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**Minute of Meeting of the Lanarkshire NHS Board
 held on Wednesday 28th March 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
 Mr C Campbell, Chief Executive
 Mr M Fuller, Non Executive Director
 Mrs M Lees, Chair, Area Clinical Forum
 Councillor J McGuigan, Non Executive Director
 Mrs L Macer, Employee Director
 Miss M Morris, Non Executive Director
 Mr T Steele, Non Executive Director
 Dr I Wallace, Medical Director

IN
ATTENDANCE: Mr C Brown, Head of Communications
 Mr P Cannon, Board Secretary
 Mr G Docherty, Interim Director of Public Health
 Ms J Hewitt, Chief Accountable Officer, North Lanarkshire Health
 and Social Care Partnership
 Ms R Hibbert, Interim Deputy Director of Human Resources
 Ms H Knox, Director of Acute Services
 Mrs C McGhee, Corporate Risk Manager (minute 16)
 Mr C Sloey, Director of Strategic Planning and Performance
 Dr L A Smith, Director of Quality (minute 8)
 Mrs V de Souza, Chief Accountable Officer, South Lanarkshire
 Health and Social Care Partnership

APOLOGIES: Mr P Campbell, Non Executive Director
 Councillor P Kelly, Non Executive Director
 Dr A Osborne, Non Executive Director

2018/03/31

WELCOME

Mrs. Mahal welcomed colleagues to the meeting.

2018/03/32

DECLARATION OF INTERESTS

There were no declarations.

2018/03/33

MINUTES

The minute of the meeting of the NHS Board held on 31st January 2018

was submitted for approval. On page 2 Dr Wallace asked that the text be amended to ensure that the professorial appointments were noted as honorary positions.

THE BOARD:

1. Approved the minute.

2018/03/34

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.

2018/03/35

CHAIR'S REPORT

Mrs. Mahal provided a verbal report.

- a) Planning, Performance and Resources Committee Meeting - February 2018

Mrs. Mahal reminded Board Members that the February PPRC meeting had to be cancelled, because of the Met Office Red Weather Warning, and therefore the opportunity was missed to thank Mr. Kenny Small, Director of Human Resources, for his considerable contribution to the work of NHS Lanarkshire during his long and distinguished career within the Board, until his retirement at the end of February 2018, and it was noted that an opportunity would be available to thank Mr. Small for his contribution to the Board in June 2018.

- b) Director Level changes

Mrs. Mahal reported that the recruitment process was underway for the Director of Human Resources and that adverts would be placed in the next two weeks. It was also noted that Mr. Colin Sloey will be retiring as Director of Strategic Planning and Performance at the end of June 2018, and that arrangements were in hand to take forward these responsibilities. Mr. (Calum) Campbell also indicated that the position of Deputy Chief Executive was being dealt with separately through the Corporate Management Team.

- c) Visit by the Chief Medical Officer to Wishaw General Hospital

Mrs. Mahal reported that Dr. Calderwood, Chief Medical Officer had visited the Obstetrics and Gynaecology Service at Wishaw General Hospital to reflect, in part, the growing number of accolades being awarded to the Department, in particular for their junior doctor training environment.

- d) Minister for Mental Health

Mrs. Mahal reported that she had attended a meeting with Mr. (Calum) Campbell and the Minister for Mental Health on 27th February 2018, in relation to mental health targets and waiting times. It was noted that this would be an issue to be taken forward by the Population Health, Primary Care and Community Services Governance Committee in due course. It was also noted that Scottish Government colleagues would be following up the meeting, seeking assurances on improvements to the Board's Waiting Times position.

e) NHS Chairs Meeting – Monday 26th March 2018

Mrs. Mahal updated colleagues in relation to items which had been discussed at the NHS Board Chairs meeting, including the global citizenship programme, which is a co-ordinated effort on behalf of Scottish Government to encourage staff to volunteer, and it was noted that this would be formally launched in the summer of 2018. A presentation was also provided by a new Chief Scientist setting out a new approach to research and development.

