

Lanarkshire NHS Board

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**Minute of Meeting of the Lanarkshire NHS Board
 held on Wednesday 28 August 2019 at 9.30am in the
 Board Room, NHS Lanarkshire**

- CHAIR:** Mrs N Mahal, Non Executive Director
- PRESENT:** Mrs L Ace, Director of Finance
 Mrs I Barkby, Director for Nurses, Midwives and Allied Health Professionals
 Dr J Burns, Medical Director
 Mr P Campbell, Non Executive Director
 Mr C Campbell, Chief Executive
 Mr M Fuller, Non Executive Director
 Councillor P Kelly, Non Executive Director
 Mrs M Lees, Chair, Area Clinical Forum
 Mrs L Macer, Employee Director (from Minute 2019/08/122)
 Councillor 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:** Mrs A Armstrong, Nurse Director, North Lanarkshire Health and Social Care Partnership (Minute 2019/08/127)
 Mr C Brown, Director of Communications
 Mrs K Bell, Head of Service Change & Transformation (Minute 2019/08/127)
 Mr P Cannon, Board Secretary
 Dr L Findlay, Medical Director South Lanarkshire Health and Social Care Partnership (Minute 2019/08/135)
 Ms A Goodfellow, Public Health Specialist, Public Health and Health Policy
 Mr P Graham, Head of Spiritual Care and Wellbeing (Minute 2019/08/118)
 Ms M Hayward, Head of Health and Social Care, South Lanarkshire Health and Social Care Partnership
 Ms H Knox, Director of Acute Services / Deputy Chief Executive
 Mr C Lauder, Director of Planning, Property & Performance
 Mr R McGuffie, Chief Accountable Officer, North Lanarkshire Health and Social Care Partnership
 Ms M Smith, Board Secretary, State Hospital
 Mrs V de Souza, Director, South Lanarkshire Health and Social Care Partnership
 Dr C Steel, Consultant, Hospital at Home Service
 Mr J White, Director of Human Resources
 Mr D Wilson, Director of Information and Digital Technology
- APOLOGIES:** Mr G Docherty, Director of Public Health and Health Policy

2019/08/112

WELCOME

Mrs Mahal welcomed colleagues to the meeting, in particular Ms Smith, Board Secretary at The State Hospitals Board for Scotland, who would be working with Mr Cannon to provide additional support to NHS Lanarkshire; as well as Ms Goodfellow who was in attendance on behalf of Mr Docherty. She also welcomed Mr Graham who would be presenting Item 7 on Patient Experience, and Dr Steel who would be presenting Item 11, Hospital at Home.

Mrs Mahal noted that the Board would be joined by Mrs Armstrong and Mrs Bell for Item 16, the Mental Health and Wellbeing Strategy, and Dr Findlay for Item 23, for the Primary Care Improvement Plan Update.

2019/08/113

DECLARATION OF INTERESTS

There were no declarations of interests made.

2019/08/ 114

MINUTES

The minutes of the meetings of the NHS Board held on 29 May 2019, 26 June 2019 and 30 July 2019 were submitted for approval.

THE BOARD

1. Approved the minutes of the meeting held on 27 March 2019.
2. Approved the minutes of the meeting held on 26 June 2019, subject to minor amendment to note that Mr B Moore had been present.
3. Approved the minutes of the meeting held on 30 July 2019.

2019/08/115

MATTERS ARISING

Mr (Calum) Campbell provided a further update in relation to the Annual Operating Plan, which had been presented to the Board in draft format at their meeting on 29 May 2019. The plan had been accepted by Scottish Government, and the Board would now be publishing the Plan on the website.

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. In particular it was noted that actions numbered 15 and 19 could be considered as complete.

2019/08/116

CHAIR'S REPORT

Mrs Mahal provided a verbal report to the Board.

a) Chairs' meeting with the Cabinet Secretary – 26 August 2019

Mrs Mahal updated Board Members on the range of issues discussed at the recent NHS Board Chairs' meeting with the Cabinet Secretary.

The Cabinet Secretary had highlighted the importance of implementing good practice standards across NHS Scotland, with Health Improvement Scotland (HIS) taking forward the development of a hub which would function as an evidence base for good practice. Board Members agreed that further consideration should be given to how to link innovation within the Board, with the hub being set up through HIS, and that this would be added to the workplan for either the Board or the Planning, Performance and Resources Committee.

