Unapproved Minutes
Public Board Meeting
14 February 2019

Members

Susan Douglas-Scott CBE  Board Chair
Phil Cox  Vice Chair
Kay Harriman  Non Executive Director
Karen Kelly  Non Executive Director
Marcella Boyle  Non Executive Director (part)
Linda Semple  Non Executive Director
Stephen McAllister  Non Executive Director
Jane Christie-Flight  Non Executive Director / Employee Director
Jann Gardner  Chief Executive
June Rogers  Director of Operations
Julie Carter  Director of Finance
Anne Marie Cavanagh  Nurse Director
Mike Higgins  Medical Director
Gareth Adkins  Director of Quality, Innovation and People
Angela Harkness  Director of Global Development and Strategic Partnerships

In attendance

Sandie Scott  Head of Corporate Affairs
Opening Remarks only:  Carole Anderson  Head of Strategy and Performance./ LGBT Equality Lead

Minutes

Christine McGuinness  Corporate Affairs Manager

Apologies

Mark MacGregor  Non Executive Director

Standing Declarations of Interest

Susan Douglas-Scott CBE  Chair, Independent Living Fund
Linda Semple  Non Executive Director, NHS Ayrshire & Arran
Stephen McAllister  Non Executive Director, NHS Forth Valley
Angela Harkness  Trustee, Scottish Sports Futures
Karen Kelly  Special Advisor, NHS Tayside Audit Committee
Jane Christie-Flight  Board Member, Scottish Pensions Advisory Board
1. **Chair’s Introductory Remarks**

1.1. Susan Douglas-Scott CBE opened the meeting and made the following remarks.

- Welcomed Jann Gardner to her first meeting as Chief Executive.

- Welcomed Mike Higgins to his last meeting as Medical Director before he retires at the end of March and thanked him for his service over the last 11 years.

- Thanked June Rogers for acting as Interim Chief Executive.

  Thanked Carole Anderson and Jane Christie-Flight for their role in the Golden Jubilee Foundation being ranked 37th in the Stonewall Top 100 Employers list.

- Our patients Roger Marr and Julie-Ann Morris were the first people in Scotland to have a heart transplant using the Organ Care System (OCS) in 2018. The new technology extends the amount of time a donated organ can remain outside the body in a condition suitable for transplantation, while giving surgeons the opportunity to assess an organ’s function.

- Schoolgirl Anna Hemphill has done outstanding work to support the Golden Jubilee and she recently dropped off sacks full of presents for patients and families at the Golden Jubilee. Anna was just 10 years old when her mum Mary was first admitted to the Golden Jubilee National Hospital in 2011 to have aortic valve replacement surgery.

- Congratulated the Hotel team for receiving the VenueVerdict gold standard award for consistently delivering excellent customer experience throughout 2018, and for winning several awards at the regional Scottish Hotel Awards:

  - Large Conference Hotel of the Year for second year in a row
  - Most Accessible Hotel for the first time
  - Denis Flanagan, Food and Beverage Manager of the Year
  - Sasha Paton, Duty/Operations Manager of the Year
  - Margaret Young, Banqueting Individual of the Year
  - Gary Gault is Banqueting Chef of the Year.

1.2. Jann Gardner congratulated Chair Susan Douglas-Scott CBE on being awarded a Commander of the British Empire (CBE) in the Queen’s New Year’s Honours List 2019 for her outstanding commitment and well deserved achievement.

2. **Apologies**

2.1. Apologies were noted as above.
3. Declarations of Interest

3.1. The following changes were requested to the Standing Declarations of Interest:

**Additions:**
- Stephen McAllister: Non Executive Director, NHS Forth Valley
- Angela Harkness: Trustee, Scottish Sports Futures
- Karen Kelly: Special Advisor, NHS Tayside Audit Committee
- Jane Christie-Flight: Board Member, Scottish Pensions Advisory Board

**Removals:**
- Marcella Boyle: Interim Head of Public Partnerships, The Princes Trust

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<tr>
<td>140219/01</td>
<td>Minutes: Record new standing declarations of interest from Stephen McAllister, Angela Harkness, Karen Kelly and Jane Christie-Flight</td>
<td>Christine McGuinness</td>
<td>NEW</td>
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3.2. All other declarations are as noted above.

4. Updates from last meeting held on 6 December 2018

4.1. Minutes of last meeting

The minutes of the last meeting were read and approved for accuracy with the minor amendments below recorded and actioned:

- P1, Members – Add Gareth Adkins
- P1, Standing Declarations of Interest – Change Marcella Boyle’s role with The Princes Trust from Trustee to Interim Head of Public Partnerships
- P5, 5.1.2 – stop Gareth Adkins’ comment after ‘increasing’.
- P14, 7.3.2 – stop final sentence at ‘financial plan’.