2018/03/36

BOARD EXECUTIVE TEAM REPORT

The NHS Board considered a Board Executive Team Report. Mr. Campbell indicated that this had been re-formatted and re-focussed in the light of feedback provided by Non Executive Director colleagues, and each Director had been asked to provide a short list of bullet points highlighting areas of significant activity rather than the level of detail provided in previous reports.

In particular, Mr. (Calum) Campbell highlighted the re-arranged meeting with MPs and MSPs on 4th May 2018. Dr. Wallace highlighted the forthcoming Conference on Realistic Medicine and also echoed the comments already made by Mrs. Mahal in relation to the Obstetrics and Gynaecology Service, and the Awards won by the Service in recent times.

Mr. Brown reported that the Communications Department had recently been successful in achieving finalist status in nine categories in the Scottish Communications Award Ceremony at Murrayfield Stadium, and had been selected as winners in two categories.

It was evident from the updates from Directors that there were a number of Awards and accolades provided to services in NHS Lanarkshire recently, and Mrs. Barkby suggested that in the Annual Report roundup the Awards be highlighted in the communication to Patients, Public and Staff in NHS Lanarkshire.

THE BOARD:

1. Noted the Board Executive Team Report.

2018/03/37

SUMMARY REPORT ON KEY ISSUES CONSIDERED BY THE HEALTHCARE QUALITY ASSURANCE AND IMPROVEMENT ON 8TH MARCH 2018 & QA UPDATE

The NHS Board received the summary of key issues on 8th March 2018 which was noted. Mr. Fuller in particular highlighted the management of complaints and reports from enquiries from the Scottish Public Service Ombudsman and HSMR data as areas where the Board was performing well.

In addition, members received a Quality Assurance update along with a presentation on the Duty of Candour which was provided by Lesley Anne Smith, Director of Quality and Members were provided with detail around the legislative background, the time limits and the organisational preparedness for NHS Lanarkshire. It was noted however, that although the Legislation had been introduced on 1st April 2018 many of the organisational requirements were already in place and adjustments had been made to existing significant adverse event reporting systems within the Board to reflect the new requirements within the legislation, which will be monitored by the Healthcare Quality Assurance and Improvement Committee, and, where appropriate, the Staff Governance Committee.

THE BOARD:

1. Noted the update from the Healthcare Quality Assurance and Improvement Committee;
2. Noted the general update on Quality Assurance; and
3. Noted the measures in place to meet the requirements of the Duty of Candour legislation.

2018/03/38

NHS LANARKSHIRE HAIRT UPDATE

The NHS Board considered an update of the current position in relation to Healthcare Associated Infection (HAI) standards. It was noted that the progress report did not include National Validated Data against Local Delivery Plan (LDP) targets. Mrs. Barkby explained that this was a result of reporting timescales from Health Protection Scotland who work three months in arrears Therefore the validation of the October – December 2017 data will be provided in the week beginning 2nd April 2018, and in order to realign the reporting schedules of the NHS Board a general update was provided to NHS Board Members in the report to the March Board meeting.

Mrs. Barkby also highlighted that at a previous meeting information was sought in relation to the financial cost of the Healthcare Associated Infections within NHS Scotland, and in a bid to establish a cost specific to NHS Lanarkshire the service has been working in collaboration with colleagues from Finance to calculate the financial cost for cases of Healthcare Associated Infection, specifically SABs and CDIs. This work should be concluded and it was hoped that it would be available to share at the NHS Board meeting in May 2018.

Members welcomed this development and looked forward to receiving the information in due course.

THE BOARD:

1. Noted the HAIRT Report.

2018/03/39

DIGITAL LIVED EXPERIENCE : TRANSFORMING CARE AFTER TREATMENT

The NHS Board received and discussed a paper from Mrs Irene Barkby, Executive Director of Nursing, Midwifery and Allied Health Professionals, who was supported in the presentation of the paper by Pamela Rose, Cancer Nurse Specialist.

