Lanarkshire NHS Board Kirklands Hospital

Fallside Road Bothwell G71 8BB

Telephone: 01698 855500 www.nhslanarkshire.org.uk



Minute of Meeting of the Lanarkshire NHS Board held on Wednesday 28<sup>th</sup> November 2018 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 C Campbell, Chief Executive

Mr P Campbell, Non Executive Director Mr M Fuller, Non Executive Director Councillor P Kelly, Non Executive Director Mrs M Lees, Chair, Area Clinical Forum Councillor J McGuigan, Non Executive 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:** Mr C Brown, Head of Communications

Mr P Cannon, Board Secretary

Mr C Cunningham, Head of Commissioning & Performance, South

**Lanarkshire Health and Social Care Partnership** 

Mr G Docherty, Director of Public Health

Mr Ross McGuffie, Interim Chief Accountable Officer, North Lanarkshire

**Health and Social Care Partnership** 

Ms H Knox, Director of Acute Services / Deputy Chief Executive Mr C Lauder, Director of Planning, Property & Performance

Mr J White, Director of Human Resources

Mr D Wilson, Director of Information and Digital Technology

Mrs V de Souza, Director, South Lanarkshire Health and Social Care

**Partnership** 

Ms K Thomson, Senior Nurse,

Ms L McNally, Senior Improvement Advisor (to Minute 2018/11/170)

Ms F Black, Occupational Therapist (to Minute 2018/11/170)

**APOLOGIES:** Mrs L Macer, Employee Director

2018/11/164 **WELCOME** 

Mrs. Mahal welcomed colleagues to the meeting. She extended a particular welcome to Karen Thomson, who was shadowing Irene Barkby, and to Lianne McNally, Senior Improvement Advisor, and Fiona Black,

Occupational Therapist, who were attending for item 7, Patient Story – 'Think Activity'.

#### 2018/11/165 **DECLARATION OF INTERESTS**

There were no declarations.

#### 2018/11/166 **MINUTES**

The minute of the meeting of the NHS Board held on 26th September 2018 was submitted for approval.

# THE BOARD

1. Approved the minute of the meeting held on 26<sup>th</sup> September 2018.

#### 2018/11/167 **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.

#### 2018/11/168 **CHAIR'S REPORT**

Mrs. Mahal provided a verbal report.

# Visit by Cabinet Secretary - Childsmile

It was noted that the Cabinet Secretary and the Deputy First Minister had visited Auchinraith Primary School, Blantyre, on 24 October 2018, to acknowledge the progress that the Board's Childsmile team had made, in improving the oral health of Lanarkshire children, particularly those in the most deprived areas, by working in partnership with Education and Local Authority colleagues.

# Annual Review 2 November 2018

It was noted that the Annual Review with the Cabinet Secretary and Minister for Public Health had been held on 2 November 2018 and that arrangements will need to be made to hold a separate Public Session in early Mr P Cannon 2019.

# MRRP - Independent Review - update

Mrs Mahal reported that she had received a letter from the Cabinet Secretary for Health & Sport on 9 November 2018 indicating that an Independent Review was being established to provide an independent assessment of the process followed by NHS Lanarkshire. To date, the terms of reference and membership of the Independent Review Team had not been confirmed.

She further highlighted the discussion at the Board Seminar on the 16<sup>th</sup> of November 2018 with the Director General, where he attempted to address the concerns raised in writing by clinicians regarding the decision to delay the Outline Business Case. The Director General provided an assurance that the Cabinet Secretary wished to make clear that the clinical model for MRRP was not in question.

# d) Living Wage Accreditation

Mrs Mahal was delighted to confirm that NHS Lanarkshire would be acknowledged as the first territorial NHS Board to achieve Living Wage accreditation at a ceremony, attended by the Cabinet Secretary, to take place at University Hospital Monklands on 7 December 2018. It was agreed to share the details of the ceremony to Non Executive Members for information.