C Lauder/
P Cannon

The Cabinet Secretary had also asked Chairs to ensure that Boards were assured about resilience at local level, and to ensure that those staff who wished to apply for settled status were supported to do so, in preparation for the possibility of a withdrawal from the EU, without a deal in place between the UK and the EU.

b) Mrs Mahal advised that the Board Chairs were taking forward an initiative for a Board development site for Board Members on TURAS Learn, a key focus of which would be the Corporate Governance Blueprint as well as induction, quality improvement and data sharing. A link would be issued to Board Members.

P Cannon

Mrs Mahal advised that discussions around the Annual Operating Plans for the next financial year would commence early with Scottish Government.

c) The Cabinet Secretary had written to Board Chairs to advise that Ministerial Reviews would take place in summer 2020, with a mid-year review being held by the Cabinet Secretary with Chairs and Chief Executives in the intervening period. Board Members discussed and agreed that as the next public review would not be held until summer 2020, consideration should be given to how to continue to foster good stakeholder engagement.

N Mahal/
P Cannon/
C Brown

2019/08/117

BOARD EXECUTIVE TEAM REPORT

The NHS Board considered the Board Executive Team Report.

Mr. (Calum) Campbell highlighted that Brexit preparations were ongoing and would be considered at item 19 of today's agenda. Further, that the Monklands Replacement Project would be considered at Item 15 of today's agenda. He also updated the Board on the industrial action planned for 24 hours on 2 September 2019 at University Hospital Hairmyres. A briefing in this regard had already been issued to Board Members.

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

Mrs Barkby referred in particular to the two NMAHP Development Events held in June and July, which focussed on Building a Psychologically Safe and Fearless Organisation. She also advised the Board that activity had

commenced on workforce planning in anticipation of the safe staffing legislation coming into force.

In her update, Dr Burns picked up this point in reference to medical staff, and underlined the continuing development of the Board's performance in Research and Development and the positive link this had in the retention of clinical staff.

Mr Lauder highlighted work which was taking place on the management of car parking to take place at University Hospital Hairmyres, Motherwell Health Centre as well the Kirklands site. It was noted that a further update would be provided to the Planning, Performance and Resources Committee meeting in September 2019, and that no decisions had been taken at this stage.

C Lauder

Mr Wilson referred to ongoing roll out of Hospital Electronic Prescribing and Medicine Administration (HEPMA) with full implementation expected to be completed by the end of 2019. He noted the positive reception to date on the part of clinical teams.

Mr White highlighted the continuing success of Project Search, and the 2019/20 programme which commenced with 24 students on 26 August 2019. Board Members also noted that this as the 10th year of Project Search and a 10th Anniversary Graduation Ceremony will be hosted by NHS Lanarkshire on 9th June 2020.

Mrs Ace noted that NHS Lanarkshire's Annual Procurement Report had been published and was available on the Board's website.

Ms Goodfellow reported that the Independent Report into Buchanan / St Ambrose High School Campus was published on 9 August 2019, which had concluded that there were no public health risks, and commended the good work of the Public Health Team. NHS Lanarkshire was committed to supporting the Site Recovery Group.

Mr Brown asked the Board to note the progress in the development of the Communications and Engagement Strategy, and that an update will be brought to the Board Development Session scheduled for 25 September 2019.

Ms Knox highlighted the three submissions for posters for Quality Week 2019, had been accepted from the Acute Directorate under the domain of Timely, Equitable and Efficient.

Mr McGuffie referred to North Lanarkshire HSCP's Commissioning Plan, which covered the period until March 2020, with planning under way to create the next plan for 2020 to 2023. He outlined the engagement process and confirmed that liaison arrangements in this respect would be made for Board Members through Mr Cannon.

R McGuffie

Mrs de Souza noted the new Commissioning Plan for South Lanarkshire HSCP for 2019 to 2022, and the focus was on modernising care. An information event was being held in August 2019 in relation to the new facility at the former St Joseph's Primary School in Blantyre. She also

highlighted a positive visit from Mrs Maree Todd, Minister for Childcare and Early Years.