Board Members were shown a video which captured the testimonies of two patients who were the first people in Lanarkshire to take part in the ground-breaking Transforming Care after Treatment (TCAT) programme, funded by Macmillan Cancer Support in Scotland. Both patients had a diagnosis of lung cancer and were offered a monthly online assessment over six months to identify unmet need following completion of treatment.

It was noted that the e-health model of care was acceptable to patients, is time efficient and clinically effective. It reduces the burden of having to return to a clinic appointment and offers the flexibility of highlighting unmet needs or concerns in the comfort of their own home or while at work, on a day and time that is convenient to them. It is also paper light which makes better use of resources as care plans are transferred electronically to the clinical portal and GP practice. Information is shared in real time leading to improved co-ordination of care between different sectors. It reduced the number of calls to the CNS team allowing them to focus on clinical service developments.

It was highlighted that the model of working is transferable, not only within cancer care but could be used to support patients with long term conditions.

Mrs Morris asked if the electronic linkages had been signed off by Information Governance specialists and it was confirmed that this was the case. Mr Fuller asked if in considering rolling out and widening access if the skill mix of nursing staff involved could be looked at to allow more patients to use the facility, and it was confirmed that this was being considered.

Mrs Mahal commended the programme and encouraged the service to continue with and expand the programme if possible, and it was noted that the service was exploring potential funding streams.

THE BOARD:

1. Welcomed the presentation and commended the work of the Cancer Team in providing this innovative model of care.

2018/03/40

UPDATE ON IMPLEMENTATION OF ACHIEVING EXCELLENCE

The NHS Board received and discussed a report from Mr. Colin Sloey, Director of Strategic Planning and Performance, which set out the current position on the Plans for Service Change as described in Section 7 of Achieving Excellence.

Board Members were asked to note the service improvements made to date and note that future service change plans were the subject of more detailed consideration at the NHS Board Development Session which took place on 20th March 2018.

Achieving Excellence, Section 7 *Plans for Service Change* summarised - at that point in time - the changes the Board could expect to see in order to make services fit for the future needs of the people of Lanarkshire. Some of these changes were specific, some a work-in-progress and some aspirational.

The Strategy Delivery Team (SDT, co-chaired by the IJB Chief Officers and NHS Board Chief Executive) established a series of Short Life Working Groups in June 2017 to progress the implementation of Achieving Excellence and had conducted 5 review meetings.

Members received a series of attachments representing a “pipeline” of specific change projects evolving from initial ideas, through partially defined proposals to structured implementation programmes (with clear governance, programme, finance, workforce and other co-dependencies well understood and managed).

One year on, section 7 was re-presented in Appendix 1 to the paper in a modified form. The Appendix showed the “pipeline” of projects from initial ideas through to completed work (as at March 2018).

It was noted that much has been achieved in the last 11 months to progress the Board’s strategic ambitions, particularly in the work to reduce the admissions and lengths of stay in hospital. Looking to the short and medium term future, NHS Lanarkshire and its partners had set out an exciting and innovative agenda for service change, shown in the second and third columns of the diagrams provided.

It was also agreed that priority be given to those areas which have higher prominence/risk, with these forming the substantive part of the agenda for the NHS Board Development Day on 20th March 2018.

Members were reminded that part of the agenda for the day was a detailed briefing by the Executive Lead from the respective Short Life Working Group and other subject-matter experts, followed by a question and answer session for each. The main focus was on those areas of service change which had most significance in delivering the strategic vision set out in Achieving Excellence, and covered key areas of assurance for the NHS Board.

During discussion it was noted that health inequalities should be captured as part of future deliberations. Mrs Mahal also reported that she had been made aware of The Fairer Scotland Duty and interim guidance issued by Scottish Government in March 2018. It was agreed to circulate this to Mr Board Members separately.