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<tr>
<td>140219/02</td>
<td>Minutes: Amend/approve as discussed</td>
<td>Christine McGuinness</td>
<td>NEW</td>
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<tr>
<td>140219/13</td>
<td>Minutes: Publish approved minutes online</td>
<td>Christine McGuinness</td>
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### Item 4.1

#### 4.2. Actions

4.2.1. All previous actions were updated and closed, except for the following:

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<tr>
<td>061218/02</td>
<td><strong>Minutes:</strong> Remove Marcella Boyle’s Trustee role with The Princes Trust as a Standing Declaration (once tenure completed)</td>
<td>Christine McGuinness</td>
<td><strong>Ongoing:</strong> Can be removed from 14 February 2019 meeting</td>
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<tr>
<td>061218/13</td>
<td><strong>Lung Transplant group:</strong> Send meeting information to Susan Douglas-Scott CBE</td>
<td>Mike Higgins (Lori Cassidy)</td>
<td><strong>Ongoing:</strong> Meeting date still to be set. Will be before 31 March 2019.</td>
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<tr>
<td>011118/05</td>
<td><strong>Clinical Governance Committee minutes:</strong> Circulate correct version</td>
<td>Christine McGuinness</td>
<td><strong>Ongoing:</strong> Awaiting minutes</td>
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<tr>
<td>020818/07</td>
<td><strong>Charity Trustees:</strong> Arrange training session on the role of Trustees and Endowment Funds</td>
<td>Julie Carter</td>
<td><strong>Ongoing:</strong> Moved to April Board Workshop</td>
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<tr>
<td>020818/14</td>
<td><strong>Strategy Development:</strong> Paper to be presented for Board approval by February 2019</td>
<td>Gareth Adkins</td>
<td><strong>Ongoing:</strong> Strategy session held at Board Workshop on 13 February. Board Strategy will come back for approval</td>
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4.3. **Matters Arising**

4.3.1. **Ophthalmology**

4.3.1.1. Linda Semple commented that it is positive that a high percentage of on the day cancellations are being filled from Outpatient clinics. She added that this would be a great poster to take to the NHSScotland event. Mike Higgins responded that this is successful because the dependency is on Consultants having a shared list, adding that our Consultants have shifted focus to clarify the decision-making process. Linda Semple commented that this type of culture change is very important to implement new pathways of care.

4.3.1.2. Susan Douglas-Scott asked if this model is transferable to other disciplines. Mike Higgins responded that there is potential for it to be so, and that this was discussed at a recent Continuing Medical Education session that focused on Realistic Medicine. Susan Douglas-Scott asked for a continued focus on this discussion and for feedback to the board on progress.

4.3.2. **Procurement Strategy**

4.3.2.1. Julie Carter advised that all actions relating to the Procurement Strategy have been completed and offered to circulate the final version to Board Members.

4.3.3. The following action arose from the previous minutes and actions:

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<tr>
<td>140219/04</td>
<td>Procurement Strategy: Send final version to Board Members for information</td>
<td>Julie Carter</td>
<td>NEW</td>
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5. **Person Centred**

5.1. **Partnership Forum update: 18 January 2019**

5.1.1. Jane Christie-Flight provided an update on discussions at the Partnership Forum meeting.

- **Staff Governance Action Plan**: Will be submitted to the Person Centred Committee for approval in April.

- **Carers Guide**: This signposts staff on where to go for support and guidance. It was created on the back of increased enquiries from staff to the Dementia lead.

- **Staff Benefits**: The Forum was informed on the current benefits that are in place throughout the Board and how these are utilised.
• **Volunteer Strategy:** The Forum commented that it was very well presented with appreciation given to documentation on the volunteer roles.

• **Adverse Weather Policy:** Following the recent publication of the national Adverse Weather Policy, the Board policy has been updated as required. This policy will be shared with staff and added to the staff intranet. The Forum noted this policy.

• **National Collaborations:** The Forum was updated on the progress of the Finance, Procurement and Estates workstreams and noted that the Publishing workstream has now concluded but this has little impact on the Golden Jubilee.

• **Job Evaluation update:** The process has been streamlined from 17 months to an average of 11 weeks, with some being processed in as few as three weeks. The Board is no longer supporting the use of indicative bandings for recruitment purposes as a result.

5.1.2. The Board noted the update.

5.2. **Expansion**

5.2.1. June Rogers provided an update on the Hospital Expansion Programme.

• The Scottish Government Capital Investment Group has approved the Full Business Case for Phase 1 and we have written confirmation from West Dunbartonshire Council that we can proceed while we wait on a building warrant being issued. Site hoarding, site compound and piling mat work has already been completed and we can now proceed to full building works.