Following presentation of this BET report, there was discussion around the Independent Report into Buchanan / St Ambrose High School Campus and the Site Recovery Group. Board Members acknowledged the excellent work undertaken by the Public Health Team, under the leadership of Dr David Cromie. Mrs Mahal confirmed that she had written to Dr Cromie and had commended the work of the wider Public Health Team. Mr Campbell confirmed that NHS Lanarkshire will work with the Site Recovery Group, to help build public confidence in the site.

The Board also discussed the industrial action planned at University Hospital Hairmyres, and the contingency planning in place. Mr Campbell underlined that this industrial action was not being taken by any Board employees and was on the part of ISS staff who were GMB members only. All other staff were expected to report to work as normal. However, there would be some resultant disruption in service delivery, and elective procedures were being re-scheduled. This was being communicated carefully with those affected. Mr Brown added that there was ongoing communication with all local staff groups, albeit that the industrial action was not on the part of NHS Lanarkshire staff.

THE BOARD:

1. Noted the content of the report.

2019/08/118

PATIENT EXPERIENCE – DYING WELL – END OF LIFE SUPPORT – CARER FEEDBACK

The NHS Board received a report from the Director of Nursing, which included a presentation led by Mr Paul Graham, Head of Spiritual Care and Well-Being. The Board viewed a short video clip which shared a number of carers' experiences in the lead up to the death of a patient at University Hospital Wishaw.

Mr Graham highlighted that end of life care was a significant part of the work undertaken by the Spiritual Care and Well-Being team, and noted that this pastoral care was not focused on religion and was available to everyone. He asked the Board to note the focus on enabling carers to care for their loved ones at the end of life stage. He also underlined how small changes have a significant impact – e.g. the practice of placing patients' belongings in a coloured bag, which then indicated to everyone in contact with that carer that they had just suffered a bereavement.

Mrs Barkby underlined the importance of the No-One Dies Alone Project and the work progressed in NHS Lanarkshire in support of this initiative.

Mr Graham also referred to the work being undertaken to help support staff and circulated a wellbeing toolkit which could help staff in practising mindfulness as a support mechanism.

In response to Mr Moore, it was confirmed that a visit will be arranged for Non- Executive Directors to visit the centre at University Hospital Wishaw.

Mr Fuller asked about the capacity available to roll this initiative out to those patients who would die at home, and Mrs Barkby confirmed that more time will be required to put this in place given the additional complexities of doing so.

Mrs Mahal commended the initiative, and the work being progressed in this regard which would have huge impact and benefit.

THE BOARD:

1. Noted the excellent work being taken forward through the No-One Dies Alone Project; and
2. Agreed that a visit should be arranged to the Spiritual Care & Wellbeing Centre. P Cannon

2019/08/119

HEALTHCARE QUALITY ASSURANCE & IMPROVEMENT COMMITTEE – 11 JULY 2019

The NHS Board received and noted a summary of the meeting of the Healthcare Quality Assurance & Improvement Committee held on 11 July 2019.

THE BOARD:

1. Noted the report.

2019/08/120

QUALITY ASSURANCE AND IMPROVEMENT PROGRESS REPORT

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

Dr Burns took Board Members through the report in detail, noting the oversight through Healthcare Quality Assurance & Improvement Committee. She highlighted the value management approach, with NHS Lanarkshire having been recruited to the new national Value Management Collaborative led by Healthcare Improvement Scotland (HIS), which would run from August 2019 until March 2022. The aim was to improve quality outcomes for patients as well as linking to efficiency and risk management decisions.

Dr Burns confirmed that learning from adverse events remained central to prioritising areas for improvement, and that this aim was supported through improvements made to the reporting system. She also asked the NHS Board to note publication of the Duty of Candour Annual Report 2018/19, and the first release of Hospital Standardised Mortality Ratio (HSMR) data using updated methodology.

Dr Burns noted that Quality Week would take place on 18 to 22 November 2019 and staff will be invited to focus on and celebrate success across delivery of Quality in Healthcare. She highlighted the leading work progressed in the NHS Board in person centred visiting and that following

completion of a six month review in this regard, an implementation plan would be submitted to Scottish Government.

In relation to national and local evidence, guidelines and standards, Dr Burns asked the NHS Board to note the improvement made relating to guidelines that require review.