Mr J White

# e) Long Service Recognition Award Ceremonies

It was noted that three Long Service Recognition Awards Ceremonies had been arranged, and that the third ceremony would take place on 6 December 2018 at University Hospital Monklands. Mrs Mahal indicated that the first two sessions had been very well received by award recipients. Board Members were encouraged to attend if they were available.

# f) Dates for Diary

- (i) Members were encouraged to attend the Recognising Excellence and Promoting Quality in Education Awards on 7 December 2018;
- (ii) Members were reminded that the West of Scotland Regional Engagement Event was taking place on the afternoon of 20 December 2018 at the Golden Jubilee Conference Centre; and
- (iii) Members were reminded about the Finance Seminar for the Board Members on 18 December 2018.

# 2018/11/169 **BOARD EXECUTIVE TEAM REPORT**

The NHS Board considered the Board Executive Team Report.

Mr. Calum Campbell invited colleagues to highlight areas of note within the detailed Executive Team Report.

Dr Burns highlighted two recent appointments, namely Dr John Keaney, Consultant in Emergency Medicine & Chief of Medical Services at University Hospital Hairmyres had been appointed as Divisional Medical Director for Acute Services with effect from 5 November 2018. Dr Keaney was succeeded by Mr James Saldanha, Consultant Surgeon & Depute Clinical Director as Chief of Medical Services at University Hospital Hairmyres. Ms Karon Cormack had been appointed as Director of Quality and will take up post in NHS Lanarkshire in January 2019.

Mr Lauder highlighted the £19m refurbishment of University Hospital Monklands main theatres which was completed at the end of October 2018 following 5 years' planning and construction works.

Mr Fuller sought assurance on the actions being taken to respond to Brexit. Mr C Campbell indicated that Scottish Government were providing advice and support to Boards. Mr Docherty indicated that he was chairing an NHS Lanarkshire working group. Board Members noted that Brexit was on the risk register.

# 2008/11/170 **PATIENT STORY – 'THINK ACTIVITY'**

The NHS Board considered a paper which set out the improvement journey which originated in Kello Community Hospital, Biggar, to improve the physical and mental wellbeing outcomes for patients. The initial project was a collaboration between NHS Lanarkshire, Healthcare Improvement Scotland and Glasgow Caledonian University.

These improvements encouraged an active ethos on the ward, incorporating a self-management approach to goal setting and increasing activity levels that put patients at the centre of the process, giving them control over goals set and how they were achieved.

Fiona Black, Occupational Therapist and Lianne McNally, Quality Directorate, attended to introduce a short video which featured patients, staff and visitors at Kello Hospital and Lady Home Hospital and set out the benefits of the programme.

In relation to Falls, it was noted that the incidence of falls had been reduced by up to one third of the number prior to the introduction of the programme. Ms Black indicated that the activity undertaken had promoted greater independence and contributed to this significant reduction in falls.

It was noted that there had been local interest in spreading the programme, and Mr Cunningham highlighted that staff at Stonehouse Hospital were actively looking at introducing the programme. There had also been national and international interest in the use of the Activity Passport, at scale, both in hospital and in the community to support people to 'Think Activity'.

It was also noted that the Project Team had recently won the Top Team Award in the Scottish Health Awards 2018.

Board Members expressed their thanks to Fiona and Lianne for attending, and for detailing the very positive changes made at Kello and Lady Home Hospitals. The programme was universally commended and the Board Chair asked that the Board's support and endorsement for the programme be passed on to staff and patients involved.

# **THE BOARD:**

- 1. Acknowledged the excellent work undertaken by staff at Kello and Lady Home Hospitals;
- 2. Supported the intention to spread this out to other appropriate settings throughout NHS Lanarkshire;
- 3. Commended the Project Team on their well-deserved accolade at the 2018 Scottish Health Awards.

