

## **BOARD EXECUTIVE TEAM REPORT**

### **Aim**

The aim of this report is to update Board Non Executive Directors on areas of activity within the Board Executive Team Director's portfolios. The template for this report has been revised following feedback from Non Executive Members, and Directors have been invited to focus on key strategic / operational issues to bring to the attention of Non Executive Directors, not otherwise covered in the Board papers. Feedback on the new revised template is welcome to develop this going forward.

### **1. Chief Executive**

#### **Monklands Replacement Refurbishment Project (MRRP) Independent Review Team**

NHS Lanarkshire met with the Co-Chairs of the Independent Review Team on Thursday, 10<sup>th</sup> January 2019 with further information requested in the form of a detailed chronology of events with supporting reference documents.

The Terms of Reference and membership of the Independent Review Team were set out in the Cabinet Secretary's letter of 10 January 2019. The Independent Review Team are established to provide an independent assessment of the process followed by NHS Lanarkshire and will submit a final report back to Ministers by the end of February 2019.

A separate paper on this specific issue will be presented to the Board.

#### **Huntercombe Hospital Edinburgh – CAMHS Service**

On 9<sup>th</sup> January 2019, we received notification that Huntercombe Hospital Edinburgh will close on the 8<sup>th</sup> February 2019. NHS Lanarkshire will ensure continuity of care for any affected patients.

#### **BREXIT**

Lanarkshire NHS Board actions to respond to the United Kingdom's decision to leave the European Union, commonly known as Brexit are covered in the Board Agenda on 30<sup>th</sup> January 2019.

#### **Winter Planning 2018/19**

The winter plan was submitted to Scottish Government in the required timescale and they subsequently discussed same with the Chair and I at the Annual Review – noting the range of measures which have been introduced to mitigate against the impact of winter.

Over the winter period, we have successfully opened the additional planned surge beds, maximised capacity around early assessment and supporting discharge.

Other areas which have assisted include significant joint working across acute and H&SCPs to maximise flow. Specific examples include:

- GP opening on 26/12, 2/1, 5/1 and 12/1
- Increased numbers of AHPs and community nurses working in the acute hospitals to assist in turning round patients at the front door and accelerating discharge where possible.

- Increased numbers of clinical decision makers and social work staff available at weekends to support weekend referrals and discharges.
- Senior Management ownership of daily conference calls – including at weekends to ensure flow maintained
- Point of Care testing for influenza
- Additional hours across community nursing, paediatrics, physiotherapy, occupational therapy, dietetics, social work and home support teams
- 6 beds commissioned in external care home to support off site CCA assessment
- Additional capacity built into the Equipment Store from January until March to improve response times through peak demand

As well as supporting performance, this has also allowed us to exceed the specific winter target introduced this year of increasing weekend discharges by 20%.

4 hour performance across the period has either exceeded or kept pace with the Scottish average.

## **2. Executive Director of Nursing, Midwifery, & AHPs**

The Annual Senior NMAHP business meeting was held in 21st December 2018 to allow a look back on the past year and acknowledge the many NMAHP achievements. It also offers an opportunity to horizon scan and identify political and professional issues of relevance and the likely implications for service delivery in the short, medium and long term. This event affords the NMAHP Senior Leaders the space to reflect on what has worked well and what has worked less well and engage in dialogue on how best to professionally lead the NMAHP workforce going forward.

The agenda for the day is developed to facilitate dialogue, development and direction setting and as such is valuable to all concerned in relation to their individual personal and professional development as well as being a crucial part of the NMAHP Annual Business Planning cycle. On this occasion the Senior NMAHPs were joined for the first time by a small number of Service/Business/Locality Managers who had taken up the offer to participate in the event. The day was enhanced by Jenny Copeland, Principle Lead for CNO/SEND, Leadership and Talent Development at NHS Education for Scotland co-hosting the event and contributing her skills and expertise in leadership development enhancing the outcomes from the day.

During the course of the event attendees were encourage to consider how best we build on our successes utilising the work being undertake on Psychological Safety and in particular the early findings from a thematic analysis. The thematic analysis having pulled words from each of the four areas covered in the questionnaire which are; Quality, Teamwork, Leadership and Learning Environment. The area of most concern and therefore in need of consideration when revising the Strategy Map and Strategic Enhancement Plan (STEP) relates to the articulation of there being a ‘Mismatch between strategy and reality’. The outputs of the day are articulated in the first DRAFT of the revised Strategy Map and Strategic Enhancement Plan for 2019/20.

