

Lanarkshire NHS Board

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Minute of Meeting of the Lanarkshire NHS Board
held on Wednesday 29th May 2019 at 9.00am in the
Board Room, NHS Lanarkshire

CHAIR: Mrs N Mahal, Non Executive Director

PRESENT: Mrs L Ace, Director of Finance
Mrs I Barkby, Director for Nurses, Midwives and Allied Health Professionals
Dr J Burns, Medical Director
Mr P Campbell, Non Executive Director
Mr C Campbell, Chief Executive
Mr M Fuller, Non Executive Director
Councillor P Kelly, Non Executive Director
Mrs M Lees, Chair, Area Clinical Forum
Mrs L Macer, Employee Director
Mr B Moore, Non Executive Director
Miss M Morris, Non Executive Director
Dr A Osborne, Non Executive Director
Dr L Thomson, Non Executive Director

IN ATTENDANCE: Mrs A Armstrong, Divisional Nurse Director, North Lanarkshire Health and Social Care Partnership (Minute 2019/05/084c)
Mr C Brown, Director of Communications
Mr C Cunningham, Head of Commissioning & Performance, South Lanarkshire Health and Social Care Partnership
Mrs K Bell, Head of Service Change & Transformation (Minute 2019/05/084c)
Mr P Cannon, Board Secretary
Mr G Docherty, Director of Public Health
Mr R Foubister, Finance Department (shadowing Mrs Macer)
Dr J Harden, Consultant in Emergency Medicine, University Hospital Wishaw
Ms M Hayward, Health of Health and Social Care, South Lanarkshire Health and Social Care Partnership
Ms H Knox, Director of Acute Services / Deputy Chief Executive
Mr C Lauder, Director of Planning, Property & Performance
Dr V Muir, Consultant Anaesthetist, University Hospital Monklands
Mr R McGuffie, Interim Chief Accountable Officer, North Lanarkshire Health and Social Care Partnership
Mr S Peebles, Deputy Director of Hospital Services, University Hospital Wishaw (Item 2019/05/084b)
Mrs K Sandilands, Deputy Director of Human Resources
Mr D Wilson, Director of Information and Digital Technology

APOLOGIES: Councillor J McGuigan, Non Executive Director
Mrs V de Souza, Director, South Lanarkshire Health and Social Care Partnership
Mr J White, Director of Human Resources

2019/05/070

WELCOME

Mrs. Mahal welcomed colleagues to the meeting, in particular Mrs Sandilands, representing the Director of Human Resources, Dr Muir who was presenting the Patient Experience item, Mr Peebles, who was presenting the Trauma & Orthopaedic item, Mr Foubister, who was shadowing Mrs Macer, Dr Harden who was attending as part of his professional development plan, and she reported that Mrs Armstrong and Mrs Bell would join the Board for the item on the Mental Health & Wellbeing Strategy, Mr Cunningham for the item on Winter Planning and Ms Hayward for the item on Out of Hours Services.

2019/05/071

DECLARATION OF INTERESTS

There were no declarations of interests made.

2019/05/072

MINUTES

The minute of the meeting of the NHS Board held on 27th March 2019 was submitted for approval.

THE BOARD

1. Approved the minute of the meeting held on 27th March 2019.

2019/05/073

MATTERS ARISING

Action Log

The NHS Board considered an updated Action Log and confirmed satisfaction with the progress recorded for actions. The Action Log would be further updated to reflect actions arising from the Board's deliberations.

2019/05/074

CHAIR'S REPORT

Mrs. Mahal provided a verbal report.

- a) **Meeting with MPs and MSPs - 3 May 2019**

Mrs. Mahal provided an overview of the positive and constructive discussions at the meeting with local MPs and MSPs on 3 May 2019.

- b) **Chairs' meeting with the Cabinet Secretary - 20 May 2019**

Mrs Mahal updated Board Members on the range of issues discussed at the recent Chairs' meeting with the Cabinet Secretary. Mrs Mahal highlighted that the Cabinet Secretary had visited the Hospital At Home service in Lanarkshire, and had since written to all NHS Boards to encourage replication of the service across Scotland. Mrs Mahal added that she had asked that a presentation be made to the Board at the August 2019 meeting to highlight the main features of the service.

Mr P Cannon

c) Sturrock Review

Mrs Mahal referred to the publication of the Sturrock Report and the intention to meet for a briefing session on Monday 3 June 2019 to ensure the Board is aware of the Sturrock report, its recommendations; the Scottish Government response; to discuss implications for the NHSL Board and to consider practical actions which will also help inform the response to be submitted to Scottish Government by 28 June 2019.

d) Staff Awards

Mrs Mahal thanked those Board Members who had been able to attend the 2019 Staff Awards held in Hamilton Town House on 22 May 2019, and the Board extended its congratulations to all the winners and those nominated for awards.

e) Global Citizenship Award

Mrs Mahal reported that she would be attending an event to launch the NHS Scotland Global Citizenship Programme in Lanarkshire on Friday 31 May 2019.

2019/05/075

BOARD EXECUTIVE TEAM REPORT

The NHS Board considered the Board Executive Team Report.

Mr. Calum Campbell highlighted that Brexit preparations were ongoing and the issues was a standing item on the weekly Corporate Management Team meeting agenda. He then invited colleagues to highlight areas of note within the detailed Executive Team Report.

Mrs Barkby highlighted the Safe Staffing legislation making its way through Parliament, and the significant implications that this would have for all NHS Boards. Dr Thomson suggested that in view of the implication for the Board as a result of the Safe Staffing legislation that a briefing might be helpful, and Mrs Barkby undertook to arrange this in due course.