Dr Burns also asked the NHS Board to receive and note the Medical Education and Training Report, which outlined work on both postgraduate and undergraduate medical education and training. She highlighted improvements made in the single remaining GMC enhanced monitoring site at Trauma & Orthopaedics at University Hospital Wishaw, which was due for re-visit in September 2019. Dr Burns also highlighted the work being carried out in relation to well-being of all staff including Doctors in Training and undergraduate trainees, as being critical to the organisation as well as the individuals themselves.

Mrs Mahal welcomed these initiatives and asked that this was linked and fed into the NHS Board's work in relation to the Sturrock Report, as well as the Corporate Governance Blueprint.

Mr Fuller asked for some clarification on the role of Clinical Development Fellows, and Dr Burns advised that this differed from GP trainees and could offer more choice for the individual who would be qualified to the same level as fully registered doctors.

There was discussion around the benefit for the NHS Board in receiving the full GMC National Training Survey Report, or a summary report, and this would be taken forward to assess the relative merits and come to a position.

Dr Burns

Mr Moore asked a question around the confirmation of job plans to recognise the role of trainers and Dr Burns confirmed that this took place through annual medical appraisal to confirm the allocation of time appropriately.

THE BOARD:

1. Noted the range of work throughout NHS Lanarkshire to improve the quality and safety of care and services and the assurance provided;
2. Noted the Duty of Candour Annual Report 2018/19;
3. Noted the Medical Education and Training Annual Report 2018/19; and
4. Agreed that Dr Burns would consider further how best to keep the Board apprised of issues arising from the GMC Training Survey.

2019/08/121

HAI UPDATE (JANUARY 2019 - MARCH 2019)

The NHS Board received a report, which provided an overview of Infection Control and prevention (IPC) activities during 2018/19.

Mrs Barkby noted the key highlights of the report, and in particular, the significant achievements made.

Dr Thomson noted the oversight work carried out through the Healthcare Quality Assurance & Improvement Committee, and requested that the NHS Board also receive further reporting indicating what additional work would be undertaken in the coming year to support meeting targets.

It was agreed that the workplan should be presented to the NHS Board going forward as part of the Annual Report. This year, the workplan would be circulated to Non-Executive Directors electronically.

I Barkby

THE BOARD

1. Noted the report;
2. Confirmed that the report provided sufficient assurance about the organisational performance on HCAI, and the arrangements in place for managing and monitoring HCAI; and
3. Requested that the Annual Report should in future also provide the workplan.

2019/08/122

HOSPITAL AT HOME

The Board received a presentation from Dr Claire Steel, Consultant Physician, Hospital at Home Team, which provided an overview of the service developed within NHS Lanarkshire, placing this within a national and global context. Dr Steel provided advice on the alternative pathways for acutely unwell patients as well as explaining the mechanics of how these work. She highlighted the key outcomes for patients as well as the cost implications.

Dr Steel's presentation provided the Board with patient feedback on their experience of the service as well as from staff in terms of the trans-disciplinary approach taken. She also asked the Board to note work progressed through the scheme on research and innovation. She emphasised that the key direction of travel was in the delivery of safer and more accessible care for patients.

Mrs Mahal thanked Dr Steel for providing a helpful overview of Hospital at Home, and encouraged Non- Executive Board Members to visit the service, noting that visits would be arranged through Mr Cannon. She noted that NHS Lanarkshire had taken a leading role within NHS Scotland in developing this scheme.

P Cannon

Mr Fuller asked for further assurance on the effectiveness of treatment delivered through the scheme; and whether a comparison could be made to the cost of similar care within a hospital setting. Councillor Kelly also asked for assurance on the financial implications of this model. Dr Steel advised that further data would be available at the end of the current year around patient outcomes, and that evidence to date demonstrated cost effectiveness, with an 18% saving in costs compared to hospital care.

Mrs Lees asked for further clarification on whether patients would receive additional support whilst in hospital, as opposed to a home setting, and whether there was the possibility of patients having unrealistic expectations about the type of care that would be delivered at home. Dr Steel acknowledged that patient expectations may exceed the care it was possible to deliver, but that close working relationships with the Integrated Rehabilitation Team as well as Social Work helped to reassure patients that the model could provide an appropriate level of support within the home setting. Mrs Barkby acknowledged that patients and their carers may become anxious during times between visits as this was a different experience to being in an acute setting, however, she also underlined that district nurse teams were still in place to deliver support.