• Community benefits will be explored further with Marcella Boyle and other colleagues to add insight on where we are going with these.

• A tender exercise is underway for the self check-in facility for the new unit.

• Phase 2 clinical brief has been developed and is currently being reviewed.

• Separate reports for each phase of the expansion will be submitted to Board meetings going forward.

5.2.2. Jane Christie-Flight asked for an update on Microbiology and if this is going to impact on Phase 2. June Rogers responded that this is still an ongoing problem, but she is meeting with Mike Higgins and Anne Marie Cavanagh to explore options. Mike Higgins explained that there is a national shortage of Microbiologists, but there is a possibility of doing something different with some trainees who are coming up for accreditation. Mike Higgins added that a sessional Service Level Agreement is currently in place with NHS Greater Glasgow & Clyde and that joint appointments are also being explored.

5.2.3. The Board noted the update.
5.3. **Workforce Plan**

5.3.1. Gareth Adkins presented the Workforce Plan 2018/19, which highlights the progress made in 2017/2018 and plans for 2018/2019 and beyond with the future expansion of our services. There has been a 20% growth in staffing over the last six years as activity has increased across the site. Separate Workforce Plans are being worked up for each phase of the expansion so ensure we can meet our obligations.

5.3.2. Karen Kelly commented that an Audit Scotland report from July 2017 on NHS workforce planning highlighted the need to grow the pool of talent to draw on and asked how this was being addressed. Karen Kelly asked if the national NHSScotland Workforce Plan that is being developed will address this. Gareth Adkins added that the Golden Jubilee has a role in development of both regional and national workforce plans and is represented on these key groups by our Senior Medical Staffing and Workforce Information Advisor. Gareth Adkins added that this is specifically about workforce planning skills and noted that the West of Scotland Regional Planning Group has also appointed a workforce lead.

5.3.3. Karen Kelly asked about the future talent pool. Jann Gardner commented that this is being discussed at Executive meetings and with Scottish Government.

5.3.4. Anne Marie Cavanagh added that some of the work is being delivered by professional leads across NHSScotland.

5.3.5. Jane Christie-Flight commented that development of skills will also be picked up as part of the national NHSScotland Workforce Plan.

5.3.6. The Board approved the Workforce Plan.

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<tr>
<td>140219/05</td>
<td>Workforce Plan: Publish online</td>
<td>Gareth Adkins/Communications</td>
<td>NEW</td>
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10.42am Marcella Boyle entered the meeting

5.4. **Workforce Monitoring Report**

5.4.1. Gareth Adkins presented the Workforce Monitoring Report for the period 1 April 2017 to 31 March 2018, highlighting in particular that the age profile of staff is increasing so there is a need for succession planning in some staff groups/departments.

**Special Leave**

5.4.2. Karen Kelly asked for a view on paid special leave. Jane Christie-Flight responded that we have a range of types of special leave, including carers, parental, adverse weather, and assured the Board that this is monitored to ensure it is not abused.
5.4.3. Linda Semple asked if there is a category for reservists. Jane Christie-Flight responded that we have a separate Reservists Policy and added that special leave can also be granted for carrying out certain civic duties.

5.4.4. Gareth Adkins added that there is also an option to request unpaid leave.

5.4.5. Jane Christie-Flight commented that there have been mixed messages from Scottish Government in the past in relation to adverse weather but added that the new national Adverse Weather Policy provides some clarity.

5.4.6. Karen Kelly commented that it was good to hear this reassurance but raised concerns about the phrasing of the Parental Leave Policy being for staff to spend quality time with their children.

5.4.7. Gareth Adkins and Jane Christie-Flight both commented that this wording comes from the national policy. Gareth Adkins commented that this can be changed.

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<tr>
<td>140219/06</td>
<td>Parental Leave Policy: Change wording around ‘quality time’</td>
<td>Gareth Adkins/ Jane Christie-Flight</td>
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5.4.8. Stephen McAllister commented that South Ayrshire Council have introduced a new category of special leave for staff experiencing domestic violence and commented that this may be something we have to consider in the future. Susan Douglas-Scott commented we have committed to a partnership with West Dunbartonshire Council and Police Scotland to deliver training around domestic violence.

5.4.9. Jane Christie-Flight commented that there is a lot of unwritten uses for special leave but assured the Board that evidence shows that our Managers are deferring to Human Resources for clarity on how to implement the policies fairly.