Mrs Barkby

Dr Burns referred to the launch of the Chief Medical Officer's fourth Annual Report on Personalising Realistic Medicine, and the positive roll out of the HEPMA (Hospital Electronic Prescribing & Medicines Administration) system in University Hospital Monklands.

Mr Lauder highlighted the work being taken forward in relation to Monklands Replacement Refurbishment Programme while awaiting the Independent Review Team report.

Mr Wilson highlighted the roll out of the Laboratory Information Management System which will bring significant benefits in electronic test requesting and reporting.

Mr Docherty reported that nationally, public health reform changes were being consulted upon, and agreed to provide the Board Members with further information and consider the opportunity to discuss Public Health Reform as part of a development session.

Mr Docherty

Ms Knox highlighted a number of senior staffing changes within the Division as a result of a number of senior staff who have moved to promoted posts in other Boards.

Mrs Macer took the opportunity to update Board Members on the ISS potential industrial action by ISS staff at University Hospital Hairmyres, and Mr Campbell agreed to circulate a copy of the reply sent to Prospect Healthcare, with the Unions.

Mr Campbell

2019/05/076

**PATIENT EXPERIENCE – MAKING NHS LANARKSHIRE
AUTISM FRIENDLY**

The NHS Board received and noted a report from Dr Vimty Muir, Consultant Anaesthetist, University Hospital Monklands, on the steps being taken to make NHS Lanarkshire an Autism Friendly Board, and Board Members were shown a short video modelling a patient journey for a child coming to University Hospital Monklands Day Surgery Unit for dental extractions under General Anaesthesia.

Dr Vimty highlighted that although there were efforts to increase the number of dental extractions performed under sedation in the community, children with special needs such as Autism, learning difficulties and severe anxiety have to have general anaesthetics to allow dental extraction.

It was noted that future work included developing story boards to film “attending the Emergency Department” and some of the associated procedures or investigations that people may need, such as intravenous cannulation and X-rays.

Mr Fuller highlighted the importance of connecting with education services and accessing children with special needs at an earlier stage, and Ms Morris commended this suggestion, highlighting the links between inequalities and public health. Dr Burns commented on the high number of children who needed dental extractions and commended the work being taken forward by dental and public health colleagues to reduce the incident if dental extractions overall.

Dr Vimty indicated that there were a number of similar videos that might be shared on the Board’s web site, and Mr Brown agreed to work with Dr Vimty and colleagues to facilitate this sharing and promotion.

Mr Brown

Board Members commended the work being taken forward by Dr Muir and her colleagues and Mrs Mahal, on behalf of the Board, thanked her and her team for the very positive initiatives being taken forward, which the NHS Board supported.

THE BOARD:

1. Noted the excellent work being taken forward to make NHS Lanarkshire an Autism Friendly Board.

2019/05/077

HEALTHCARE QUALITY ASSURANCE & IMPROVEMENT COMMITTEE – 9TH MAY 2019

The NHS Board received and noted a summary of the meeting of the Healthcare Quality Assurance & Improvement Committee held on 9th May 2019.

2019/05/078

QUALITY ASSURANCE AND IMPROVEMENT PROGRESS REPORT

The NHS Board considered an update on the Lanarkshire Quality Approach and progress with Quality Initiatives across NHS Lanarkshire. The report provided an update on Assurance of Quality, Quality Improvement and evidence for quality

Dr Burns took Board Members through the report in detail, highlighting the improved performance around the Hospital Standardised Mortality Ratio (HSMR), which was the Board's high level indicator of the quality and safety of care provided on our acute hospital sites. It was noted that the latest HSMR data was published on 14th May 2019 which showed that University Hospital Monklands had the lowest absolute HSMR of any of the 29 participating hospital sites, that University Hospital Wishaw was the most improved mainland District General Hospital over the reporting period from January 2014 – December 2018, with a 30.6% reduction, and that all 3 NHS Lanarkshire District General Hospitals were in the top 10 across Scotland in respect of percentage reduction in HSMR.

Dr Burns also highlighted the developments in complaints handling, and the Duty of Candour Annual Report, which will be submitted to the Healthcare Quality Assurance & Improvement Committee in July 2019 for sign off. It was noted that the figures were being checked for accuracy and that the current recorded number was likely to be an overestimate. In relation to the power of the apology workshops, in response to a question from Mr Moore, Dr Burns confirmed that 3 additional workshops were planned for later in 2019.

Dr Thomson asked for clarity on the role of the Sharing Intelligence Group and she was given assurances that it would report to HQAIC.

In relation to Sepsis, Mrs Mahal asked if the Board's approach was in line with other NHS Boards, and Dr Burns confirmed that this was the case, and further that that the Board was fully engaged with the Scottish Ambulance Service on improving the process of pre alerting Hospital Departments, and sharing learning more generally.

THE BOARD:

1. Noted the range of work throughout NHS Lanarkshire to improve the quality and safety of care and services;
2. Endorsed the governance approach to this work and in particular the assurance being provided by the Healthcare Quality Assurance and Improvement Committee; and

3. Supported the ongoing development of the Lanarkshire Quality Approach.

2019/05/079

HAI UPDATE (JANUARY 2019 - MARCH 2019)

The NHS Board considered an update on Healthcare Associated Infection (HCAI) Standards 2015 with particular reference to NHSL Board performance against the Annual Operating Plan (AOP) Targets. Mrs Barkby highlighted that the use of validated only data introduced a time lag, and confirmed that in order to provide the most up to date position, the report contained non validated data where this was available. The verified data was scheduled for release from HPS week beginning 1 July 2019. Following the NHS Board meeting, Board Members would be provided with any updates as appropriate following HPS verification of the data.