Councillor McGuigan noted that he had received positive feedback from constituents about their experiences of Hospital at Home. He also noted the importance of the possible impact of infection control, and that the scheme must demonstrate efficiency through delivery as well as good outcomes for patients. There was agreement from Board Members that progress to date had demonstrated the possibility of expansion of the scheme, and assurance was sought by the NHS Board about development more fully within the NHS Board area, particularly in South Lanarkshire.

Mrs Barkby advised that the scheme served a dedicated client group at present, and that a different service existed within certain areas of South Lanarkshire historically. Mrs Mahal noted that going forward South Lanarkshire IJB would be responsible for decision-making in this regard as this lay within their commissioning responsibilities.

THE BOARD

1. Noted the report and content of the presentation; and
2. Noted the South Lanarkshire IJB responsibility to review the full roll out of the Hospital at Home scheme as this lay within their commissioning remit; and V de Souza
3. Agreed that a visit would be arranged to go to Hospital At Home for Board Members. P Cannon

2019/08/123

URGENT OUT OF HOURS WORKFORCE PLAN

The NHS Board received a paper by Marianne Hayward, Head of Health & Social Care, South HSCP, the purpose of which was to provide an update on the progress of the Urgent Out of Hours Workforce Plan. This paper noted that Lanarkshire Out of Hours Service had experienced workforce sustainability challenges over the past two years, mainly in relation to GP availability with a more recent reduction in nurse practitioner availability.

Mrs de Souza led the NHS Board through the key points outlining progress in recruitment and re-stating the aim to have two fully staffed Out of Hours sites in place by December 2019.

Mrs Macer requested that consideration be given to linkage to the NHS Board's Corporate Risk Register as well as the Workforce Plan, especially

in relation to the retention of staff. Mrs de Souza confirmed that she would take this forward.

THE BOARD:

1. Noted the report and the sustainability challenges; and
2. Agreed that the link should be formalised in writing between the NHS Board's Corporate Risk Register and Workforce Plan. V de Souza

2019/08/124

WORKFORCE PLAN 2019/20

The NHS Board received a paper seeking approval of the annual workforce plan. The paper described the anticipated changes during 2019/20 faced nationally and locally, and identified potential strategic actions needed to deliver the NHS health strategy "Achieving Excellence".

Mr White asked the NHS Board to note the oversight role of the Staff Governance Committee, and confirmed that the plan had received the Committee's endorsement.

As Chair of the Staff Governance Committee, Mrs Macer confirmed this endorsement, and also asked the NHS Board to note that post-meeting, a query had been raised in relation to the use of the private sector in the radiology service.

Mrs Mahal asked for some clarification on the reporting of data representing the reasons for grievances in reference to bullying within the equality monitoring analysis, and Mr White confirmed that this would be amended to demonstrate the position clearly, which was that this had not raised particular concern in terms of the reported numbers. He added that the introduction of Job Train, a new recruitment system would assist in the reporting of equality monitoring data.

THE BOARD:

1. Approved the Workforce Plan 2019/20 for submission to Scottish Government, subject to minor amendment on the direct employment of radiology staff; and amendment to the data on reporting of grievances within equality monitoring section. Mr White

2019/08/125

MODEL HOURS OF SERVICE SCHEME (INDEPENDENT PHARMACY CONTRACTORS)

The NHS Board received a paper, which outlined the Model Hours of Service Scheme (MHoSS) which served to secure that one or more community pharmacies should be open at reasonable times for the dispensing of medicines required urgently. Mr Cannon summarised the key points of the report for Board Members, and it was noted that the Model Scheme had been endorsed by the Area Pharmaceutical Committee. The NHS Board was asked to review and approve the paper and revised plan for onward submission to Scottish Government.

The Board noted that the current Chair of the Primary Care Pharmaceutical Committee, Mr Fuller, would be retiring from his Non- Executive Director

role after completion of his current term and Mrs Mahal confirmed that appropriate succession planning would be put in place for this role.

THE BOARD:

1. Approved the MHoSS for the NHS Board, for submission to Scottish Government.

2019/08/126

MONKLANDS REPLACEMENT PROJECT UPDATE

The NHS Board received a paper, from Mr Lauder, which described the progress of the action plan, which had been agreed following the Monklands Project Independent Review and the subsequent correspondence between the Chair and the Cabinet Secretary for Health and Sport.