**Workforce Diversity**

5.4.10. Phil Cox commented that the ethnicity of our staff hasn’t changed and asked why ethnic groups are not coming/being recruited. Phil Cox also highlighted that we are not going to see this balance addressed unless we do something differently, adding that there is not much ethnic variation in the Golden Jubilee Boardroom.

5.4.11. Marcella Boyle asked if there is something around a more diverse recruitment and attraction strategy.

5.4.12. Susan Douglas-Scott commented that there is also something about the imagery and there is a need to represent the diversity in all our internal and external media.

5.4.13. Gareth Adkins responded that we have a schools outreach programme but we have not established the balance in staffing diversity in line with the local, regional or national population.
5.4.14. Linda Semple commented that the Minority Ethnic trajectory is up and raised concerns about placing too much emphasis on this but agreed that there is a need to address diversity amongst the workforce.

5.4.15. Kay Harriman commented that there is a need to understand national demographics not just local ones.

5.4.16. Susan Douglas-Scott commented that she agrees we should look at national demographics in terms of the Board but at local demographics in terms of the workforce. She also commented that Glasgow has the highest refugee population in Scotland and that we need ensure we reflect this.

5.4.17. Jane Christie-Flight commented that the demographics are different in different staff groups, adding that there is quite a lot of diversity in the Consultant population.

5.4.18. Jann Gardner commented that we need to consider the changing demographic landscape and should look at school demographics to understand the real aspirations for the future. This should come back to a future Board meeting.

5.4.19. The Board approved the Workforce Monitoring Report.

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<tr>
<td>140219/07</td>
<td>Workforce Monitoring Report: Publish online</td>
<td>Gareth Adkins/ Communications</td>
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5.5. Volunteer Strategy

5.5.1. Gareth presented the five-year Volunteer Services Strategic Plan for Board approval, highlighting that this aims to develop our thriving, inclusive volunteer service to meet the changing needs of patients, the organisation and the local community. It identifies volunteering priorities which support the overall strategic plan of the Board.

5.5.2. Marcella Boyle commented that the volunteers have been actively involved in developing the strategy and assured the Board that it has been through all governance routes. Marcella Boyle added that the Volunteer Forum Terms of Reference have been updated and that the membership will be reviewed to create opportunities for other volunteers to be involved.

5.5.3. Marcella Boyle commented that, if approved, the strategy will go online so that we can start sharing our story and making an impact in terms of recruiting volunteers to support the hospital expansion.

5.5.4. Susan Douglas-Scott commented that the strategy was very easy to read and to easy to look at visually but highlighted that it would be nice to include a images of disabled people.
5.5.5. Susan Douglas-Scott commented that the strategy is a good piece of co-production.

5.5.6. Linda Semple asked if we have an annual volunteer event and that it is important for Board Members to participate in that. Marcella Boyle confirmed that we do and that all Board Members will be invited. Susan Douglas-Scott commented that she had spoken at this event last year and intends to attend again this year.

5.5.7. Linda Semple commented that she loves the format of the report. Marcella Boyle thanked Rob White for his role in this. Susan Douglas-Scott commented that people find this style of report easy to read. Marcella Boyle commented that she is delighted to be able to pass the Board’s positive comments back to the Volunteer Manager, Elizabeth Rogers.

5.5.8. The Board approved the Volunteer Strategy subject to including an image representative of a disabled people.

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<tr>
<td>140219/09</td>
<td>Volunteer Strategy: Published final version online</td>
<td>Communications</td>
<td>NEW</td>
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<tr>
<td>140219/10</td>
<td>Volunteer Event: Invite all Board Members to attend</td>
<td>Marcella Boyle/Communications</td>
<td>NEW</td>
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5.6. Consultant Appointments

5.6.1. Gareth asked the Board to ratify the appointments of six new Consultants after recent rounds of recruitment:

- Rocco Bilancia, Consultant Thoracic Surgeon
- Zahid Mahmood, Consultant Cardiac Surgeon
- Gruschen Veldtman, Consultant Cardiologist – Scottish Adult Congenital Cardiac Service
- Ndollo Emboumbou, Consultant Anaesthetist
- Richard Brogan, Consultant Interventional Cardiologist
- Andrew Nath, Consultant Anaesthetist (Intensivist)

5.6.2. Susan Douglas-Scott asked Mike Higgins if he was happy with the calibre of the appointments. Mike Higgins confirmed that he is.

5.6.3. Phil Cox commented that the Board cannot ratify appointments as they have already been made and suggested the Board should be endorsing or noting them instead. Gareth Adkins advised that he will check if there is a formal requirement for Board ratification of Consultant appointments.
5.6.4. The Board endorsed/noted the appointments of six new Consultants.