In relation to Staphylococcus aureus Bacteraemia (SABs) it was noted that the trajectory was not achieved during January 2019 – March 2019. Dr Thomson noted that there had been three deaths in the last quarter and asked if there were any common themes emerging. Mrs Barkby provided assurance that the three cases had been reviewed and no common themes had been identified. Board Members expressed their concerns about the SABs key performance indicators and asked Board Officers for further assurances on the actions being taken which would achieve the targets set nationally.

Mr Philip Campbell asked for additional information about the Health Protection Scotland (HPS) study that estimated the inpatient costs of a Healthcare Associated Infection (HCAI) in an NHS acute care hospital to be £137 million. This excluded the cost of those infections occurring outside hospital and highlighted that the prevention of an HCAI in all healthcare settings is of paramount importance. Mrs Barkby indicated that this was an estimate but it did underline the importance of having good infection control processes in place.

In relation to Clostridium difficile infections (CDIs) it was noted that the CDI AOP target had been achieved for April 2018 – March 2019 (subject to validation from HPS in June 2019).

THE BOARD

1. Noted the report; and
2. Confirmed that the report provided sufficient assurance about the organisational performance on HCAI, and the arrangements in place for managing and monitoring HCAI.

2019/05/080

CORPORATE GOVERNANCE

The Board considered three reports under the heading Corporate Governance.

2019/05/080a

GOVERNANCE COMMITTEE ANNUAL REPORTS 2018/19

The NHS Board was provided with a report and copies of each Governance Committee Annual Report for 2018/19 which covered: Committee

Membership and Attendees; Meetings held during the year; the key issues considered by the Committees; Improvements overseen by the Committees; Matters of concern to the Committees. They also, as appropriate, provided assurance statements about the adequacy and effectiveness of Governance arrangements.

The Annual Reports confirmed that the Committees had reviewed their Workplans in line with their Terms of Reference, copies of which were also attached for endorsement.

THE BOARD

1. Approved the Annual Reports, and the Terms of Reference, which formed a key part of the evidence in support of the Annual Accounts Governance Statement; and
2. Noted that the Annual Reports would be considered by the Audit Committee on 4th June 2019.

2019/05/080b

REGISTER OF INTERESTS (MAY 2019)

The NHS Board was provided with an updated Register of Interests as a May 2019.

THE BOARD

1. Approved the Register of Interests (May 2019), for inclusion on the NHS Lanarkshire public website.

2019/05/080c

NHS SCOTLAND CORPORATE GOVERNANCE BLUEPRINT IMPROVEMENT PLAN

Board Members were reminded that in January 2019 the Board / CMT members who attend the Board meetings were invited to complete a self-assessment questionnaire, the result of which were discussed at the Board Development Session on 6 March 2019, and this resulted in the drafting of an Improvement Plan.

The draft Improvement Plan was shared with the Board at the March 2019 meeting, and comments were invited. A revised draft was circulated to Board Members for electronic approval before being submitted to the Cabinet Secretary on 30 April 2019.

The Improvement Plan was attached for information, and will be updated by way of a progress report at each Board meeting.

THE BOARD

1. Noted the Corporate Governance Blueprint Improvement Plan; and
2. Agreed to receive progress reports at each NHS Board meeting.

2019/05/081

MSG INTEGRATION REVIEW & REVIEW OF SCHEME OF DELEGATION OF NORTH LANARKSHIRE INTEGRATION SCHEME

The NHS Board considered and discussed a report from Mr McGuffie which provided a copy of the self-evaluation submission to Scottish Government and the output from a review of the North Lanarkshire Integration Review.

Mr McGuffie reminded Board Members that in September 2018 North Lanarkshire Council set out a new vision for the future direction of the council in 'We Aspire'. The document set out a plan to revise the Integration Scheme and transfer the discretionary delegated functions for children, families and justice social work services to the newly reshaped Education and Families service within the council.

Given the changes proposed in the 'We Aspire' report, it was agreed to instigate a review of integration, building on the learning to date and agreeing the best direction of travel moving forwards.

The report outlined how the review was taken forward through a number of key workstreams each tasked with reviewing current practice and solutions to challenges identified, a self-assessment exercise and a structural review.

Mr McGuffie added that the self-evaluation report (appendix 3 of the Integration Review report) was submitted to the Scottish Government on 15th May 2019, subject to the approval of partners.

Further, a key element of the review terms of reference was to review the Locality structures and consider whether groups of Localities could create more efficient management arrangements.

Through the operational workstream of the review, a significant engagement exercise was undertaken across all Locality and service areas, in conjunction with trade unions.

In closing Mr McGuffie summarised that the report highlighted a range of comprehensive actions, which required to be developed into a detailed action plan. In line with the national Integration Review process, progress against the identified actions will be reviewed in May 2020.

Mr Philip Campbell asked if there had been any early feedback from Scottish Government on how these self-assessments were to be reviewed and acted upon. Mr McGuffie responded that Scottish Government had already signalled that they would identify where additional support might be required and focus on individual Integration Joint Boards in due course.

In relation to the Integration review, Dr Osborne thanked Mr McGuffie for the report and the very positive approach adopted to making improvements, and also formally thanked Councillor Kelly for his stewardship of the Integration Joint Board, as Chair, until April 2019.