Mr P Cannon

THE BOARD:

1. Noted the revision to Achieving Excellence section 7.

2018/03/41

**OUTLINE BUSINESS CASE FOR THE REPLACEMENT /
REFURBISHMENT OF MONKLANDS HOSPITAL**

The NHS Board received and discussed a report from Mr Colin Lauder, Deputy Director of Strategic Planning which set out the Option Appraisal process which will be undertaken in advance of the preparation of the Outline Business Case.

Mr Lauder reminded Members that the process was considered at the NHS Board Development Session which took place on 29th November 2017 and agreed at the MRRP Project Board on 18th December 2017. Approval to proceed to Option Appraisal was confirmed by Chief Executive, NHS Scotland on 12th March 2018.

The Initial Agreement for MRRP, approved in October 2017, set out the agreed Options for consideration at the Outline Business case stage, these were:

- Option A - Do nothing/do minimum
- Option B - Refurbish existing hospital
- Option C - Replace existing hospital – New build on existing site
- Option D - Replace existing hospital – New build on alternative site

Members were assured that the Option Appraisal process developed met the requirements of the Scottish Capital Investment Manual (SCIM) and complies with CEL 4(2010) – Informing, Engaging and Consulting People in Developing Health and Community Care Services.

It was noted that the process will be undertaken in two stages, as set out in the paper, and the workshop events will be undertaken within a one week period, planned for late May /early June 2018, with the same participants attending both events.

A report on the process and outcome will be prepared in July and shared with stakeholders as part of a formal engagement process. Following engagement a final report and recommendation will be presented to the NHS Board in October 2018.

Mr. Lauder assured Members that a detailed programme of engagement with stakeholders prior to the formal Option Appraisal process was in place. There were plans for a further period of formal engagement following the conclusion of the Option Appraisal process and continuing dialogue on the detail of this with the Scottish Health Council and other stakeholders.

Mr. Brown added that a series of briefings were planned to involve MPs, MSPs, Local Authority representatives and other key stakeholders on the process.

Mr. Lauder emphasised that Board Members were welcome to attend the Option Appraisal workshops, but strictly in an observing capacity only, and not as participants, as the output from the workshops will be reported to the Board for consideration, later in 2018.

It was also noted that part of the assurances sought by Scottish Government, prior to the decision to proceed to an Outline Business Case, was the requirement to seek to have the process endorsed by West of Scotland Chief Executives from a Regional Planning perspective. Mr. (Calum) Campbell and Mr. Sloey confirmed that this endorsement was secured.

THE BOARD:

1. Note the detailed plans for undertaking the Option Appraisal.

2018/03/42

CORPORATE RISK REGISTER

The NHS Board considered the Corporate Risk Register.

Mrs. McGhee reminded Members that the Corporate Risk Register was previously presented to the NHS Board in January 2018, since which time the Corporate Management Team had considered the corporate risk register in February 2018, and March 2018. The Corporate Management Team considered emerging and new risks; focus 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 have 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 14 March 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, in particular the Monklands Refurbishment / Replacement Project (MRRP); and referenced the forty-one (41) risks set out in the NHSL Corporate Risk Register, accurate as at 14 March 2018, sorted in order by the assessed level of risk (current), shown in Appendix 1 of the report.

THE BOARD:

1. Noted the summary of material changes to the Corporate Risk Register, including the position of no 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 14 March 2018;
3. Received assurance on the mitigation of all Very High graded risks across NHSL;
4. Considered all Very High graded risks in the context of the Healthcare Strategy, Commissioning Plans and decision-making.

5. Noted the detailed corporate risk register, accurate as at 14 March 2018, set out in Appendix 1.

2018/03/43

CORPORATE OBJECTIVES 2018/19

The NHS Board received and noted the Corporate Objectives for 2018/19 which had been reviewed by the Remuneration Committee on 21 February 2017 and by the Corporate Management Team on 26 February 2017.

Mr. (Calum) Campbell reported that Corporate Objectives were prepared each year and set out the key priorities and areas for delivery that will be cascaded into personal and team objectives across the organisation.