The Annual Business Meeting concluded with attendees being thanked and reminded that their commitment and hard work helped to make NHS Lanarkshire such a great place to work.

### Next Steps

- Draft Strategy Map and STEP Diagram considered at the NMAHP Senior Leaders meeting on 8 February 2019
- Comments to be sought from stakeholders and submitted to I Barkby by 8 March 2019

- Final Draft Strategy Map and STEP Diagram signed off at NMAHP Senior Leaders meeting on 3 April 2019
- Strategy Map and STEP Diagram to be cascaded across NHS Lanarkshire April 2019
- Strategic Direction to be shared at the NMAHP Professional Symposium May 2019

### 3. **Medical Director**

- I continue to attend meetings of Scottish Association of Medical Directors (SAMD) and represent that body on a number of committees with ongoing work since the November Board update including:
  - Junior Doctor's 48 hour working week Expert Working Group.
  - Doctors and Dentists in Training Lead Employer Steering Group.
- In addition, on behalf of SAMD, I participated in the Quality of Care Organisation Review to NHS Ayrshire & Arran from 3 - 6 December 2018 which was an invaluable insight into the Quality of Care Approach to Board Reviews and will help NHS Lanarkshire in developing our own self-assessment. A further feedback session of the visit to NHS Ayrshire & Arran will take place on 25 January 2019 prior to publication of the review findings.
- I have agreed to chair the National Advanced Heart Failure Service Review Group and the first meeting is due to take place on 28 January 2019.
- I attended the West of Scotland Health & Social Care Delivery Plan Engagement Event on 20 December 2018 which took place at the Golden Jubilee National Hospital.
- I attended the West Regional Medical Workforce Group on 17 December 2018.
- I joined the Chief Executive in meeting with colleagues from NHS Education Scotland to explore opportunities for expansion and improvements in recruitment to training in General Practice in Lanarkshire.
- Within the Board, I chaired the meetings of the Realistic Healthcare Group, the Hospital Electronic Prescribing & Medicines Administration (HEPMA) Board and the Research & Development Committee and I met with the team of Clinical Trials Nurses to understand their integral role in supporting the Research & Development strategy. I also chaired the Quality Planning & Professional Governance Committee which approved a new Policy on the Introduction of Interventional Procedures within NHS Lanarkshire.

### 4. **Director of Planning, Performance and Property**

1. Following the collapse of our clinical waste contractor, HES, significant work has been undertaken across Lanarkshire to implement interim arrangements for the collection and proper disposal of clinical waste. Business continuity has been maintained in difficult circumstances.
2. MRR Project Board met in January to consider the impact on programme associate with the ongoing Independent Review process.

3. I participated in a meeting with Sir Harry Burns in December to consider the contribution to the MRR Project which may be made by Strathclyde University. Parallel discussion are ongoing with Glasgow Caledonian, West of Scotland and Glasgow Universities.
4. I participated in a Patient Safety Leadership Inspection at Kilsyth Victoria Hospital.
5. I attended the West of Scotland Health and Social Care Delivery Plan Programme Board Engagement event on 20<sup>th</sup> December,
6. I am providing Planning support to the national stroke Thrombectomy Advisory Group, which held a stakeholder event in December and which will report its initial recommendations to the National Planning Board in January.
7. The completion of the 6 year, £20m Monklands Theatre & ICU Programme was marked by a teaparty attended by NHSL staff and contractors who were responsible for this work. The post-project evaluation will be completed in spring 2019.
8. I represented NHS Lanarkshire at the December meetings of the National Specialist Services Committee and Directors of Planning Group

## 5. **Director of Information and Digital Technology**

1. I attended the following national meetings; eHealth Leads Group, national eHealth Finance Group and Digital Transition Board.
2. I met with Falk Bleyl from boston networks who are building an "Internet of Things" (IOT) network for Scottish Government. This may be a network that we can utilise so support the delivery of our Technology Enabled Care (TEC) programme across the wider community including patient homes.
3. I attended the GP IT Re-Provisioning Board. The procurement phase of the project has concluded with three vendors in place to deliver new GP IT Services. The vendors will take approx. 12 months to develop their products to meet the Scottish requirements before boards can select their system(s) and start implementation.
4. I met with Scottish Government to discuss the implementation of the Network Information Systems (NIS) Directive. Feedback on progress within NHS Lanarkshire was positive and SG in their role as "competent authority" are aiming to undertake a high level audit in 2019/20.
5. Following approval of the Community IT Business Case, the procurement of the Cambric Morse System has been completed. The project board is in the process of being established and early project activities have started.
6. I attended a demonstration of a system called patientrack which is used to support the management of early warning scores and the deteriorating patient.
7. I have been leading on the development of a national business case to extend the Patient Management System (PMS) Framework within NHS Scotland. This work is nearing completion with the business case being presented to various stakeholder groups.