THE BOARD:

1. Approved the Section 44 review of the Integration Scheme (North Lanarkshire Integration Review, May 2019);

2. Approved the self-assessment submission to the Scottish Government (appendix 3 of the Integration Review paper);
3. Requested that the Integration Scheme be reviewed in line with the outputs of this report and that any necessary changes be brought back to a future meeting for approval;
4. Requested that a detailed action plan be completed and submitted to the next cycle of the Population Health and Community and Primary Care Committee for oversight; and
5. Requested that the outputs of the review be shared with the South Lanarkshire Integration Joint Board for information.

2019/05/082

INTEGRATED PERFORMANCE REVIEW FRAMEWORK

The NHS Board considered and discussed a report from Mr Lauder which set out a series of revisions to the NHS Lanarkshire Integrated Corporate Performance Framework (ICPF).

These aimed to strengthen the three-tiered approach to performance management split between NHS Board/PP&RC (Tier 1), Governance Committees (Tier 2) and Chief Executive Performance Review (Tier 3).

This review of performance had also been included in the Corporate Governance Improvement Plan to be submitted to Scottish Government.

Mr Lauder highlighted that a recurring theme within the PP&RC and NHS Board had been a dissatisfaction with the timing of the performance metrics being considered at each meeting: generally these metrics relate to a period of time long past. A paper was provided which explained the reasons for such a delay and provided details of the UK Statistics Authority - Code of Practice for Statistics. In summary, only validated data could be used to inform decisions of public bodies and be published by these bodies. It was noted that the NHS Board should discuss local unvalidated data only within the Board, it should not be put into the public or other domains and was intended for local management purposes only, and when discussing other Boards' data, only refer to the validated, published data.

Mr Lauder went on to outline the three tiered approach and highlighted Annex F which provided a template for Governance Committees to use in making their reports to the NHS Board.

Mrs Mahal commended the approach in improving assurance at NHS Board meetings by ensuring that detailed scrutiny takes place at Governance Committee level.

In discussion, the following points were raised - that the finance and performance reporting should be seen at every Board meeting; that the NHS Board would still have the responsibility for monitoring performance, and having an oversight of delivery, but that the role of the Governance Committees would be maximised.

THE BOARD

The Board approved the following recommendations:

1. That the actions arising from the paper will form part of the action plan arising from the NHS Scotland Governance Blueprint DL (2019) 02 related to the clarification and strengthening of the corporate performance framework. This was included in the Improvement Plan to be submitted to Scottish Government by the end of April 2019.
2. As the UK Statistics Authority Code of Practice for Statistics dictates that, only validated data can be used to inform decisions of public bodies, and to be published by these bodies, the Board would
 - discuss local unvalidated data only within our Board, and that local unvalidated data should not be put into the public or other domains and should be intended for local management purposes only;
 - when discussing other Boards' data, only refer to the validated, published data.
3. That as far as possible nothing should be reported to the Board or to PP&RC that has not already been reviewed by the responsible Governance Committee (GC). This would ensure that the formal structures of the Board (and the accountability of individual GCs) would not be compromised.
4. That the previous LDP Standards continue to form part of the performance metric data set, but be referred to as "Locally Agreed Standards".
5. That the Board /PPRC would receive the quarterly Annual Operational Plan as outlined;
6. The PP&RC has routinely considered a Quarterly Integrated Corporate Performance Report consisting of an Exceptions Report comprising those KPIs rated 'red' or 'amber', with narrative against each provided by its lead Executive Director and that this centralised report will cease to be produced from 1 April 2019;
7. The data considered at Tier 1 will be in the public domain and should reflect only validated information as per the UK Statistics Authority Code of Practice for Statistics;
8. That the Governance Committees (Tier 2) should, for the suite of metrics that they have accountability for, be responsible for the production and submission of appropriate performance assurance reports (quarterly) to the PP&RC and/or Board from 1 April 2019 onwards.;
9. That the revised approach to Chief Executive Performance Review (Tier 3) reports be introduced from 1 April 2019;

10. To facilitate the reporting requirements as detailed in the paper, it was agreed that the schedule of Governance Committees be reviewed and amended, and accept the issues of timing for the 20/21 reporting cycle and in the meantime until there is a synchronisation of governance committees and reporting, that the Board continues to receive performance assurance data; and

11. That this approach is reviewed and evaluated in 12 months' time.

2019/05/083

ANNUAL OPERATIONAL PLAN 2019- 2022

The NHS Board received and noted a draft Annual Operational Plan (AOP), and Mr Lauder updated the Board on the discussions taken forward with Scottish Government representatives throughout May.

It was noted that the final draft AOP which was attached to the report reflected the Scottish Government assurance of £10.3m to support delivery of the waiting times targets, with the potential of an additional £2.2m following review of performance in September 2019. It was highlighted that the AOP was awaiting formal approval from Scottish Government.

THE BOARD

1. Noted that an initial draft Annual Operational Plan (AOP) was submitted to Scottish Government on 29th March 2019, and that the feedback received was reflected in the attached final draft AOP; and
2. Approved the final draft AOP for onward submission to the Scottish Government in May 2019.

2019/05/084

ACHIEVING EXCELLENCE

The NHS Board received a number of papers and reports under the heading Achieving Excellence.

2019/05/084a

MRRP UPDATE

The NHS Board received and noted an update from Mr Cannon on recent developments in relation to the MRRP Independent Review Team, with particular reference to the timetable set out by the Review Team for the submission of their final report to the Cabinet Secretary for Health and Sport on 31st May 2019.

Dr Osborne asked that the Board be brought together for an urgent discussion once the report was made available to the Board. Mrs Mahal indicated that this would be arranged quickly and Board Members would be given as much notice as possible.