#### 

The NHS Board considered an update on the Lanarkshire Quality Approach and progress with Quality Initiatives across NHS Lanarkshire. Dr. Burns reminded Board Members that the Board had approved the NHS Lanarkshire's Quality Strategy 2018 to 2023 at the meeting in May 2018, and highlighted the Strategic Objectives set out in the Plan.

The paper provided an update on the following areas:

- The work on NHS Lanarkshire Quality Plans 2018-23:
  - o Person-centred Care Plan
  - o Enabling Safety Plan
  - o Effective Care Plan
  - o Quality Improvement Capacity & Capability Building Plan
- Hospital Standardised Mortality Ratio (HSMR): April-June 2018
- Annual Report on Bereavement Care 2017/18
- IHI/BMJ International Forum on Quality and Safety 2019

In relation to the HSMR data, the Board noted and welcomed the reductions shown across all NHS Lanarkshire Hospitals (a reduction of 14.5% - 29%) against a national reduction of 11.2%, for the April – June 2018 period.

Members discussed the importance of communicating the excellent work on HSMR to our other stakeholders. Mr Brown agreed to follow this up.

Mr C Brown

In relation to the work being taken forward in relation to Bereavement, Ms Thomson asked if the excellent work delivered by the Bereavement Care Steering Group could be spread across other agencies. Dr Burns agreed to feed that back to the Group. It was also suggested that the topic might be included in the list of potential Patient Story items at a future Board meeting.

Dr J Burns

It was noted that the first day of the IHI / BMJ International Forum on Quality and Safety in Healthcare is an Experience Day which allows delegates to choose to attend one of a range of Experience Day visits hosted by organisations within the host country. This year NHS Lanarkshire will host delegates for an "Experience Day" on the 27 March. It was noted that this was the date of the March NHS Board Meeting, and it was suggested that the Board look to locate the venue of the Board Meeting to allow Board Members to participate in this event.

Mr P Cannon

Board Members welcomed the very detailed and informative update provided and asked that future reports should focus on the impact of different initiatives on patient safety and care.

# **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 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;

# HAI UPDATE (APRIL - JUNE 2018)

The NHS Board considered an update on Healthcare Associated Infection (HCAI) Standards 2015 with particular reference to NHSL Board performance against the Local Delivery Plan (LDP) Targets.

Mrs Barkby highlighted that the focus for officers over the coming period was improving compliance with the hand hygiene key performance indicators. It was also noted that mock inspections that had been in place last year had been helpful and Mrs Barkby undertook to follow up on this and the possibility of Hand Hygiene skills labs for the coming year.

Mrs I Barkby

# 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.

# 2018/11/173 WINTER PLANNING ARRANGEMENTS

The NHS Board considered a report setting out the planning arrangements being put in place to ensure that services were prepared for winter.

It was noted that the plan had been prepared following discussion and agreement within the winter planning group as well as the NHS Corporate Management Team and the Senior Management Teams of North and South Health & Social Care Partnerships. Earlier drafts had also been shared with Performance, Planning, and Resources Committee. Summary versions had also been shared with the Population Health, Primary Care & Community Services Governance Committee and would also be shared with the North and South Lanarkshire Integration Joint Boards.

The version presented, and an earlier draft, had also been shared with Scottish Government, and the response from Scottish Government of 22 November 2018 stated that "The Cabinet Secretary is now content for you to publish your winter plan. This should now be published as a standalone document on your Boards website and should include the preface you provided which has been replicated in the annex".

Mr Docherty reported that the Board's newly appointed Resilience Manager had reviewed last year's plan and the lessons learned from last year and the Plan for 2018/19.

In relation to staffing, Mr Moore was reassured that additional staffing planned to be in place from 1 January 2019 was in place, and that where

there remained any gaps beyond 1 January 2019 staff roles would be reprioritised appropriately.

In relation to financial affordability, Dr Osborne asked for assurance that the whole system was working together effectively to make best use of the additional allocations for winter, and was working collaboratively across budgets to address pressures.