## 6. **Director of Human Resources**

*Health & Safety Executive (HSE)* - I attended a number of meetings from the 26<sup>th</sup>

November to the 29<sup>th</sup> November in support of the HSE intervention inspection visit to University Hospital Monklands. The HSE indicated within their work plan and focus areas a plan to undertake 20 Healthcare Intervention visits in 2018-19 throughout the UK focussing upon the inspection of Violence and Aggression and Musculoskeletal Disorders in Healthcare. NHS Lanarkshire were selected as part of this inspection Plan.

***NHS Scotland and Prince's Trust Scotland Employability Partnership: "Get Into Healthcare"*** – I chaired a number of meetings during November and December 2018 with Prince's Trust Scotland and colleagues from North Lanarkshire Health & Social Care Partnership. This will lead to the delivery of a pre-employment programme designed to support Youth employment.

**West of Scotland Health and Social Care Delivery Plan** – I attended an engagement event on the 20<sup>th</sup> December 2018 which provided an opportunity to hear from a number of speakers on progress with regional planning and services.

**Strategic HR Forum – Scottish Government Health Workforce Directorate** – I attended a meeting on 11<sup>th</sup> January 2019 of the Strategic Forum and a number of topics were discussed including Workforce Planning, Single System Collaboration, Brexit (preparedness) and Staff Governance.

## 7. Director of Finance

Financial planning and year end management remain peak activities. External audit have been on site for their planning work and commence their interim audit on 28th January. Lanarkshire is in the Implementation phase of the new instance of the public sector procurement system.

## 8. Director of Public Health

***Public Health Reform*** - The reform agenda is picking up pace with the initiation of the process of recruitment for a Chair of the new body, Public Health Scotland. Both the Chief Executive (representing Board Chief Executives) and the Director of Public Health (representing Scottish Directors of Public Health) attended an expert advisory group tasked with exploring the future of the Specialist Public Health workforce (DPH, Consultant/Specialists in Public Health). The event explored a range of options including an enhanced 'status quo' through to employment with the new national agency and deployment locally. A future meeting is planned for February and an update will be provided to the Board.

***National Review of Screening*** - A national review of population screening programmes in Scotland has been completed and was approved by the Scottish Screening Committee in November. The report is now with the Cabinet Secretary and a response is awaited.

## 9. Director of Communications

**Website redevelopment** – In December 2018 the previous beta site [www.nhslanarkshire.scot.nhs.uk](http://www.nhslanarkshire.scot.nhs.uk) became NHS Lanarkshire's primary website. The majority of information is now on the new site, with the corresponding pages re-directed from the old website. Over the next two months the transfer of information will be complete, user-testing will be conducted through February and March and plans will be put in place to promote the new website in order to drive visitors to it. A short presentation on the new website will be made to the Planning, Performance and Resources Committee on 27 February 2018.

**GMS/Primary Care Improvement Plan (PCIP)** – A communications strategy has been developed to support the NHS Lanarkshire Primary Care Improvement Plan. The strategy focuses on communication with GPs and relevant NHS Lanarkshire staff to support the introduction of new ways of working. It will also support recruitment to key posts. A new communication and engagement officer has been recruited and is in post from January 2019. A priority area of work for the officer is to devise an implementation plan to deliver key tenets of the strategy in the short, medium and longer term.

**NHS Lanarkshire Communications Strategy** - A new communications strategy is being developed for NHS Lanarkshire. This will set out plans to further develop the organisation's approach to media, campaigns, internal communications and digital, which includes social media and the web. A draft strategy will be taken to the March Board meeting for consideration.

**Tender for Blairgrove Surgery, Coatbridge** - A communications plan has been developed to support the tendering of the Blairgrove Surgery contract. A public meeting is being held on 29 January 2018 to explain the tendering process to patients and select patient representatives to take part in the section panel.