THE BOARD:

1. Noted that the Independent Review Team had confirmed that their report will be submitted to the Cabinet Secretary by 31 May 2019, with a publication date to be decided by the Cabinet Secretary; and

2. Noted that the Independent Review Team Co-Chairs had assured the Chief Executive and the Board Chair that their requests for documentation and clarification had been appropriately addressed by NHS Lanarkshire, and confirmed that they were satisfied with the responses to these requests.

2019/05/084b

TRAUMA & ORTHOPAEDICS

The NHS Board received and discussed a report which provided an update on Phase 1a, including the risks and costs of separating trauma and elective inpatient care by site. Mrs Mahal welcomed Mr Peebles, Service Manager, Trauma and Orthopaedics to the meeting to provide the presentation. It was noted that the issue, and the presentation, had been discussed in detail at the Acute Governance Committee meeting.

Mr Peebles provided a detailed assessment of the infrastructure risks, and the potential impact on patient safety, in his presentation to the Board.

He sought the Board's approval of the recommendation from the Programme Board that a delay was now required to enable the creation of additional beds on the University Hospital Wishaw site, and that the delivery of Phase 1a be delayed until summer 2020.

Dr Osborne confirmed that the Acute Governance Committee had discussed the issue in detail at their meeting on 15 May 2019 and had agreed that in view of the risks identified, a delay should be recommended to the NHS Board.

Dr Burns indicated that clinical staff at University Hospital Wishaw had raised concerns about the programme and the capacity issues at the Hospital, and although this impacted on the actions agreed with the General Medical Council, as part of an enhanced monitoring regime, a meeting would be arranged with the Post Graduate Dean and the Training Director to outline the risks and the rationale for the delay.

In response to a question about staff consultation from Mrs Macer, Ms Knox indicated that there had been no discussion with staff who might be impacted by this delay, in advance of the proposal being discussed and approved by the NHS Board, but provided reassurance that these discussions will be taken forward if the NHS Board approved the delay.

Mr Calum Campbell stated that the revised plan was achievable, and realistic, and that the views of the clinical staff at the Hospital had to be taken into account in planning the next stage.

In discussion Board Members raised issues about whether the delay could have been predicted, what lessons had been learned, and how could these be applied to other projects.

Ms Knox

Mrs Mahal asked that the revised plan be brought back to the Acute Governance Committee & the Planning, Performance and Resources Committee in September 2019

THE BOARD:

1. Noted the presentation;
2. Noted the further assessment of infrastructure, and potential patient safety risks, and the recommendation from the Programme Board that a delay was now required to enable creation of additional beds on the University Hospital Wishaw site, and that the delivery of Phase 1a be delayed until summer 2020; and
3. Approved a delay in the delivery of Phase 1a of the project until the summer of 2020; and
4. Agreed to await a further update at the Planning, Performance and Resources Committee meeting in September 2019 with further clarity and assurance on the timelines and planning required.

2019/05/084c

MENTAL HEALTH & WELLBEING STRATEGY

The NHS Board received and noted a report from Mrs Armstrong and Mrs Bell on the progress being made in the development of the Lanarkshire Mental Health and Wellbeing Strategy, and to assure the NHS Board that the development process is on track to produce a final Strategy for approval in August 2019.

Mrs Armstrong and Mrs Bell provided a presentation to the Board which set out an update on progress made in developing the Lanarkshire Mental Health and Wellbeing Strategy, and provided the Board with assurance that the development process was on track to produce a final Strategy for approval in August 2019 in accordance with the agreed timeline.

Board Members were asked to provide any comments on the content of the Strategy to Mrs Armstrong by 6 June 2019.

THE BOARD

1. Noted the progress made in developing a Mental Health and Wellbeing Strategy for Lanarkshire;
2. Noted that a population approach has been utilised in the development of the Lanarkshire draft mental health and wellbeing strategy;
3. Noted that a period of further meaningful engagement with key stakeholders has been undertaken over a 6 week period from 08 April – 24th May with a view to ensuring the final strategy reflects the needs of service users, carers and wider Lanarkshire population;
4. Noted that the further comments could be provided by 6 June 2019; and
5. Noted that the final Strategy will be presented to the NHS Board in August 2019 for approval.

Mrs
Armstrong

2019/05/084d

DIGITAL HEALTH & CARE STRATEGY 2019-2026

The NHS Board received and discussed the Digital Health and Care Strategy 2019-2026. Mr Wilson provided an overview of the Strategy, which he reminded Board Members had been presented in draft at the April Planning, Performance & Resources Committee meeting for comment. The strategy had also been reviewed by a number of NHS Lanarkshire groups and Committees, and had been reviewed by Gartner, who were a global research and advisory firm providing insights, advice, for leaders in IT and have a specialism in digital healthcare.

Mr Wilson commended the Strategy to the NHS Board for approval. It set out a prioritised programme of work over 7 years that would exploit the investment in technology that had been made to date, harness the opportunities for innovation and deliver digital solutions to meet the growing health and care demands into the future as set out in Achieving Excellence. The strategy provided a plan to use digital as a powerful tool to fundamentally improve day to day health and social care across NHS Lanarkshire to support the Board's transformation and improvement objectives.

It was noted that a progress report would be provided to the Planning, Performance and Resources Committee on an annual basis, in April of each year.