It was acknowledged that a multi-agency approach was in evidence throughout the plan, and it was noted that events to involve all planning partners across Councils, the Ambulance Service, NHS 24 and the Health Board (involving a total of around 500 representatives at four events) had discussed key pressures and areas of mutual collaboration.

Mr P Campbell sought clarification on the additionality provided by the plan and that there was coherency across the system

Mr White confirmed that the Adverse Weather Policy had been subject to review with staff side partners, following differences in interpretation of statements made by Scottish Government and other statutory agencies about weather warnings and travelling to work, and the position had been clarified with staff in advance of 2018/19.

# THE BOARD:

- 1. Approved the planning arrangements being put in place to ensure services are prepared for the coming winter months;
- 2. Noted that the first draft of the plan was submitted to Scottish Government by 30 September 2018;
- 3. Noted that the finalised Winter Plan was submitted to Scottish Government on 31 October 2018; and
- 4. Noted the response of 22 November 2018 from Scottish Government.

2018/11/174

# <u>COMMUNITY IT SYSTEM – BUSINESS CASE SIGN OFF</u>

The NHS Board considered a paper which sought commitment and approval for investment in the procurement and implementation of a new, interim Community IT system as a replacement for MiDIS (Multi-Disciplinary Information System), the Community IT system currently used within NHS Lanarkshire.

NHS Tayside, who was the supplier of MiDIS stopped all development work on MiDIS three years ago. Mr Wilson reported that NHS Tayside had transitioned the support arrangements to "best endeavours" care and maintenance. Whilst the current system (MiDIS) was being supported on a "best endeavours" basis by NHS Tayside, should the system fail in future there were no guarantees the system would be recovered within reasonable timescales.

The national community IT system procurement programme had been delayed and there was a requirement to address the emerging risks

associated with the current position through the re-provisioning of a community IT system. All MiDIS consortium members, comprising of 6 Health Boards, were in the process of migrating onto alternative commercial off the shelf solutions.

To maintain sustainability for NHS Lanarkshire's Community Services an interim solution needed to be procured and implemented as an urgent priority.

Members were reminded by Mr Wilson that a risk review team identified 6 strategic/operational risk associated to the MiDIS. These risks were actively managed on Datix, however the risk management strategy had confirmed the need to replace MiDIS as a priority.

A detailed report identified the costs and benefits associated with 6 potential options, and the report concluded that the Board should procure Cambric Morse. Mr Wilson highlighted that the system had already been implemented in three of the five (excluding NHS Tayside) MiDIS Consortium Board areas (NHS Dumfries and Galloway, NHS Highland and NHS Western Isles) and was currently being implemented in NHS Forth Valley. It was therefore regarded as a potential interim solution which will meet the sustainability requirements for Community Services in NHS Lanarkshire over the next three years.

In discussion, Members sought clarity on the future proofing of the system, the need to have a system that was an enabler across community services and confirmation on the requirement to take a Board by Board approach rather than await a national solution. Members agreed that the risks and the current system needed to be responded to and were content with the approach being outlined.

# THE BOARD:

1. Approved the recommendation that Cambric Morse be procured as Mr D Wilson its interim Community System.

# 2018/11/175

# NON EXECUTIVE DIRECTORS - PORTFOLIO UPDATE

The NHS Board considered a paper which set out changes in the Governance Portfolios of Non-Executive Directors from 3rd December 2018 in the light of the appointment of 2 new Non-Executive Directors from 1st September 2018; Brian Moore and Lesley Thomson.

Approval was also sought for the Medical Director, Dr Jane Burns, to become a member of the Endowments Sub Committee, and for the establishment of the Monklands Refurbishment Replacement Project Oversight Panel, to be chaired by Lesley Thomson.

# **THE BOARD:**

1. Approved the changes summarised in the paper and noted the full portfolios of all Non-Executive Directors in Appendix 1 of the paper.