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<tr>
<td>140219/11</td>
<td>Consultant Appointments: Check if the Board is required to ratify appointments</td>
<td>Gareth Adkins</td>
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5.7. Person Centred Committee Approved Minutes: 16 October 2018

5.7.1. The Board noted the approved minutes.

5.8. Person Centred Committee Update: 29 January 2019

5.8.1. Kay Harriman provided an update on discussions at the Committee, highlighting the following information.

- **Communications Update April to December 2018:** There were 229 pieces of media coverage - the second busiest year so far – with only two negative stories, both relating to cancellations. Twitter follower numbers are slightly below target but the Facebook follower target has been achieved for the year. Social media reach is 2.3 million, with an engagement of 30,500 likes, shares and comments. Website update work may cause some fluctuation in analytical data.

- **Complaints Report quarter two:** No trends to note, although there was an increase in the number of stage two complaints not responded to within the timeframe. The Head of Clinical Governance has been asked to review any improvements required and benchmark complaints against other health boards. The Committee noted that there were three times more compliments than complaints.

5.8.2. Gareth Adkins added that we will need to explore the feasibility of benchmarking and how easy that will be to compare to other Boards.

- **Committee Annual Report 2018/19:** The Committee approved the report and took an action to review the terms of reference and to discuss this with other committee chairs.

5.8.3. The Board noted the update.

6. Safe


6.1.1. Anne Marie Cavanagh presented the HAIRT report, highlighting the following key points.
- **Staphylococcus Aureus Bacteraemia**: None to report.

- **Clostridium Difficile infection**: None to report – no incidents since June 2018.

- **Hand Hygiene**: Bimonthly report from November demonstrates an overall Board compliance rate of 98%, (up from 96%). Medical staff compliance continues to increase and is now 95%.

- **Surgical Site Infection (SSI)**: All are within the control limits. A short life working group has been set up to look at dressings. SSIs have reduced for both valves and grafts. It was noted that all infections recorded were superficial.

6.1.2. Mike Higgins commented that we don’t think that cardiac SSIs is a significant problem, but as there is no UK benchmarking data, we are contacting the other Scottish cardiac centres to get some quantitative evidence around that. Anne Marie Cavanagh commented that these discussions are at an early stage and more information will be brought back to the Board.

6.1.3. Linda Semple reinforced Mike Higgins’ comments and assured the Board that the same discussions are taking place in other NHS Boards. Linda Semple commented that part of the success with preventing and controlling infections is that we have now got to a point of marginal improvements and we may never get to zero. Linda Semple commended the efforts of staff to get to this point.

6.1.4. Mike Higgins commented that new technology or advances might now be needed to reduce the rates further.

6.1.5. Anne Marie Cavanagh assured the Board that every SSI is thoroughly investigated.

- **Cleaning and the Healthcare Environment Facilities Management Tool**: Housekeeping Compliance was to 99.08% and Estates Compliance was 99.46%.

6.1.6. Susan Douglas-Scott commended the team for being on top of the situation.

6.1.7. The Board approved the HAIRT report and its publication on the website.

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<td>140219/12</td>
<td>HAIRT:</td>
<td>Christine McGuinness</td>
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<td></td>
<td>Publish HAIRT online</td>
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6.2. **Estates/ Prevention and Control of Infection**

6.2.1. Anne Marie Cavanagh provided an update on Estates and Infection Control and assured the Board that:

- All ventilation and water systems have been checked and are secure.
- All surveillance and sampling processes have been reviewed.
- There is no unusual activity on site.
• We are fully compliant with all required methodologies from Health Protection Scotland.

6.2.2. The Board noted the update.

6.3. Clinical Waste

6.3.1. Anne Marie Cavanagh provided an update on Clinical Waste assured the Board that there has been no impact to patient services or activity at the Golden Jubilee as a result.

6.3.2. The Board noted the update and commended teams across the site who are continuing to work collaboratively and responsively to maintain this service.

6.4. EU Withdrawal

6.4.1. Anne Marie Cavanagh updated the Board on preparations for EU Withdrawal and asked the Board to increase the level of risk from medium to high.

• The focus is remaining on civil contingencies.

• Increased contingencies are being considered for exit weekend (29 March 2019) and the critical 12-week period immediately afterward.

• A special meeting will take place with all Duty Managers ahead of the exit.

6.4.2. Linda Semple commented that the Golden Jubilee has the unique possibility of being impacted in terms of research and development funding if the UK crashes out of the European Harmonised Clinical Trials process. Susan Douglas Scott commented that she understands that the Golden Jubilee does not have a high number of trials which will be impacted. Mike Higgins confirmed this was the case.