Mr Lauder led the NHS Board through the details of the paper, outlining the proposed additional membership to the Monklands Replacement Oversight Board (MROB). He asked the Board to note the ongoing work on site analysis and the possible risk to planned timescale with a number of potential additional sites having been identified by North Lanarkshire Council.

Mr Brown highlighted that the Consultation Institute had been engaged as independent engagement advisors and asked to make clear recommendations on the timescale and resources required to meet the level of engagement outlined by the Independent Review and Cabinet Secretary. This would form part of tri-partite planning alongside the NHS Lanarkshire Engagement Plan and the Scottish Health Council. Mr Brown added that it was important to note this revised approach and noted some of the possible ways forward such as walk-in events rather than public meetings and taking a public hearing approach in this regard. There was a focus on the need to listen to the views of the public, and have these hearings independently chaired.

The revised communication and engagement plan would be brought to the development seminar after the meeting of the PPRC on 25 September 2019.

C Brown

Dr Thomson advised that the initial focus of the MROB was on setting up a development seminar for members of the MROB to review the information gained from this tri-partite approach. Mrs Mahal underlined the need for clarity in oversight, with the MROB able to review in detail and make informed recommendations to the NHS Board on the way forward.

Mr Campbell asked Board Members to note that Scottish Government were undertaking an evaluation of the independent review process. Mr Campbell would draft a suggested response on behalf of NHS Lanarkshire and this would be circulated electronically to Board Members. There was discussion on suggested feedback and it was agreed to highlight that the Board had not been given an opportunity to see the Independent Review Report before it was publically available, and that in future the Board should have sight of any final report before it is published.

C Campbell

THE BOARD:

1. Approved the appointment of Mr Brian Moore, Mr Michael Fuller and Professor Sir Harry Burns to the MROB;
2. Noted the content of the report;
3. Noted that the Terms of Reference for the MROB would be finalised and circulated electronically to Board Members for approval, before being submitted to the Cabinet Secretary;
4. Agreed that the MROB should map out the decision-making points for the NHS Board in the process;
5. Noted that the MROB had will consider a request for the Consultation Institute to present to the PPRC or the NHS Board; and
6. Noted that Mr Campbell would draft a response to the evaluation of the independent review process for circulation to Board Members.

2019/08/127

MENTAL HEALTH AND WELLBEING STRATEGY

The NHS Board received a report, which outlined the Lanarkshire Mental Health and Wellbeing Strategy. Mrs Armstrong led the Board through the key points of the rigorous and inclusive planning approach taken. Mrs Bell was also in attendance to help describe how the work progressed and the steps taken to date towards implementation. She confirmed that the finalised strategy would order to take into account any further feedback.

Mrs Mahal noted the governance route, which was for North Lanarkshire IJB to approve the strategy, and the NHS Board to endorse. It was noted that the Strategy was being formally launched on 24 October 2019.

Mr McGuffie thanked colleagues for their work in this respect which had represented a wide engagement exercise to produce a strategy for all, which would contribute to the reduction of stigma in mental health.

In answer to a question from Mr Fuller on delivery of the strategy, Mrs Armstrong advised that implementation was planned carefully across three years. Councillor McGuigan welcomed the approach and noted the need to take account of individual patient backgrounds and resultant needs. Mrs Macer also noted that comments from the Staff Governance Committee had been included.

THE BOARD:

1. Endorsed the strategy.
2. Board Members were asked to provide any further feedback to Mrs Armstrong.

2019/08/128

FINANCE REPORT TO 31 JULY 2019

The NHS Board received a paper, which outlined the financial position to 31 July 2019. The Board was reporting a £0.703m overspend which was £0.298m better than the financial plan trajectory to date.

Mrs Ace led the Board through the detail of the paper, referring to the financial plan for the NHS Board 2019/20, which had estimated at the point of its submission that £2.103m savings had still to be identified. She asked the Board to note that some key uncertainties remained in several areas of expenditure, particularly on drugs, and the degree of estimation used meant a degree of caution should be adopted on the forecasts produced in the paper.

Mr Campbell asked the NHS Board to note the risks outlined within the paper, and the uncertainty, which meant that the Annual Operational Plan may have to be amended mid-year.