# WEST OF SCOTLAND HEALTH AND SOCIAL CARE DELIVERY PLAN DESIGN AND DISCUSSION DOCUMENT

The NHS Board was provided with a draft response to the West of Scotland Regional Planning Team request for comments on the above document.

Mr Cannon reminded Members that the discussion document had been circulated to Board Members at the September 2018 Performance, Planning & Resources Committee meeting, and Mr Lauder provided a presentation / overview of the main features of the document. It was agreed at that time to provide a draft for consideration.

It was noted that the deadline for receipt of comments back to the Regional Team was 3 December 2018 and Mrs Mahal invited members to provide any comments on the draft to the Board Secretary before that date.

# THE BOARD:

1. Approved the draft response, pending additional comments made Mr P Cannon by Members and asked the Board Secretary to submit the comments by 3 December 2018.

## 2018/11/177

# **FINANCE REPORT TO 31 OCTOBER 2018**

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 October 2018.

Mrs. Ace reported that at the end of October 2018 the Board was reporting a £1.043m over spend, £0.475m better than the Annual Operating Plan (AOP) trajectory which had always recognised a gap between expenditure being incurred and savings schemes taking full effect.

A deliverable plan for closing the £5.473m gap remaining at the time of submitting the AOP was in place. The forecast remained for year-end breakeven, including being able to use underspends and slippage to ensure additional winter capacity is in place and to advance some high priority infrastructure spending.

Mrs Ace reported that the portfolio of capital projects identified at the start of the year were being actively monitored with the trajectory amended as appropriate to ensure available resources are used to best effect.

## THE BOARD:

1. Noted the satisfactory financial position at 31st October 2018.

# 2018/11/178

# MINUTES OF ACUTE GOVERNANCE COMMITEE ON 19th **SEPTEMBER 2018 (DRAFT)**

The NHS Board received and noted the draft minute of the meetings of the Acute Governance Committee held on 19 September 2019 and a report from Mrs Osborne on the November 2018 meeting of the Committee.

# POPULATION HEALTH, PRIMARY CARE AND COMMUNITY SERVICES GOVERNANCE COMMITTEE ON 19th SEPTEMBER 2018 (DRAFT)

The NHS Board received and noted the draft minute of the meeting of the Population Health, Primary Care and Community Services Governance Committee held on 19<sup>th</sup> September 2018.

# 2018/11/180 ACCESS TARGETS REPORT

The NHS Board considered an Access Targets Report. This highlighted performance in the delivery of key scheduled and unscheduled care waiting times and performance within Health and Social Care Partnerships; highlighted areas of pressure and challenge; and described the actions being taken and planned, aimed at delivering sustained improvement.

Ms. Knox reported that overall the Board continued to perform well in relation to the delivery of diagnostics, and also cancer waiting times. Overall planned care delivery performance had seen an improvement and trajectories were being achieved for outpatients, but not for TTG. The Acute Management Team were maintaining a significant focus on Unscheduled Care which, while improved, needs ongoing and active management. It was noted that Hospital Site Directors presented an update on performance at the Acute Governance Meeting on 19th September 2018 and a further update was presented on 21st November 2018.

In relation to unscheduled care attendances and performance, it was noted that the overall position in October 2018 was 91.05%, compared to the September 2018 position of 91.15%.

Mr McGuffie highlighted that the HSCP section of the report focussed on the delayed discharge element of the 6 key areas within the Delivery Plan (2016), albeit it was acknowledged that there were co-dependencies across all 6 areas. Mrs De Souza highlighted current performance against trajectory, issues impacting on performance, commissioning intentions for 2018/19 that will support improving delayed discharge performance, and specific actions being taken forward in North and South Partnerships.

In response to a question from Mr P Campbell, Mr McGuffie also highlighted the continuing challenges around delayed discharges and referred to the high number of referrals and complex assessments being referred to social work colleagues, in both the North and the South Partnerships areas. It was noted however that that a significant focus on Adults With Incapacity (AWI) in North Lanarkshire, over the summer months, had yielded sustained improvements in reducing the number of patients being delayed over 100 days.