The document set out the Lanarkshire Quality Approach, performance management arrangements, NHS Lanarkshire's Values, and then, grouped under 5 headings, listed the individual objectives with named lead Executive Directors.

Progress against Corporate Objectives will be monitored twice yearly, at mid-year and at year end. Progress reports will be submitted to the Planning, Performance & Resources Committee each November (mid-year) and June (full year).

Following approval by the Board, a high level summary of the Board's approach to Corporate Objectives 2018/19 will be placed on our public website with a link to the full document.

It was noted that the Board's Financial Plan for 2018/19 was submitted separately to the NHS Board, and to Scottish Government, and confirmed the Board's commitment to deliver financial balance for the year, including the delivery of a challenging Efficiency Savings Programme. Achieving financial balance and efficiency savings were reflected as a Corporate Objective.

THE BOARD:

1. Approved the Corporate Objectives for 2018/19.

2018/03/44

FINANCE REPORT TO 28TH FEBRUARY 2018 & FINANCIAL PLAN 2018/19

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 28 February 2018. The Board was also asked to approve a one off increase of £1.6m to the IJB prescribing budget to cover the overspend arising from short supply issues in year.

Mrs. Ace reported that at the end of February 2018 the Board was reporting a £0.004m under spend, £0.553m better than the LDP trajectory which had always recognised a gap between expenditure being incurred and savings schemes taking full effect. The forecast to be delivered from the efficiency schemes was £0.1m ahead of target, and breakeven was forecast. In addition, Mrs. Ace reported that the capital programme is on track.

THE BOARD:

1. Noted the financial report and the anticipated break even position in terms of revenue and capital for 2017/18.

In addition, Mrs. Ace also presented a paper to the NHS Board on the 2018/19 financial framework. It was noted that the process of developing the plan had involved Corporate Management Team discussions, 2 Board development sessions, a preliminary overview to the Board in January 2018 and engagement with the Area Partnership Forum. Links with the IJB Chief Finance Officer had been made in developing the planning assumptions for the health element of the IJB budgets.

To be able to fully fund pay rises, increased expenditure on drugs, supplies inflation and increased expenditure on Information Management and Technology it was estimated that the NHS Board will have to supplement the anticipated increase in allocations with £25.821m of efficiency plans. It was noted that work was well underway to secure this, with an estimated £5.385m to be identified to deliver breakeven.

THE BOARD:

1. Approved the financial framework as the basis for opening budgets, noting that final decisions on pay and its funding have still to be made at a national level;
2. Noted that the Board had still to identify £5.385m of deliverable efficiency schemes to stay within its revenue resource limit; and
3. Noted that performance against access targets was dependent on funding from the Transformation Fund.

2018/03/45

JOINT INSPECTION OF ADULT SERVICES IN NORTH LANARKSHIRE

The NHS Board received and noted a paper which highlighted the content of the Inspection Report: Joint Inspection (Adults) – The Effectiveness of Strategic Planning in North Lanarkshire Health and Social Care Partnership, which was published on Tuesday 27th February 2018 by the Care Inspectorate and Healthcare Improvement Scotland

Ms. Hewitt reminded Members that the report was on the agenda for the Planning, Performance & Resources Committee meeting on 28 February 2018, which had to be cancelled due to the Met Office red weather warnings in force.

The Care Inspectorate and Healthcare Improvement Scotland had been asked by Scottish Ministers to report on the effectiveness of strategic plans prepared by integration authorities from April 2017 supported by inspections in each relevant authority area.

Health and Social Care North Lanarkshire (H&SCNL) was the first area in Scotland to be inspected. This was due in part to the long standing successful working relationships between the inspection agencies, North Lanarkshire Council and NHS Lanarkshire, which it was recognised,

would facilitate a mutual learning process linked to the development of a range of new quality indicators focused on integration.

Ms. Hewitt provided the Board with a short presentation highlighting the key messages within the report. This covered the quality indicators assessed, areas for improvement and areas of strength.