Mr Wilson

THE BOARD

1. Approved the Digital Health and Care Strategy 2019-2026.

2019/05/085

POPULATION HEALTH, PRIMARY CARE & COMMUNITY SERVICES GOVERNANCE COMMITTEE

The NHS Board received and noted a summary of the discussion at the Population Health, Primary Care and Community Services Governance Committee meeting held on 14 May 2019. Ms Morris, Committee Chair, also provided a verbal update to highlight the main discussion points at the meeting.

Ms Morris also assured the Board that the Committee had discussed in some detail the Access Targets Report (a copy of which was also provided for Board Members for noting). The Board noted the Access Targets Report and the actions being taken to address performance issues.

A number of additional papers that had been endorsed by the Committee were presented to the Board for approval.

2019/05/085a

HEALTH PROMOTING HEALTH SERVICE

The NHS Board received and discussed a report from Mr Docherty on the Health Promoting Health Service Directive and the requirement to submit a baseline assessment and action plan by 31 May 2019. It was noted that this had been discussed by the Committee and endorsed for submission to the NHS Board by the Committee.

Mr Docherty reminded the Board that in April 2018 a new Health Promoting Health Service Directive was issued to NHS Boards setting out priorities for 2018 and beyond. This directive reiterated the policy commitment to this agenda and highlighted the importance of prevention and early intervention in the current complex landscape of changing demographics, increasing demand and reduced resources.

In December 2018, a baseline self-assessment and action plan framework was issued for completion by Boards, by end May 2019. Boards were required to undertake a self-assessment of readiness against each indicator (assigning a level of 0-3) and develop key actions for each of the four outcomes in order to work towards achieving the next indication level.

In January and April 2019 two stakeholder workshops were held to inform the baseline self-assessment and the resultant draft submission is included at Appendix 1.

Overall NHS Lanarkshire had made good progress in a number of areas however the assessment suggested there is a need to more fully embed prevention and health improvement in practice and to better coordinate and monitor programmes which support staff health and wellbeing. These areas will be the main focus of the initial one year action plan.

THE BOARD:

1. Noted the baseline self-assessment; and
2. Approved the action plan towards delivery of HPHS outcomes as provided in the CMO 2018 (3) letter.

2019/05/085b

CHILD POVERTY ACTION REPORTS

The NHS Board received and discussed a report from Mr Docherty that provided an overview of planned work to address child poverty in Lanarkshire and sought approval of the North and South Lanarkshire local Child Poverty Action Reports which were to be submitted to Scottish Government by 30 June 2019. It was noted that this had been discussed by the Committee and endorsed for submission to the NHS Board.

Mr Fuller asked about the Living Wage and Mr White reported that the Board was an accredited Living Wage employer and was working with all third party suppliers to encourage them to become accredited.

THE BOARD:

1. Approved the North and South Lanarkshire Child Poverty Action Reports for submission to Scottish Government.

2019/05/085c

DIRECTOR OF DENTISTRY

The NHS Board received and discussed a proposal from Mr Docherty to approve the establishment of the role of Director of Dentistry. It was noted that this had been discussed by the Committee and endorsed for submission to the NHS Board.

Mr Docherty highlighted that the establishment of the role had come about as a result of a letter from the Chief Dental Officer in July 2018 (attached) that, in line with Action 20 of the Oral Health Improvement Plan (OHIP), published in January 2018, every Health Board was required to appoint a dental lead, nominally called Director of Dentistry.

The purpose of this role is to ensure that Scottish Government has one point of contact for each Health Board for all aspects of dentistry. The individual would be responsible for disseminating information and accountable for ensuring implementation of initiatives contained within the OHIP and any future national strategies.

It was noted that there was no additional funding to support the role, and that Mr Docherty would take this forward with the Clinical Director, Public Dental Services, Clinical Director, General Dental Services and Consultant in Public Dental Health.

THE BOARD:

1. Approved the establishment of the role of Director of Dentistry as outlined in the paper from Mr Docherty.

2019/05/086

ACUTE GOVERNANCE COMMITTEE

The NHS Board received and noted a summary of the discussion at the Acute Governance Committee meeting held on 15 May 2019. Dr Osborne, Committee Chair, also provided a verbal update to highlight the main discussion points at the meeting. She agreed to circulate a copy of the SBAR on Interventional Radiology issues to all Board Members.

In discussion, Board Members sought further assurance on the reasons for the increase in the number of A&E attendances and Ms Knox indicated that detailed work was being undertaken.

Dr Osborne also assured the Board that the Committee had discussed in some detail the Access Targets Report (a copy of which was also provided for Board Members for noting).

The Board noted the Access Targets Report and the actions being taken to address performance issues.

2019/05/087

FINANCE REPORT TO 31 MARCH 2019

The NHS Board received and noted a report from Mrs. Laura Ace, Director of Finance, which set out the financial position of the NHS Board at 31st March 2019.

Mrs Ace reported that at the end of March 2019 the Board was reporting that all 3 financial targets were met in 2018/19. These were, however, subject to Audit during May and June of 2019.

The NHS Board ended the year with £0.288m remaining from a revenue resource limit of £1,272.215m (0.02%), marginally better than the planned LDP trajectory of breakeven. In line with guidance, the year-end position

treats the £8.780m surplus on funding delegated to the IJBs as being transferred to IJB reserves.

The capital plan was delivered within the agreed budget.

At £28.762m the year end efficiency recorded was more than the £25.821m target at the start of the year. £1.464m of this excess achievement related to prescribing in North IJB and forms part of the transfer to reserves. The remainder, together with higher in year income than expected and shallower cost growth in new drugs than initially forecast allowed the Board to put in place additional winter capacity and fund community IT implementation costs and deliver a small surplus.