In relation to Child and Adolescent Mental Health Services it was noted that the number of completed waits for patients who have been waiting over 18 weeks across both Adult Psychological Services and CAMHS continues to increase, demonstrating that some headway is being made into the group of patients who have exceeded an 18 week wait, and for whom the RTT time has continued.

Mr McGuffie added that around 50% of teams are now operating within the 90% RTT. An action plan has been developed to address ongoing resource issues. Mrs Mahal asked for clarity on the timeline trajectory to bring performance back to 90%.

# **THE BOARD:**

- 1. Noted the maintenance of the Treatment Time Guarantee for the majority of elective patients despite significant pressures;
- 2. Noted the position in relation to the Referral to Treatment Target;
- 3. Noted an improvement in the overall outpatient numbers waiting;
- 4. Noted the positive performance in Cancer Waiting Times;
- 5. Noted the challenges around delayed discharge performance; and
- 6. Noted the range of actions being taken forward to improve performance in AHP, Community and Psychological services.

## 2018/11/181

# **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 August 2018. Since then, the Corporate Management Team had considered the corporate risk register in September, October and November 2018. 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 21<sup>st</sup> November 2018; 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 21<sup>st</sup> November 2018.

Mr Cannon highlighted an inconsistency in gradings in relation to risk 1703 (at pages 3 and 5) and explained that these gradings were assigned in two different review periods. It was noted that where this was the case within the report in future, this would be highlighted.

# THE BOARD:

 Noted the summary of material changes to the Corporate Risk Register, including the position of new and/or closed risks since the last reporting period;

- 2. 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 21st November 2018;
- 3. Received assurance on the mitigation of all Very High graded risks across NHSL, noting the change of number of risks emerging and reviewed;
- 4. Considered all Very High graded risks in the context of the Healthcare Strategy, Commissioning Plans and decision-making; and
- 5. Noted the detailed Corporate Risk Register, accurate as at 21st November 2018, set out in Appendix 1.

# MONKLANDS REPLACEMENT/REFURBISHMENT PROJECT **CONSULTATION PLAN**

Mr C Campbell provided a verbal update. It was noted that the terms of Mrs N Mahal reference and membership of the Independent Review Group was awaited and Board members were asked by the Chair to follow up timescales for the review with the Director General.

# THE BOARD:

1. Noted the verbal update from the Chief Executive.

# 2018/11/183

#### ON **IMPLEMENTATION OF UPDATE ACHIEVING EXCELLENCE**

The NHS Board received and discussed an update in relation to service improvements detailed in a pipeline paper as Appendix 1 to the main report, which set the service improvements made to date and a note of future service changes.

Board Members asked for key decision making points for the Board and milestones to be included in future reports.

# THE BOARD:

- 1. Noted the updated pipeline table.
- 2. Agreed to receive a detailed Achieving Excellence Workplan at the Mr C Lauder NHS Board meeting on 30th January 2019.

# 2018/11/184

# MEDICAL EDUCATION UPDATE

The NHS Board discussed and noted a paper from Dr Ian Hunter, Director of Medical Education, which set out a detailed update on training and medical education. Dr Burns introduced the paper in Dr Hunter's absence.

Dr Burns highlighted that the GMC had de-escalated Surgery, and Trauma & Orthopaedics (T & O) at University Hospital Hairmyres, and Surgery at University Hospital Monklands, which was a testament to the hard work of all staff involved and the continued and sustained improvement in postgraduate Medical Education across NHS Lanarkshire.

The single remaining GMC enhanced monitoring site; T & O at University Hospital Wishaw was re-visited by the National Education Scotland (NES) / GMC team in July. The report and a subsequent detailed action plan had recently been completed. The department showed continued improvement and the GMC was considering de-escalation for some trainee groups.