THE BOARD:

1. Noted the content of the report detailing the financial position to 31 July 2019;
2. Noted that the initial assessment that month 4 was on trajectory though this relies upon various assumptions on drugs and funding;
3. Noted the significant risks outlined in Section 11 of the report; and
4. The expectation that the capital programme, agreed by the Board in May 2019, would now progress with pace.

2019/08/130

CORPORATE RISK REGISTER

The NHS Board considered the Corporate Risk Register.

Mr Cannon asked the Board to note the material changes made to the Corporate Risk Register since the last reporting period including new or closed risks. A quarterly review of the Corporate Risk Register had been undertaken during July and August 2019

THE BOARD:

1. Noted the summary of significant material changes to the Corporate Risk Register, including the position of new and/or closed risks since the last reporting period;
2. 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 14th August 2019;
3. Received assurance on the mitigation of all Very High graded risks on the Corporate Risk Register, 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;
5. Noted that the other changes to the corporate risk register for this reporting period; and
6. Noted the Corporate Risk Register, accurate as at 14th August 2019.

2019/08/131

BREXIT UPDATE

The NHS Board received a paper from the Director of Public Health, which provided an update on the Board's response to the uncertainty created by the ongoing EU withdrawal debate. Ms Goodfellow was in attendance to provide a further verbal update in this regard. She highlighted that the Scottish Resilience Partnership Sub-Group on the EU-Exit Contingency Planning planned to move to a go live position on 21 October 2019.

The Corporate Management Team within NHS Lanarkshire had commissioned a fresh review of potential risks and mitigation planning across the organisation, particularly with a view to EU withdrawal during the winter period.

Board Members discussed whether any further action could be taken at this time, and Mr Campbell clarified the advice from Scottish Government against stockpiling of medicines.

THE BOARD:

1. Noted the report, and the assurance provided about the local planning.

2019/08/132

POPULATION HEALTH, PRIMARY CARE & COMMUNITY SERVICES GOVERNANCE COMMITTEE

The NHS Board received and noted a summary of the discussion at the Population Health, Primary Care and Community Services Governance Committee meeting held on 16 July 2019. Ms Morris, Committee Chair, also provided a verbal update to highlight the main discussion points at the meeting.

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

- MSK (Musculoskeletal) Deep Dive
- Health Inequalities Statement
- Access Target Reports

In relation to the MSK Deep Dive, Mr Moore asked for more information around the recommendation to include MSK services within the hub in terms of the number of hubs and the potential for merging services. Mrs de Souza would review and provide an update.

The Board requested sight of the Health Inequalities Statement at its January 2020 meeting, for approval.

Mrs de Souza noted key highlights for the Access Target Report for South Lanarkshire HSCP. Mr McGuffie summarised the Access Target report for North Lanarkshire HSCP. The Board discussed the challenging position around delayed discharges and Mental Health targets and noted the actions being taken.

THE BOARD:

1. Noted the summary of the meeting of the Population Health, Primary Care & Community Services Governance Committee meeting on 16 July 2019;
2. Noted the MSK deep dive and asked for an update on merging hub services; V de Souza
3. Requested that the Health Inequalities Statement be presented to the NHS Board in January 2020, for its approval; and G Docherty
4. Noted the Access Target report for North and South Lanarkshire HSCPs and the challenges within delayed discharges, mental health services and MSK services.

2019/08/133

ACUTE GOVERNANCE COMMITTEE

The NHS Board received and noted a summary of the discussion at the Acute Governance Committee meeting held on 16 July 2019. Dr Osborne, Committee Chair, also provided a verbal update to highlight the main discussion points at the meeting. The NHS Board also received and noted a summary of the Interventional Radiology Service Review.

Dr Osborne highlighted the detailed update received on Interventional Radiology, which remained a risk, with regional service solutions being explored. Dr Osborne also asked the NHS Board to note the challenge in unscheduled care performance, which had dipped below the Scottish average in recent weeks. Ms Knox underlined concern in this area, and added that the performance in planned care was largely on target.

Mrs Mahal thanked Dr Osborne and the Acute Governance Committee for their detailed oversight in this area and for highlighting these concerns with the NHS Board.

Ms Knox advised that CMT had recently received a presentation detailing the key pressures in unscheduled care; and it was agreed that the slides from the presentation would be circulated to Board Members. P Cannon

In discussion, Board Members expressed concern on performance in unscheduled care, particularly around any impact to patient safety.

