project Management Office (PMO) support.

Linda Semple requested that the NACD’s specialties be included on the organisation chart.

The Committee noted the CfSD Programme Update. Jess Henderson, Juliette Murray and Rory Mackenzie left the meeting.

|  |  |  |  |
| --- | --- | --- | --- |
| **Action No.** | **Action** | **Owner** | **Target date** |
| 050522/01 | Jess Henderson to share outputs of Heartflow assessment for ANIA with Gareth Adkins. | JH | July 2022 |
| 050522/02 | NACD specialties to be included in organisation chart. | KC | July 2022 |

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

Kevin Kelman highlighted the areas that NHSSA has been identified to support the National Workforce Strategy for Health and Social Care (H&SC) in Scotland.

Kevin Kelman stated that the National Treatment Centres (NTCs) are the key driver in the NHSSA and provided an update on some of the current projects:

* Cohort 3 of the Foundations of Perioperative Practice Programme is due to start in June 2022;
* The Accelerated Anaesthetic Assistants Programme is scheduled to begin in July 2022;
* The National Endoscopy Training Programme training the trainer sessions have taken place. Interviews are underway for faculty members and immersion training is being hosted at NHS GJ;
* The National Assistant Practitioners’ (Endoscopy) Programme is being set up in collaboration with Scottish Qualifications Association (SQA), elearning for Healthcare and the Joint Advisory Group on Gastrointestinal (GI) Endoscopy;
* Dates have been agreed up to December 2022 for the National Clinical Skills for Pharmacists’ Programme;
* Sonographers will be trained with Glasgow Caledonian University and NHS GJ as part of the National Ultrasound Training Programme;
* Digital learning to support international nurses begins week beginning 9th May 2022;
* National Preparation for Work in H&SC Digital Learning Programme is progressing well; and
* Foundation plans are underway for NHS GJ Skills and Simulation Centre.

Kevin Kelman reported that the National Surgical First Assistants’, Bronchoscopy, Cataract Surgery and EVH programmes are currently in the Development Stage and the Decontamination roles and Robotic Assisted Surgery programmes are at the exploration stage.

Kevin Kelman outlined the plans to widen access routes, and the ambition to establish NHSGJ as an anchor institution. Five NHS Scotland Youth Academy Huddles have been established along with 3 huddles for Armed Forces Service Leavers and Veterans.

Linda Semple commended the speed with which programmes of work were being developed and implemented.

Jann Gardner reflected on the similarity between NHSSA and CfSD and start-up organisations, noting that work is progressing at pace now structures and governance are in place. Jann Gardner noted the positive synergies across programmes.

Jann Gardner noted that the challenge will be to scale up the programmes most needed for Scotland.

Linda Semple noted enthusiasm within the Committee for the huddles and noted the extensive challenges and importance of this work.

The Committee noted the update provided for the NHSSA.

**6 Corporate Governance**

Linda Semple apologised for papers 6.1, 6.2 and 6.3 being provided at short notice

**6.1 SPGC Annual Report Financial Year 2021/22.**

The Committee approved the SPGC Annual Report for 2021/22.

**6.2 SPGC Draft Annual Workplan 2022/23**

Linda Semple asked the Committee to provide comments on the Chair’s comments.

Linda Semple requested that the Communications section be standardised in common with other Board Committee Workplans. The Committee noted the ability to amend the workplan as required to attend to this.

**6.3 SPGC Terms of Reference Financial Year 2022/23**

Linda Semple asked the Committee if the detail around the CfSD assurance statement is sufficient. The Committee approved the Terms of Reference subject to further detail on the CfSD assurance statement being added.

|  |  |  |  |
| --- | --- | --- | --- |
| **Action No.** | **Action** | **Owner** | **Target date** |
| 050522/03 | Further detail on the CfSD assurance statement to be added to the SPGC Terms of Reference. | LS/GG | July 2022 |

**6.4 Radiology Strategic Development Plan**

Caroline Handley joined the meeting to provide an overview of the Radiology Strategic Plan, beginning with the reason for this review, outlining the increase in demand in acute care, increased waiting times and the reduction in Health Board outpatient activity.

Caroline Handley advised that Siemens had been appointed to carry out a Review which included service and pathway reviews, identification of the key challenges and opportunities, followed by a capacity/ workforce modelling tool being supplied.

The outcomes identified an opportunity for digital transformation to improve flow, limited opportunity for improvement in workflow but an opportunity to increase capacity with existing workforce and equipment. A focus on NHS GJ Radiology capacity as a resource for NHS Scotland in capacity, training and expertise has been agreed.

Caroline Handley outlined the aim of the development plan is to be recognised as a Centre of Excellence for cardiac imaging and create a modern, agile and sustainable imaging service that delivers safe, effective and person-centred care to the people of Scotland through collaboration with regional and national partners by April 2025.

Caroline Handley provided an overview of the workstreams identified and the proposed governance structure and framework to include engagement with key stakeholders.

Carole Anderson stated that the Radiology plan will be incorporated into a project charter and included in the Strategic Update at the next meeting.

Linda Semple was pleased to see this work being undertaken given the national demand. Linda Semple was also assured that the plan being incorporated into existing governance structures provided reassurance that the Committee’s oversight and assurance roles could be effectively discharged.

Susan Douglas Scott commended progress demonstrated and asked Caroline Handley to pass on her thanks to those responsible.

Susan Douglas Scott asked if the radiology work was linked to the digital transformation strategy. Carole Handley responded that eHealth has been engaged throughout the process to ensure understanding and the plan has been developed with them.

Morag Brown stated it was good to see concerns being addressed, that the strategic overview was helpful and was looking forward to seeing an improvement in the imaging performance and performance reporting. Caroline Handley responded that the project group are developing the medical workforce and currently have workarounds. The Scottish National Radiology Reporting Service (SNRRS) is helping substantially but digital reporting is crucial to the transformation of reporting.

The Committee noted the Radiology Strategic Development Plan.

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

Linda Semple confirmed the following items would be reported to the Board of NHS Golden Jubilee at its meeting on 24th May 2022:

* The Committee was updated on the progress of the National Elective Centre build, noting that the programme is progressing to time and budget. The Committee further noted the commencement of assurance reviews via NHS Assure. The Committee further noted the measures in place to monitor availability and cost of materials whose sourcing is affected by global supply shortages and the War in Ukraine;
* The Committee was assured with the progress reported on the work of the Centre for Sustainable Delivery;
* The Committee received an update on NHS Scotland Academy progress and was assured as regards the progress and content reported;
* The Committee approved revised Committee Terms of Reference and the draft Annual Report for onward reporting to the Board of NHS Golden Jubilee;
* The Committee noted the Radiology Strategy Update, and noted that this would become a feature of the wider strategic portfolio considered earlier in the agenda;
* The Committee noted that reporting on programmes of work is robust.

**8 Any other Competent Business**

There were no further items raised.

**9 Date and Time of Next Meeting**

Tuesday 28 June 2022, 1330 – 1600.