Dr Burns highlighted that the Department of Medical Education was hosting an event in December 2018 – "Recognising Excellence and promoting Quality in Medical Education". Awards will be presented to departments from all 3 University Hospital sites who have achieved excellence in postgraduate and undergraduate Medical Education. This will be preceded by continuing professional development sessions from invited speakers.

NHS Lanarkshire has received further notable recognition at postgraduate level. The department and multidisciplinary team from Obstetrics and Gynaecology at University Hospital Wishaw was recognised for the 2nd year in succession as in the top 10 departments in the UK for training quality, as voted by trainees through the RCOG. The training is jointly led by Dr Evelyn Ferguson and Dr Sikhar Sircar, supported by the department's formal trainers, supervising clinicians and nursing and midwifery colleagues

It was noted that the overall trend continued to be encouraging with the ongoing work at hospital level by Chiefs of Medicine, Training Quality Leads (DDMEs) and their teams across the organisation continuing to deliver improvement in the quality of medical education in NHS Lanarkshire. This was reflected in the de-escalation of enhanced monitoring in all but one of our services by the GMC with positive progress towards this in the remaining area.

The Chair sought and received confirmation that Medical Education reports were being considered in more detail at the Staff Governance Committee.

# THE BOARD:

1. Noted the significant progress evidenced in the report, and recognised the continued work required to maintain and improve the quality of medical education.

# 2018/11/185 <u>CORPORATE OBJECTIVES - MID YEAR REVIEW</u>

The NHS Board received and noted a mid-year review of Corporate Objectives. Mr White reminded Members that at its March 2018 meeting, the Board approved the 2018/19 Corporate Objectives and requested progress reports on delivery at Mid-Year and Year End. The mid-year report for the period to 30 September 2018 was completed by named leads during October / November 2018.

There were 68 Corporate Objectives, with 79 separate actions reported against at the mid-year point, with 58 actions (73.4%) either achieved or on

track to be achieved at mid-year, 13 (16.5%) delayed or behind trajectory but expected to recover, and 8 (10.1%) significantly delayed or off trajectory.

The Full Year Progress Report for 2018/19 Corporate Objectives will be submitted in June 2019.

# THE BOARD:

1. Noted the Mid-Year Review of Corporate Objectives for 2018/19.

## 2018/11/186

# QUARTERLY ANNUAL OPERATING PLAN REPORT (INCORPORATING LDP) - QUARTER 2 (JULY - SEPTEMBER 2018)

The NHS Board received and discussed the Quarterly Performance Report for Quarter 2, 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.

Mr Lauder reminded Members that during January 2018 Scottish Government (SG) advised that Local Delivery Plans would be replaced with Annual Operational Plans from 2018/19. A draft Annual Operational Plan was duly submitted to SG on 28th February 2018, with feedback and sign-off awaited. The implications of the replacement of LDPs with AOPs is part of the consideration of the Review of the Performance Report agreed at the September 2018 Performance, Planning & Resources Committee (PP&RC) meeting.

The September 2018 meeting of PP&RC received a paper proposing a review of the Performance dashboard and its reports, and it was noted that this was underway. Recommendations will be formulated in time for a launch of a refreshed system from April 2019.

# THE BOARD:

- 1. Noted the availability of, and access to, the electronic dashboard;
- 2. Noted the assurances provided by Executive Directors in the Exceptions Report;
- 3. Noted the assurances provided by Executive Directors in the narrative reports;
- 4. Noted the forward programme of reports for 2018/19; and
- 5. Noted the Review of ICPF and its reports.

# 2018/11/187

# NORTH IJB INTEGRATION SCHEME- REVIEW - UPDATE

The NHS Board received and noted a report from Mr McGuffie which provided an update to the NHS Board on the Terms of Reference for the

review of the North IJB Integration Scheme, which was agreed at the September 2018 NHS Board meeting.