6.4.3. Anne Marie Cavanagh assured the Board that there are regular reports to the Research and Development Committee.

6.4.4. Karen Kelly commended the business continuity approach. Anne Marie Cavanagh responded that this approach has taken a lot of the emotion out of the issue.

6.4.5. Anne Marie Cavanagh commented that conversations are taking place about returners to the UK and how this will impact on services. Susan Douglas Scott CBE commented that this is potentially a big issue for territorial Boards.

6.4.6. Marcella Boyle asked how we are sharing our knowledge and learning with other sectors. Anne Marie Cavanagh added that representatives from independent healthcare and third sector have been involved in recent workshops. Jann Gardner advised that she will be leading a national piece of work on behalf of the Chief Executives which will be wider than the health sector, and she will bring an update back to colleagues at an appropriate date.
6.4.7. Karen Kelly added that the Audit and Risk Committee support increasing the risk from medium to high.

6.4.8. The Board noted the update and increased the risk from medium to high.

6.5. **Clinical Governance Committee Approved Minutes: 9 October 2018**

6.5.1. The Board noted the approved minutes.

6.6. **Clinical Governance Committee Update: 29 January 2019**

6.6.1. Mike Higgins updated the Board on discussions at the Committee, highlighting the following information.

- **Consent:** There was a deep dive into urgent and elective coronary artery stenting consent processes and the materials available to support this.

- **Divisional Reports:** There were no major concerns noted.

- **Hand Hygiene:** The Committee noted that medical hand hygiene was mostly to do with dress code compliance, e.g. bare below the elbows.

6.6.2. Susan Douglas-Scott thanked Mike Higgins for his leadership around this and commented that what was considered an issue with people not washing their hands is actually a dress code issue

- **Duty of Candour:** there was a good discussion about the Duty and what this means for our culture of openness with our patients.

6.6.3. The Board noted the report.

7. **Effective**

7.1. **Performance Report: November/December 2018**

7.1.1. June Rogers presented an update on Performance, highlighting the following key information.

- **Cancellations:** Teams are working towards their trajectories, with Cardiac the only area giving cause for concern. In December, there were no Plastic Surgery cancellations and Ophthalmology reported cancellations within the 3% target for the eighth successive month.

- **Treatment Time Guarantee (TTG):** In November, 88.8% of patients were treated within the TTG. Despite being one of the highest volume Cardiac Surgery activity months in recent years, the service struggled to meet the 12-week Treatment Time Guarantee (TTG). Six patients in November and five in December were treated over TTG. This is due to complexity of cases, increased urgent referrals and
access to blood supplies over the festive period. A recovery plan is in place to deal with Cardiology breaches, including the mobile cardiac catheterisation laboratory.

- **CT Scanner:** The new scanner has been installed and will begin operating next week. It is expected that 440 procedures will be carried out in February, 880 in March and 10,500 in the full year 2019/20.

7.1.2. Susan Douglas-Scott commented that the new CT scanner is going to provide fantastic benefits for Scotland.

7.1.3. The Board noted the Performance report.

7.2. **Hospital Activity Report: December 2018**

7.2.1. June Rogers provided an update on business activity, highlighting the following key points.

- **Activity:** Inpatient and day case procedures were ahead by 9.8% in month and 4.1% year to date plan. The combined inpatient, day case and imaging activity was ahead by 2.6% in month and 6.9% year to date.

- **2019/20:** Activity has been allocated out to Boards. Capacity will increase by 11% for inpatient and day case procedures and 35% for diagnostic imaging.

7.2.2. Susan Douglas-Scott commented that this increase in capacity is fantastic news.

7.2.3. The Board noted the Business Activity report.

7.3. **Finance Report: October 2018**

7.3.1. Julie Carter provided members with an update on the financial position, highlighting the following information.

- **Year to Date:** It is anticipated that the Board will achieve the breakeven target.

- **Efficiencies:** Recurring efficiency savings achieved of £1.731m and non-recurring savings of £1.148m.

**Robotics**

7.3.2. Karen Kelly commented that the robotics programme is not delivering efficiencies as identified in the business case approved by the Board. Julie Carter commented that the robotics programme is still in its early days and assured the Board that a specific piece of work is underway with the clinical team to address this. Angela Harkness added that extra time is being put into staff training to ensure all four thoracic surgeons are fully trained during the proctoring process.
Julie Carter commented that she believes robotics will still deliver fantastic benefits including reducing patient length of stay.

June Rogers added that this needs to be balanced with patient expectations, commenting that reduced pain and better outcomes must come before reduced length of stay.