#### 10. Director of Acute Services

### UNIVERSITY HOSPITAL WISHAW

#### Emergency & Medical Directorate

- The Winter plan initiatives were put in place and we secured an increase in locum medical and MINTS nursing team cover for medical patients out with speciality to support continued patient safety and this will continue over the next couple of months.
- Consultant Interviews were undertaken and we have secured 2 Substantive Consultants for the Emergency Department. One presently is working on a fixed term contract and a further Consultant will commence at the end of January 19.
- A new Nursing cohort of staff have been placed within the Directorate and have now taken up their posts and reduced nursing vacancies within the Directorate.
- Focussed work has been undertaken with Professor Taylor in respect of Hospital Anticipatory Care Plans with both Medical and Nursing Staff. This work continues within Medicine and across the site as a whole.
- A patient and family experience Questionnaire being carried out in CCU/MHDU to gain feedback on:
  - Patient attitude to treatment options
  - Staff attitude
  - Communication and Care/ Treatment
  - This questionnaire timeframe will cease at End Jan 2019
- A “Hot Debriefing” post Cardiac Arrest is being tested in the Emergency Department. This is being led by Consultant Physicians.
- A Scottish Government Unscheduled Care visit by colleagues from a range of Health Boards took place on 15<sup>th</sup> November 2018. This was an extremely beneficial visit with excellent feedback to the site team. Focus on feedback was
  - Team work and multi- disciplinary collaboration
  - Safety initiatives that were evident in the clinical areas that were visited
  - A range of positive improvement suggestions and willingness from staff.

### **Surgical & Critical Care**

- The Surgical ambulatory care unit opened at the beginning of December which has resulted in above 50% of the patients that attended being discharged on the same day.

### **Older People's Services**

- Work has commenced on reviewing Frailty pathways and processes at Wishaw. A further Frailty steering group meeting is arranged for the 18<sup>th</sup> January to review processes for data gathering for the screening for frailty of patients at the front door. It should be noted that the performance in relation to the assessment and treatment of Frailty is improving month on month at the site.
- Ward 12 continue to develop their Value Management work and as they have had success with embedding NEWS monitoring and compliance with in the ward – over 8 weeks at 100% they have now moved to focus on falls.
- Ward 10 have been working with service improvement on the time of day for discharge which has resulted in them ensuring at least one of their discharges goes before 10am each day and as many as possible pre noon.

### **Maternity & Neonatal**

- Maureen McSherry Consultant midwife was nominated for the Midwife of the Year.
- Dr Jessica Golden, Psychologist is now in place two days a week within the Neonatal Unit to help support parents while their baby is in the unit.
- A Bereavement Suite is being created within Maternity to allow bereaved parents and families' time to spend with their baby.
- Medical Staff have received an RCOG Award for Teaching.

### **UNIVERSITY HOSPITAL HAIRMYRES**

- Hairmyres said farewell and congratulations to Dr John Keaney who is now the Medical Director for Acute Division. We have appointed a new Chief of Medical Services Mr James Saldanha. We have also appointed a Deputy Chief of Medical Services Dr Claire MacDougall and we are delighted to welcome both into the roles.
- Excellent formal feedback was received from the Scottish Government Unscheduled Care following the visit in October 2018. The strong leadership, teamwork and collaboration between the acute hospital team and the Health and Social Care Partnership was commended. The acute Medical, Surgical, and nursing services were given excellent feedback. It was highlighted that improvements continued to be made despite greatly increased activity due to the Victoria Infirmary in 2015.
- The UHH theatre team have been working with the Scottish Government and IHO and have commenced modelling work to better plan our emergency theatres. This information has highlighted ways to improve our emergency theatre access and allows us to estimate the impact changes will have on other factors like theatre utilisation.
- Karen Phillips, Senior Nurse, was welcomed to the site. Karen has transferred from UHM to fill our vacant Surgical SN post and we are delighted to have her.
- October saw a hugely successful Quality Week with the main focus being on safe management on medicines. It also included a session on 'The Great Taboo' which was very well attended.
- The Mobile Skills Unit was on site in November. Sessions were well attended, with over a hundred staff attending sessions on airway management.

## UNIVERSITY HOSPITAL MONKLANDS

### Staff Changes

- Jane Pedlar has been appointed to ward 14 as SCN.
- Geraldine Ruddy has returned to her SCN and did a fantastic job in ward 14 providing a crucial leadership role.
- Carol Andrews came back from secondment to Practice Development and has returned to ward 10.