It was noted that the inspection took place between May and August 2017. The process included a review of strategic plans and an overview of delivery against national targets. The inspection team held a series of meetings over a two week period with over 250 members of staff, partners and stakeholders ranging from the Chief Accountable Officer and Senior Leadership team to elected members, IJB Board members and frontline staff.

The Inspection team identified a number of strengths and areas of good practice within H&SCNL including the strong foundations that have been developed to deliver integrated health and social care; the quality of strategic needs assessments and locality profiles and the involvement of local communities, people who use services and carers in the development of our vision and plans.

There were also a numbers of areas where the inspection team saw room for improvement including the challenge of ensuring that people were not delayed in hospital and the subsequent pressures that this created for home support services; the need for greater monitoring of plans in connection with improvement activity including anticipatory care planning and falls prevention; the need for key stakeholders to understand and promote the vision of integration.

Ms. Hewitt assured the Board that since the inspection, there has been significant progress within the Partnership, on many of the areas identified by the Inspection, most notably the completion of the Integrated Service Review Board and development of an associated programme plan for delivery in 2018/19.

THE BOARD:

1. Noted the content of the report;
2. Noted the areas of strength highlighted in the report; and
3. Noted the progress being made to address the areas for improvement.

2018/03/46

MINUTE OF ACUTE OPERATING MANAGEMENT COMMITTEE ON 5TH OCTOBER 2017 & 22ND NOVEMBER 2017 (DRAFT)

The NHS Board received and noted the minutes of the meetings of the Acute Operating Committee on 5th October 2017 and the draft minutes of the meeting held on 22nd November 2017.

2018/01/47

ACCESS TARGETS REPORT

The NHS Board considered an Access Performance 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 on the position with regard to the numbers waiting in relation to the Treatment Time Guarantee and the Outpatient Target, and confirmed that reducing the numbers waiting remained a key management focus. She highlighted pressures within particular specialties.

In relation to the cancer waiting times performance it was noted that NHSL had delivered on both standards in December 2017 and January 2018.

In relation to unscheduled care attendances and performance, it was noted that the overall position in February 2018 was 92.59%, compared to the January 2018 performance of 87.11% and the December 2017 performance of 82.54%.

Ms. Hewitt 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. Ms Hewitt highlighted current performance against trajectory, issues impacting on performance, commissioning intentions for 2017/18 that will support improving delayed discharge performance, and specific actions being taken forward in North and South Partnerships. Ms Hewitt highlighted the continuing challenges around delayed discharges and referred to the high number of complex assessments being referred to social work colleagues, in both the North and the South Partnerships areas.

Mrs. de Souza took Board Members through Delayed Discharges performance in the South and highlighted the decrease in delayed discharge bed days of 1,879 over the past 4 months, i.e. a 43% reduction.

In relation to CAMHS and Psychological Therapies it was noted that two service reviews had been conducted to try to improve patient access and staff recruitment.

It was also highlighted that improvements had been demonstrated in MSK Physiotherapy waiting times, where waiting times had been reduced. In acknowledging the improvements, Mrs Lees cautioned that there would be significant recruitment pressures on MSK physiotherapy services with the impact of the new GMS contract. Mrs. de Souza acknowledged this and reported that the Implementation Group were alert to this challenge.

Mrs. Mahal stressed the requirement to continue to focus on key areas where performance was off trajectory, and asked that charts provided in section 6 of the report provide historical data to more easily identify trends in relation to the data presented.

It was also noted that there were a number of anomalies in the paper where data in the tables did not match data in the narrative, and it was agreed to review the paper outwith the meeting and correct the anomalies. The paper on the Board web site would be updated accordingly.

Mr P Cannon

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; and
5. Noted the challenges around delayed discharge performance.

2018/03/48

CORPORATE COMMUNICATIONS REPORT

The NHS Board received and noted a report from Mr Calvin Brown, Head of Communications, which provided an update on performance metrics for media coverage, social media, NHS Lanarkshire's public website and Freedom of Information requests. The report also sets out progress on a number of planned campaigns including GP Recruitment and Retention; Prescribing; the NHS 70th Anniversary; Meet the Experts; Winter; and Realistic Medicine.