THE BOARD:

1. Noted the satisfactory financial position at 31 March 2019.

2019/05/088

FINANCIAL PLAN 2019/20

The NHS Board received and noted an update from Mrs L Ace on the development of the Financial Plan for 2019/20.

The Board was asked to endorse the continued operation of the revenue financial framework approved at its meeting of 27 March 2019, now including the agreed savings plans. The Board was asked to approve the initial Capital Plan for 2019/20, noting future years. The Board was also asked to note that as the year progresses any new allocations or significant changes in expenditure forecasts will be adjusted against this opening plan and reported to the Board or Planning, Performance and Resources Committee on a monthly basis.

THE BOARD

1. Approved the financial framework, noting the risks and uncertainties.

2019/05/090

ANNUAL OPERATIONAL PLAN QUARTER 4 REPORT

The NHS Board received and discussed the Quarterly Performance Report for Quarter 4, which described progress against the former Local Delivery Plan (LDP) Standards for 2017/18, and the new draft Annual Operational Plan (AOP) targets for 2018/19.

Members noted the quarter 4 report as at 15th May 2019. Annex 2 of the report set out a note of assurance of governance for those Standards/Targets that are rated as 'red' or 'amber'.

THE BOARD:

1. Noted the Quarterly Performance Report (Q4) and confirmed that it provided sufficient assurance about progress in the delivery of former LDP Standards and 2018/19 AOP targets; and
2. Noted that the timetable for the presentation of 2019/20 Quarterly AOP Reports was the subject of recommendations detailed within

a separate paper for consideration at the NHS May Board meeting
(Review of the Integrated Corporate Performance Framework).

2019/05/091

**CORPORATE RISK REGISTER & RISK MANAGEMENT
STRATEGY & ANNUAL REPORT 2018/19**

2019/05/091a

CORPORATE RISK REGISTER

The NHS Board considered the Corporate Risk Register.

Mr. Cannon reminded Members that the Corporate Risk Register was previously presented to the Board in March 2019. Since then, the Planning, Performance & Resources Committee had considered an update in April, and the Corporate Management Team had considered the corporate risk register in April and May 2019. The Corporate Management Team considered emerging and new risks; focused on very high graded risks across NHSL and risks exceeding the corporate risk appetite. As a result, risk descriptions, assessed level of risk, and /or controls had been updated accordingly to reflect progress of mitigating actions and impact.

The report provided a summary of material changes to the Corporate Risk Register including new and closed risks, since the last reporting period: set out the NHS Lanarkshire Corporate Risk Profile over time with the number of risks plotted by likelihood x impact and related corporate objectives and type, accurate as at 15th May 2019; set out very high graded corporate risks that are above the corporate risk appetite, including very high graded risks across NHSL as enablers for corporate consideration and decision-making; set out for discussion, any emerging very high graded risks through business critical projects, and referenced the thirty-two (32) risks set out in the NHSL Corporate Risk Register, accurate as at 15th May 2019.

THE BOARD:

1. Noted the summary of significant material changes to the Corporate Risk Register, including the position of new and/or closed risks since the last reporting period;
2. Noted other changes to the corporate risk register for this reporting period;
3. Approved the NHS Lanarkshire Corporate Risk Profile over time; with the number of risks plotted by likelihood x impact; related corporate objectives and type as at 15th May 2019;
4. Received assurance on the mitigation of all Very High graded risks across NHSL, noting the change of number of risks emerging and reviewed;
5. Considered all Very High graded risks in the context of the Healthcare Strategy, Commissioning Plans and decision-making; and
6. Noted the detailed Corporate Risk Register, accurate as at 15th May 2019, set out in Appendix 2.

2019/05/091b

RISK MANAGEMENT STRATEGY

The NHS Board considered the Risk Management Strategy.

Mr Cannon highlighted that the NHS Lanarkshire Risk Management Strategy was previously presented to the Board in May 2018 for endorsement following annual review.

The Strategy had since been subject to review and updated to reflect changes resulting from collaborative work completed with the North and South Health & Social Care Partnerships, and from a review through the Risk Management Facilitators Network.

Changes have been minor for this review, noting that through improved assurance mapping work to be undertaken in 2019/2020, the NHSL risk appetite and tolerance will be subject to review in year.

The key change was the introduction of the memorandum of agreement as seen in Appendix B within the Strategy.

It was noted that the Corporate Management Team had approved the changes highlighted for this review period.

THE BOARD:

1. Approved the updated Risk Management Strategy.

2019/05/091c

RISK MANAGEMENT ANNUAL REPORT 2018/19

The NHS Board considered the Risk Management Annual Report 2018/19.

The Risk Management Annual Report set out the intention to provide assurance to Board Members about the way and the extent to which the management of risk remains a key focus for the Board and the wider organisation.

From the work undertaken during the year, the agreed evaluation through the Key Lines of Enquiry and the Internal Control Evaluation 18/19 Report, the CMT can confirm that there were adequate and effective risk management arrangements in place throughout 2018 -2019.

The Annual Report set out the risk management reports that were relied upon by the Corporate Management Team in agreeing with the assurance statement:

‘From the work undertaken during the year, the agreed evaluation through the Key Lines of Enquiry and the Internal Control Evaluation 18/19 Report, the CMT can confirmed that there were adequate and effective risk management arrangements in place throughout 2018 -2019’

The NHS Board was content that that the Annual Report accurately reflected the management of risk.