### Arrivals

- Gavin Dolan has been appointed Senior Nurse for Emergency Services and Yvonne Fielder who has been appointed Service Manager, Care of the Elderly.
- Dr Marion Devers has also recently been appointed as Deputy Chief of Medicine.
- Dr Alan Clarke, consultant gastroenterologist, who started in post at the beginning of December.
- Sarah Rafferty, Chemotherapy Nurse has joined ward 16 Oncology Day Unit Team. Sarah previously worked at the Regional Cancer Centre in Glasgow and will be a welcomed addition to cancer services.

### Service Improvement

- Feedback from Unscheduled Care Visit in November 2018  
Overall experience. The visit was thoroughly enjoyable and very informative. The senior team on site were well prepared and made visitors feel very welcome. It provided an excellent opportunity to share improvement experience and understand alternative models to manage patient flow and respond to changing demand. Great examples of team working and enthusiasm to develop services and make a difference to the patient experience. Visitors were impressed by the obvious 'team ethos' and the leadership support was tangible from our various exchanges with the wider team on the day.  
*"Very engaged and knowledgeable team, happy to share their work and QI journey."*
- Head & Neck service have focused on improving their Quality Performance Indicators. The initial focus was QPI 7 - Specialist Speech and Language Therapist Access as only 43.3% of patients with oral, pharyngeal or laryngeal cancer were seen by a Specialist SLT before treatment. Following review and redesign working jointly with the CNS this has improved for 2017/18 to 86.9% compliant which is a great
- The Respiratory Nursing Team are further developing their services to ED by extending their provision of service to cover COPD patients as well as asthmatics. The respiratory nurses currently offer a follow up service to a nurse led clinic for asthmatics who attend ED with an exacerbation. This has now been extended to known COPD patients who attend ED with an exacerbation and they will also be reviewed by Respiratory Nurses Specialists at a Nurse led COPD clinic.
- Dermatology Nursing continues to expand their services carrying out a vast range of specialist nursing roles to include Patch Testing, 2<sup>nd</sup> line treatments, lesion clinics extending to facial surgery.
- As part of the divisional winter plan, ward 8 opened at the beginning of January as well as other initiatives to support patient safety and quality of care throughout the winter. This includes additional medical consultant input on weekday evenings and the extension of ambulatory care and REACT processes.

### Environment

- Works have commenced in relation to toilets and showers on the UHM which involves wards moving into ward 11 as decant ward.



## 11. **Interim Chief Officer, North Lanarkshire Health and Social Care Partnership**

Work has been progressing around the development of a test of change around guardianship cases within the acute sector, building on models already developing in Glasgow and Ayrshire where patients are supported into a more homely setting via NHS-purchased care home beds during the guardianship process. Discussions are underway with the Mental Welfare Commission to gain agreement to start the test of change by the end of the month.

I have been participating in the national and regional developments around healthcare and forensic medical services for people who have experienced rape, sexual assault or child sexual abuse. Following a national options appraisal, the national taskforce, chaired by the Chief Medical Officer, set out a regional model which has since been taken forward within the West region. Archway in Glasgow will provide the regional centre of excellence, providing outreach Nursing and Forensic Medical Examiners to a new forensic suite to be opened on the Wishaw site. Capital funds have been identified from the Scottish Government and the new facility and model are planned to commence in Q2 of 2019/20.

In December, I presented information to the Corporate Management Team around Four Seasons Healthcare being in financial difficulties, impacting on one Care Home in the area and the potential to impact on NHS contracted beds in a subsidiary company. We remain in dialogue with COSLA, the Care Inspectorate and Scottish Government and through the Social Work Quality Assurance section, have put in place additional monitoring in the interim.

I attended the Annual Health and Social Care national conference in Glasgow in December, along with the Chief Officer's Group and a joint session with Chief Officers and Chief Social Work Officers in January.

In December, I completed the round of quarterly Locality and service performance reviews for quarter 2.

The project plan for the review of integration in North Lanarkshire was approved by the Project Board on 9<sup>th</sup> January, with work now underway on the review. It is anticipated the review will report to the NHS Board on 29<sup>th</sup> May 2019.

The North IJB met on 22<sup>nd</sup> January, covering the Q2 performance report, launch of the Care Academy approach, UNICEF breastfeeding accreditation and the Rapid Rehousing Transition Plan (a joint bid with housing to the Scottish Government around homelessness and rough sleeping).