Board Members welcomed the new format of the report.

THE BOARD:

1. The Board noted the content of the report.

2018/03/49

NORTH LANARKSHIRE INTEGRATION SCHEME

The NHS Board considered a report from the North Lanarkshire Health & Social Care Partnership, which provided an updated Integration Scheme, which had been revised to take account of a Scottish Government letter (November 2017) to all 31 Health and Social Care Partnerships across Scotland to inform them that an amendment had been made to the Regulations which supported the implementation of the Public Bodies (Joint Working) Act 2014.

The amendment related specifically to the Carers (Scotland) Act 2016, which was due to come into effect from 1 April 2018. The implementation of the Carers Act had implications for Integration Authorities, NHS Boards and Councils. The amendment required the new duties cited within the Act to be delegated specifically to Integration Authorities.

Ms. Hewitt emphasised that the amendment to the Integration Scheme was relatively minor and related only to the requirement to include the Carers Act responsibilities at this stage. However, it was highlighted that in conjunction with Council Legal Services, further work is underway to include the specific duties of the Children and Young People (Scotland) Act 2014 and the Community Justice (Scotland) Act 2016, with changes planned to be finalised in the first half of 2018/19.

It was noted that the updated North Lanarkshire Health & Social Care Partnership Integration Scheme was also being presented to North Lanarkshire Council's Policy and Resources Committee.

THE BOARD:

1. Approved the amended the North Lanarkshire Integration Scheme.

2018/03/50

CODE OF CORPORATE GOVERNANCE (SECTION A) & STANDING FINANCIAL INSTRUCTIONS AND SCHEME OF DELEGATION

The NHS Board received and discussed an updated Code of Corporate Governance. Mr Cannon reported that Section A of the Code of Corporate Governance had been updated to reflect changes required since the Code was last reviewed in 2016, and to take account of the recommendations made around the review of governance structures in September 2017.

The Governance Committee Terms of Reference had been submitted to respective Committees in their current formats, and these had been updated to reflect a common format, and were available on FirstPort.

It was noted that Sections B, C and D remain unaltered, and that Sections E & F - Standing Financial Instructions / Scheme of Delegation (Financial) had been updated following discussion at the March 2018 Audit Committee, and were also available on FirstPort.

In relation to Section I - Risk Management it was noted that this section will be updated along with the revised Risk Management Strategy and presented to the Board at the May 2018 meeting, so that these are aligned.

Mr Cannon confirmed that the updated Code, in entirety, will be published on the Board's website after the Board meeting.

THE BOARD:

1. Approved the updated Section A of the Code of Conduct;
2. Noted that the Governance Committee Terms of Reference had been reviewed by respective Committees and were reformatted;
3. Noted that an updated Section on Risk Management will be brought to the May Board meeting along with the updated Risk Management Strategy; and
4. Noted that the updated Code of Corporate Governance will be uploaded on to the Board's public facing web site.

2018/01/51

QUARTERLY LOCAL DELIVERY PLAN REPORT – QUARTER 3 (OCTOBER – DECEMBER 2017)

The NHS Board received and discussed the Local Delivery Plan Report for Quarter 3, which described progress against the Local Delivery Plan

Standards for 2017/18.

Mr. Sloey highlighted that the Report on Local Delivery Plan Standards was drawn from the electronic Integrated Corporate Performance Report (ICPR), and is a PDF extract taken on 14 March 2018. Annex 1 comprised a note of assurance of governance for those Standards that are rated as 'red' or 'amber'.

It was also noted that for 2018/19, Scottish Government has replaced the Local Delivery Plan format with a more succinct Annual Operational Plan (AOP). Mr. Sloey confirmed that the Board's 2018/19 AOP was in draft stage. Once the draft was agreed with Scottish Government, consideration will be given as to how best to adapt this report format to provide assurance to the NHS Board on AOP targets.