**Forecast**

Marcella Boyle asked how this compares with what we are forecasting. Julie Carter responded that there are a number of pay pressures, such as incremental drift and the adjustment for the new pay structure, which is going to impact the Board by £400,000. Julie Carter added that the pay point changes will have a big impact on the Board in 2020/21 and this is being incorporated into the three-year financial plan.

Marcella Boyle asked how we are going to plan for contributing towards the National Boards' £15 million savings. Julie Carter responded that we have contributed £1.9 million for each of the last two years and are planning to contribute the same amount again in 2019/20.

Julie Carter added that she is keeping this figure as a fixed amount in the three-year financial plan and assuring the Board that she will not compromise Board services to meet that target.

Susan Douglas-Scott asked why the previous Hotel name was still being referred to in the report. Julie Carter responded that this shouldn’t be the case and that this would be corrected for future reports.

The Board noted the Finance report.

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<tr>
<td>140219/13</td>
<td>Finance report: Change Beardmore reference in spreadsheet</td>
<td>Julie Carter</td>
<td>NEW</td>
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**Board Risk Register**

Julie Carter presented the updated Board Risk Register for approval and highlighted the following key changes:

- **Clinical Waste**: A new risk at a medium level is added relating to the inability to sustain services in the absence of a national contract.

- **Electronic Patient Record**: The risk remains at medium for further review following the internal audit report.
• **EU Withdrawal** – The risk has been changed from a medium level to a high level. This is following discussion at the Audit and Risk Committee, as well as the EU Withdrawal paper submitted to the Board, and discussed earlier in the agenda.

7.4.2. The Board approved the updated Board Risk Register.

7.5. **Corporate Governance Blueprint**

7.5.1. Susan Douglas-Scott presented Directorate Letter DL (2019) 02, which sets out the range of work being undertaken to address recommendations within the Blueprint for Good Governance.

7.5.2. The Blueprint:

- emphasises the importance of good corporate governance;
- describes how its adoption will help NHS Boards to improve their corporate governance system; and
- will deliver a consistent, effective and transparent governance approach across NHSScotland.

7.5.3. The DL states that the Board must:

- undertake a baseline self-assessment in February 2019;
- hold a development session to discuss the survey results and develop an appropriate action plan by the end of March 2019; and
- present a report on the outcome of the self-assessment at the Board meeting in April 2019.

7.5.4. Susan Douglas-Scott advised that:

- The self-assessment tool will be emailed out to members on 15 February.
- Results will be collated by NHS National Services Scotland and fed back to the Board.
- A date will be circulated for the action plan development session. Members are asked to prioritise this and to attend by teleconference or video conference if necessary.

7.5.5. Jann Gardner added that the Blueprint work will involve reviewing and refreshing the Code of Corporate Governance, including Standing Orders and Standing Financial Instructions. Susan Douglas-Scott CBE commented that there will be a ‘Once for Scotland’ approach to ensuring these key documents are fit for purpose.

7.5.6. Phil Cox added that it would be useful to include the Endowments work within this process following the new guidance released by the Office of the Scottish Charity Regulator (OSCR). Susan Douglas-Scott agreed that the publication of the OSCR report was timely.
7.5.7. Susan Douglas-Scott commented that she and Jann Gardner will be circulating several things between now and the end of March.

7.5.8. Jann Gardner added that a timeline will also be circulated which summarises all of the key pieces of work and how we are progressing them.

7.5.9. The Board noted the report.

7.6. Audit and Risk Committee Approved Minutes: 23 October 2018

7.6.1. The Board noted the approved minutes.

7.7. Audit and Risk Committee Update: 5 February 2019

7.7.1. Karen Kelly provided an update on discussions at the Committee and highlighted the following key information.

- **Audit Scotland overview report:** A good discussion took place including how the Golden Jubilee can contribute to the 2018/19 report.

- **Audit Scotland Reports:** Relevant action plans were discussed in relation to the:
  - NHS Tayside Report;
  - Health and Social Care Integration Report;
  - NHS in Scotland; and
  - Withdrawal from European Union.

- **Counter Fraud:** As Counter Fraud Champion, Karen Kelly is keen to hold annual development sessions, which will take place for the Board and Audit and Risk Committee on alternate years

7.7.2. Marcella Boyle asked how this will be linked to the plan for financial induction and refresher training of individual members. Phil Cox asked if this is for start up training for Non Executive Directors. Karen Kelly made a plea for this to be part of the training programme that Gareth Adkins is developing. Susan Douglas-Scott advised that she and Jann Gardner will be discussing this training programme soon. Marcella Boyle commented that it’s about ensuring Non Executive Directors are supported at the Board table. Susan Douglas-Scott agreed that Non Executive Directors need to understand a wide range of topics to be able to scrutinise them.