THE BOARD:

1. Approved the updated Risk Management Annual Report 2018/19.

2019/05/092

WINTER REVIEW 2018/19

The NHS Board received and noted a report from Mr Craig Cunningham, Head of Commissioning and Performance, South Health & Social Care Partnership, which provided an update on the review of winter planning across Health & Social Care, which had been submitted to Scottish Government on 3 May 2019, to support winter planning preparations for 2019/20.

The local review was co-ordinated by Mr Cunningham, South Health & Social Care Partnership, on behalf of the Board, and the two Partnerships and involved all the key local stakeholders. The Corporate Management Team discussed and endorsed the return at their meeting on 29 April 2019.

THE BOARD:

1. Noted and endorsed the review of the Winter Plan for 2018/19 as submitted.

2019/05/093

CORPORATE COMMUNICATIONS REPORT

The NHS Board received and noted a report from Mr Calvin Brown, Director of Communications, which provided an update on performance metrics for media coverage, social media, NHS Lanarkshire's public website and Freedom of Information requests from November 2018 – December 2018. The report also set out progress on a number of planned campaigns including Breastfeeding, Infection Prevention and Control, Violence and Aggression.

THE BOARD:

1. Noted the content of the report and requested that information on the Breastfeeding Symposium be circulated to all Members.

2019/05/094

STURROCK REPORT

The NHS Board received and noted a report providing an update on the Sturrock Report.

Mr Cannon reminded Board Members that the Report to the Cabinet Secretary for Health and Sport into Cultural Issues relating to allegations of Bullying and Harassment in NHS Highland (known as the Sturrock Report) was circulated to Board Members and Members of the Corporate Management Team on 14 May 2019, along with the Response to the Report by Scottish Government.

The report, and a follow up letter from the Cabinet Secretary on 20 May 2019 (attached to the report), set out a series of actions to be considered by all NHS Boards, by 28 June 2019.

It was noted that the action to compile the response was being led by John White, Director of Human Resources, and the issue would be raised at the Staff Governance Committee on 3 June 2019, as part of addressing the requirement to submit a response by 28 June 2019. Mr White added that he would seek to involve a range of other key stakeholders, such as the Area Partnership Forum in doing so. The Board agreed to discuss their response to the Sturrock report in a specific seminar to be held on 3 June 2019.

THE BOARD:

1. Noted the update; and
2. Agreed to discuss the Board's response at the Board Seminar on 3 June 2019.

2019/05/095

OUT OF HOURS REPORT

The NHS Board received and noted a report from Marianne Hayward, Head of Health and Social Care, South Lanarkshire Health & Social Care Partnership that provided an update on the Out of Hours Service for NHS Lanarkshire.

It was highlighted that in recent years the service had been successful in recruiting additional nursing staff to take on additional roles. Recently, in the last year, work has also been underway to grow an alternative workforce which included paramedic, pharmacy as well as paediatric and mental health nursing. Despite these initial improvements, and new initiatives, GP fill rates for the OOH workforce remained challenging across the 2 sites. Nurse Practitioner fill rates were now challenged due to attrition of these staff moving to promoted posts, and to GP Practices. ANP attrition had also been affected by staff moving to GP practices.

The report highlighted the ongoing challenges being encountered in maintaining two OOH sites, provided assurances to the Board that actions were being taken to ensure that two sites are maintained operational, it described the range of short to medium term actions in place, and how these were being closely managed and monitored.

The Board Members asked for clarity about the variance in salary issues across NHS Boards and the potential to have a West of Scotland agreement. They acknowledged that the issues were multifactorial and recruitment and retention of GPs was a key factor.

THE BOARD:

1. Noted the update;
2. Noted the challenges being faced; and
3. Noted the range of measures in place to maintain two sites for the provision of Out of Hours Services.

- 2019/05/096 **NORTH LANARKSHIRE INTEGRATION JOINT BOARD ON 26th MARCH 2019**
- The NHS Board received and noted a verbal update following the meeting of the North Lanarkshire Integration Joint Board on 26th March 2019.
- 2019/05/097 **SOUTH LANARKSHIRE INTEGRATION JOINT BOARD ON 16th APRIL 2019 (DRAFT)**
- The NHS Board received and noted the draft minute of the meeting of the South Lanarkshire Integration Joint Board on 16th April 2019.
- 2019/05/098 **AREA CLINICAL FORUM ON 18th APRIL 2019 (DRAFT)**
- The NHS Board received and noted the draft minute of the meeting of the Area Clinical Forum held on 18th April 2019.
- 2019/05/099 **COMMUNITY PLANNING PARTNERSHIP DRAFT MINUTES – NORTH 6th MARCH 2019 & SOUTH 28th FEBRUARY 2019**
- The NHS Board received and noted the draft minutes of the meetings of the North (6th March 2019) & South (28th February 2019) Community Planning Partnerships.
- 2019/05/100 **STAFF GOVERNANCE COMMITTEE 25th FEBRUARY 2019 (DRAFT)**
- The NHS Board received and noted the draft minute of the meeting of the Staff Governance Committee on 25th February 2019.
- 2019/05/101 **WORKPLAN 2019/2020**
- The NHS Board received and noted an updated Workplan for 2019/2020.
- 2019/05/102 **CALENDAR OF DATES 2019**
- The NHS Board received and noted an updated Calendar of Dates for meetings in 2019.
- 2019/05/103 **ANY OTHER COMPETENT BUSINESS**
- There were no items raised.
- 2019/05/104 **RISK**
- It was agreed to reflect further on the risks discussed under the Annual Operational Plan and the Out of Hours Service.
- 2019/05/105 **DATE OF NEXT MEETING**
- Wednesday 26th June 2019 at 09.40am.