THE BOARD:

1. Noted the Quarterly Local Delivery Plan Report;
2. Noted that the Annual Operational Plan will replace the Local Delivery Plan; and
3. Confirmed that the report presented provided sufficient assurance about progress in the delivery of key actions.

2018/03/52

GENERAL DATA PROTECTION REGULATIONS – UPDATE

The NHS Board received and noted a report from Mr. Colin Sloey, Director of Strategic Planning and Performance, which set out an update on preparedness for the new regulations around Data Protection.

It was noted that the General Data Protection Regulation (GDPR) was coming into force on 25th May 2018. It governed how organisations collect, use and share data and requires that bodies must build data protection into their existing system design and infrastructure. Mr Sloey highlighted that this legislation will give individuals more control over how organisations use their personal information, setting new standards of protection.

Mr. Sloey referred to the workplan developed to ensure that the Board is compliant with the GDPR. An update on the resources being deployed in view of the risks associated with non compliance was included in the Finance paper presented at the Board meeting in January 2018.

An action plan was devised and presented, discussed and endorsed at the Information Governance Committee in November 2017. The remit of the Gap Analysis Group that was formed to allow NHS Lanarkshire to comply with the NHS Scotland Information Security Policy Framework DL (2015) 17, was changed to progress the implementation plan for GDPR.

Mr. Sloey emphasised that the highlight report attached to the update was reviewed by the Corporate Management Team on 12 March 2018 and would continue to be closely monitored to ensure that all risks are mitigated.

THE BOARD:

1. Noted the update and the plans in place to ensure that the Board was compliant with the new legislation.

2018/03/53

POPULATION HEALTH, PRIMARY CARE AND COMMUNITY SERVICES GOVERNANCE COMMITTEE ON 21ST MARCH 2018 (SUMMARY)

The NHS Board received and noted a summary of the meeting of the Population Health, Primary Care and Community Services Governance Committee held on 21st March 2018.

2018/03/54

ACUTE GOVERNANCE COMMITTEE – 21ST MARCH 2018 (VERBAL)

The NHS Board received and noted a verbal update in relation to the Acute Governance Committee meeting held on 21st March 2018.

2018/03/55

AUDIT COMMITTEE ON 6TH MARCH 2018 (DRAFT)

The NHS Board received and noted the draft minutes of the meeting of the Audit Committee held on 6th March 2018.

2018/03/56

STAFF GOVERNANCE COMMITTEE ON 19TH FEBRUARY 2018 (SUMMARY)

The NHS Board received and a summary of the meeting of the Staff Governance Committee held on 19th February 2018.

2018/03/57

NORTH LANARKSHIRE INTEGRATION JOINT BOARD ON 23RD NOVEMBER 2017 AND 12TH DECEMBER 2017 (DRAFT)

The NHS Board received and noted the minutes of the meetings of the North Lanarkshire Integration Joint Board on 23rd November 2017 and 12th December 2017 (draft).

2018/03/58

SOUTH LANARKSHIRE INTEGRATION JOINT BOARD ON 13TH FEBRUARY 2018 (DRAFT)

The NHS Board received and noted the draft minute of the meeting of the South Lanarkshire Integration Joint Board on 13th February 2018.

2018/03/59

AREA CLINICAL FORUM ON 15TH FEBRUARY 2018 (DRAFT)

The NHS Board received and noted the draft minutes of the meeting of the Area Clinical Forum held on 15th February 2018.

2018/03/60

WORKPLAN 2018

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

2018/03/61 **CALENDAR OF DATES 2018**

The NHS Board received and noted an updated Calendar of Dates for meetings in 2018.

2018/03/62 **ANY OTHER COMPETENT BUSINESS**

There were no items of business raised.

2018/03/63 **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.

2018/03/64 **DATE OF NEXT MEETING**

Wednesday 30th May 2018 at 9.30am.

DRAFT