It was noted that following completion of the review, recommendations will be made to North Lanarkshire Council and the NHS Lanarkshire Board in May 2019.

# **THE BOARD:**

- 1. Noted the terms of reference of the integration review;
- 2. Requested updates on progress; and
- 3. Requested sight of the final report in May 2019.

# 2018/11/188 **HEALTH INEQUALITIES UPDATE**

The NHS Board received and noted a report from Mr Docherty which provided an update on progress in responding to the request from Paul Gray, Director General, Health & Social Care and Chief Executive NHS Scotland asking Boards to consider the NHS Health Scotland statement on 'Maximising the role of NHS Scotland in Reducing Health Inequality' with a view to agreeing how best to implement practical actions identified in the statement which was discussed by NHS Lanarkshire Board on 30 August 2017.

It was noted that several of the issues had been discussed at the Population Health, Primary Care & Community Services Governance Committee.

Board Members agreed to consider Health Inequalities as part of its schedule for development seminars in 2019.

# THE BOARD:

- 1. Noted the update and that these issues were being taken forward by the Population Health, Primary Care & Community Services Governance Committee.
- 2. Agreed that this topic would be discussed at a Seminar in 2019.

Mr P Cannon

# 2018/11/189 **CORPORATE COMMUNICATIONS REPORT**

The NHS Board received and noted a report from Mr 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 August - October 2018. The report also set out progress on a number of planned campaigns including Winter/Meet the Experts, Seasonal Flu, Weaning and Breastfeeding.

# THE BOARD:

1. Noted the content of the report.

# 2018/11/190 <u>HEALTHCARE QUALITY ASSURANCE & IMPROVEMENT</u> COMMITTEE ON 13<sup>th</sup> SEPTEMBER 2018

The NHS Board received and noted the draft minute of the meeting of the Healthcare Quality Assurance and Improvement Committee held on 13<sup>th</sup> September 2018.

# 2018/11/191 **AUDIT COMMITTEE ON 4th SEPTEMBER 2018**

The NHS Board received and noted the minute of the meeting of the Audit Committee held on 4<sup>th</sup> September 2018.

# 2018/11/192 STAFF GOVERNANCE COMMITTEE ON 27th AUGUST 2018

The NHS Board received and noted the minute of the meeting of the Staff Governance Committee held on 27th August 2018.

# 2018/11/193 NORTH LANARKSHIRE INTEGRATION JOINT BOARD ON 4<sup>th</sup> SEPTEMBER 2018

The NHS Board received and noted the draft minute of the meeting of the South Lanarkshire Integration Joint Board on 4<sup>th</sup> September 2018.

# 2018/11/194 SOUTH LANARKSHIRE INTEGRATION JOINT BOARD ON 11<sup>th</sup> SEPTEMBER 2018

The NHS Board received and noted the draft minute of the meeting of the South Lanarkshire Integration Joint Board on 11 September 2018.

# 2018/11/195 AREA CLINICAL FORUM ON 20th SEPTEMBER 2018

The NHS Board received and noted the minute of the meeting of the Area Clinical Forum held on 20<sup>th</sup> September 2018.

# 2018/11/196 WORKPLAN 2018/2019

The NHS Board received and noted an updated Workplan for 2018/2019.

# 2018/11/197 **CALENDAR OF DATES 2018 & 2019**

The NHS Board received and noted an updated Calendar of Dates for meetings in 2019.

# 2018/11/198 ANY OTHER COMPETENT BUSINESS

There were no items of business raised.

# 2018/11/199 **RISK**

It was not considered that the business discussed identified any new, emerging risks which needed to be added to the Corporate Risk Register, or which materially altered the assessed level of risk/risk tolerance and/or the mitigating controls.

However, it was agreed to provide the Board with an update on BREXIT implication once more information was available.

Mr C Campbell

2018/11/200

**DATE OF NEXT MEETING**Wednesday 30<sup>th</sup> January 2019 at 09.30am.