- **Assurance Mapping:** The Committee approved a three-stage approach.

7.7.3. Susan Douglas-Scott asked for a summary of the three-stage approach to assurance mapping. Julie Carter described the three stages:

1. How is the Committee applying its Terms of Reference and Objectives?
2. Does the paper presented answer the questions asked?
3. How is this mapped against risks?
7.7.4. Julie Carter explained that this is probably new for NHSScotland and although you would normally work down from the Board, this method is being tested by the Audit and Risk Committee and will roll out to Committees and then feed up into the Board.

7.7.5. Karen Kelly commented that this will then feed into the Committee Annual Report process.

7.7.6. Kay Harriman asked to see the paper on assurance mapping.

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<tr>
<td>140219/14</td>
<td>Audit and Risk Committee assurance process: Circulate papers to other Committee Chairs</td>
<td>Julie Carter</td>
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7.7.7. Gareth Adkins asked how much time is assigned to the exercise in the Committee. Julie Carter responded that the process is still being tested.

7.7.8. The Board noted the report.

7.8. Audit and Risk Committee Terms of Reference

7.8.1. Julie Carter advised that the Audit and Risk Committee Terms of Reference have been updated in line with changes in the Scottish Government Audit and Assurance Handbook and asked the Board to approve these.

7.8.2. Susan Douglas-Scott asked Karen Kelly if she is satisfied with this. Karen Kelly confirmed that she is.

7.8.3. Gareth Adkins asked if there would be an opportunity to review these at the mid-year review to incorporate lay members onto the membership. Susan Douglas-Scott CBE asked if we could do that now. Julie Carter responded that you would not normally have a lay representative on the Audit and Risk Committee. Karen Kelly and Phil Cox agreed with Julie Carter.

7.8.4. Kay Harriman asked if there are any changes that need to be reflected in the other Committees. Julie Carter responded that some of the content could be useful and advised that she would forward the detailed paper.

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<td>140219/15</td>
<td>Audit and Risk Committee Terms of Reference: Share detailed paper with Kay Harriman and Gareth Adkins</td>
<td>Julie Carter</td>
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7.8.5. Jann Gardner commented that the Blueprint work will flow through the Board and Committees.
7.8.6. The Board approved the updated Audit and Risk Committee Terms of Reference.

7.9. **Endowments Sub Committee Update: 5 February 2019**

7.9.1. Phil Cox provided an update on discussions at the Committee and highlighted the following key information.

- **Cafe Latte surplus:** Members were asked to approve moving the surplus from Cafe Latte to the Golden Jubilee Foundation Charity as an unrestricted fund. Members deferred their decision until they have received the new costing profile for running costs.

- **Transfer of Funds:** A presentation was given on £1m funding awarded by Scottish Government for the development of an Adult Emergency Care Centre in Blantyre, Malawi. Members approved the transfer of restricted funds from the Scottish Government’s International Development Division to the Innovation Fund.

7.9.2. Susan Douglas-Scott advised that the Board has been asked to lead on more international funds. Angela Harkness confirmed this was the case and that this would be discussed at the Endowments Sub Committee.

7.9.3. Phil Cox commented that the Committee name needs to be reviewed as he feels it is no longer fit for purpose. Susan Douglas-Scott asked Phil Cox to bring a proposal back to the Board.

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<tr>
<td>140219/16</td>
<td>Endowments Sub Committee: Bring forward proposal on committee name</td>
<td>Phil Cox</td>
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7.9.4. The Board noted the update.

8. **AOCB**

8.1. **Non Executive Directors Forum**

8.1.1. Susan Douglas-Scott highlighted the next Non Executive Directors Forum organised by Scott Moncrieff. Karen Kelly advised that she is going and that Members just need to book direct if they are going.

8.2. **Stewart Mackinnon**

8.2.1. Phil Cox advised that Stewart Mackinnon, former Non Executive Director and Interim Chair, has asked for his thanks to be passed on to the Board.

8.3. **Quality of Care Approach to Self-Assessments**
8.3.1. Gareth Adkins advised that Healthcare Improvement Scotland are testing a quality of care approach to self-assessments. This will be piloted at the Golden Jubilee after initial tests in NHS Ayrshire & Arran and NHS Orkney. Gareth Adkins and Anne Marie Cavanagh will be leading this with the Head of Clinical Governance. A site visit will take place during the week commencing 15 April, during which time the external team will observe any Committee meetings taking place.

9. **Date and Time of Next Meeting**

9.1. The next meeting takes place on Thursday 4 April 2019 at 10am.