## 12. **Director, South Lanarkshire Health and Social Care Partnership**

### **New GMS Contract – incorporating Primary Care Strategy and Transformation/Sustainability Plans**

A full report on the current work associated with Primary Care Transformation, GMS Sustainability and new Contract implementation into a single framework was provided to the Population Health and Primary Care Committee at its last meeting.

Work is continuing in the appointment of a range of support staff to assist GPs manage their workload as well as investing in new systems of work which seek to reduce the need for patients to see a GP directly. These include additional pharmacists, Advanced Nurse Practitioners, and physiotherapists.

In addition to the foregoing, there has also continued to be significant work in ensuring GMS sustainability. This has seen additional supports being provided to a number of practices in difficulty such that their sustainability can be assisted as far as possible.

Work is in hand to advertise and subsequently award the contract for Blairgrove Practice in Coatbridge. This should also assist in supporting improved sustainability in the area.

### **Strategic Commissioning Plan (SCP) 2019 – 22**

As highlighted in my previous reports, we are now in the process of creating a new SCP for 2019 – 22. Two rounds of consultation events have taken place and the draft SCP prepared on the basis of the results of those.

This will be shared with respective groups/committees throughout February and March.

### **H&SCP Conference**

A highly-successful inaugural Health and Social Care Scotland (HSCS) conference was held at Glasgow's Grand Central Hotel on 7 December 2018 - and showcased some of the exemplary work led by South Lanarkshire H&SCP. Both the First Minister and the Cabinet Secretary spoke at the conference, highlighting how they envisaged the 'integration agenda' moving forward over the coming years.

South Lanarkshire HSCP was shortlisted to host a spotlight session on an area of best practice and innovation. Our contribution – focusing on Telehealth/Telecare and the strategic communication effort supporting it – has since been followed up with requests from a number of other partnership areas to come and see the work. There has also been continued national interest in our Integrated Community Support Team following SLHSCP representations at the conference.

On the day, a vibrant and comprehensive new website was also launched for HSCS. The website hosts a wealth of information and resources including detail and key information about Scotland's 31 Health and Social Care Partnerships. The HSCS's first newsletter – also hosted on the new web platform – signposts to our team's spotlight presentation.

### **Audit Scotland Report – Health and Social Care Integration**

In November, 2018, Audit Scotland published its second of three national performance audits of health and social care integration, since the introduction of the Public Bodies (Joint Working) (Scotland) Act 2014.

Over the coming few months, it is the intention of the IJB, via a number of workshops, to review its position against the findings and recommendations of the Audit Scotland report with a view to enacting any relevant actions.

### **Other Points of Note**

Undernoted are a few of the other key meetings attended/visits undertaken in the last reporting period.

21/11/2018	NHS Celebration Event
22/11/2018	Patient Safety Leadership Walk round at Ladyholme
28/11/2018	SW Committee

03/12/2018	Ext SMT
04/12/2018	IJB Dev Session
05/12/2018	Locality Consultation & Participation Event – Hamilton
06/12/2018	Locality Consultation & Participation Event - EK
07/12/2018	Chief Officers Health and Social Care Conference
10/12/2018	Locality Consultation & Participation Event – Cam/glen
12/12/2018	Locality Consultation & Participation Event – Lanark
12/12/2018	McWhirters Visit
17/02/2019	Chief Officers Session re Audit Scotland Report

The Board is asked to **note** the report.

<b>Policy/Strategy Implications</b>	Policy/strategy implications will be addressed in the management of any actions resulting from these events, activities and issues.
<b>Consultation</b>	Board Executive Team
<b>Consultation with Professional Committees</b>	None
<b>Risk Assessment</b>	Risk assessment will be addressed in the management of any actions resulting from these events, activities and issues.
<b>Compliance with Board Policy requirements on Equality and Diversity</b>	Compliant
<b>Resource/Staffing Implications</b>	Resource/staffing implications will be addressed in the management of any actions resulting from these events, activities and issues.

#### Approved by

Name	Designation
Calum Campbell	Chief Executive

#### Author(s)

Name	Designation	Name	Designation
Calum Campbell	Chief Executive	Calvin Brown	Director of Communications
Irene Barkby	Executive Director for NMAHPs	Heather Knox	Director of Acute Services
Jane Burns	Medical Director	Ross McGuffie	Interim Chief Officer, North Lanarkshire Health & Social Care Partnership
Colin Lauder	Director of Planning, Performance and Property	Val de Souza	Director, South Lanarkshire Health & Social Care Partnership
Donald Wilson	Director of Information and Digital Technology		
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