Mr Campbell advised that the reality was that the system was under pressure and it was imperative to take stock over the few weeks and that he was leading this through the CMT. If it was not possible to create capacity in this timeframe, then the NHS Board should be aware of the possible need to review the Annual Operational Plan.

Board Members sought further clarification on demand, particularly from GP referrals as well as whether this was a whole system pressure with all hospitals affected. They discussed changes in individual lifestyles and the impact that this could have on demand at the Emergency Department compared to community services.

Board Members also expressed concern about staff resilience due to sustained pressure in the system.

Mr Campbell underlined the importance of the CMT taking time at this point to understand the current challenges in the delivery of unscheduled care. He confirmed that a report would come back to the Board, with initial reporting to the PPRC on 25 September 2019.

Mrs Mahal summarised the collective view of Board Members to support the Chief Executive in leading this root cause analysis with reporting coming to PPRC and the NHS Board as outlined, with a clear set of actions to recover the position.

THE BOARD:

1. Noted the summary of the meeting of the Acute Governance Committee which took place on 24 July 2019;
2. Agreed that a further report should be presented to the PPRC on the pressures on unscheduled care, at its meeting on 25 September 2019, and a further report to the NHS Board in October 2019 on actions; and
3. Noted the summary report of the Interventional Radiology Review.

2019/08/134

NHS SCOTLAND CORPORATE GOVERNANCE BLUEPRINT IMPROVEMENT PLAN

Board Members were reminded that an improvement plan was drafted and agreed in April 2019, following completion of a self-assessment exercise which had taken place in January 2019. The Improvement Plan had been updated, and was attached for information.

Mrs Mahal noted that given the workstream being progressed on the Sturrock report, it would be helpful to coordinate action planning around both of these workstreams together.

A further update would therefore be brought to the next Board Meeting.

THE BOARD

1. Noted the Corporate Governance Blueprint Improvement Plan; and that a further progress report would be received at the next Board, and that once the action plan in relation to the response to the Sturrock report had been updated that these be merged.

J White /
P Cannon

2019/08/135

ACHIEVING EXCELLENCE – BUILDING COMMUNITY CAPACITY SLWG – PRIMARY CARE IMPROVEMENT PLAN – UPDATE

A paper was received from Dr Findlay, to provide a second six monthly update to the NHS Board as had been agreed when the initial Primary Care Improvement Plan (PCIP) was agreed by the two IJBs, the NHS Board and the GP Sub-Committee in July 2018. Dr Findlay was in attendance to highlight the key points.

In discussion, Board Members sought assurance on whether further resilience could be identified, and Dr Findlay advised that although some initial indications were positive, detailed monitoring data would not be available until September 2019. She highlighted key risks for the Board as being related to workforce availability, particularly in the GP workforce. Further, she noted the financial complexity of implementation and the risks associated with any potential shortfall in funding.

THE BOARD:

1. Noted the second six monthly update on the PCIP;
2. Noted that a further update would be presented to the Board in six months' time; and
3. Agreed that the monitoring data update report should be circulated to Board Members when available.

V de Souza

2019/08/136

CORPORATE COMMUNICATIONS REPORT

A paper was received from Mr Brown which summarised activity and performance in media coverage, social media, NHS Lanarkshire website and Freedom of Information requests.

Board Members noted the content of the report and requested sight of the Oasis performance framework, which would be circulated electronically. It was noted that a further report on communication and engagement would be brought to the development seminar after the next meeting of the PPRC on 25 September 2019.

C Brown

THE BOARD:

1. Noted the content of the report.

2019/08/137

NORTH LANARKSHIRE INTEGRATION JOINT BOARD ON 26th MARCH 2019

The NHS Board received and noted the minutes following the meeting of the North Lanarkshire Integration Joint Board on 26 March 2019.

2019/08/138

SOUTH LANARKSHIRE INTEGRATION JOINT BOARD ON 25 JUNE 2019 (DRAFT)

The NHS Board received and noted the draft minutes of the meeting of the South Lanarkshire Integration Joint Board on 25 June 2019.

- 2019/08/139 **AREA CLINICAL FORUM ON 20 JUNE 2019 (DRAFT)**
- The NHS Board received and noted the draft minute of the meeting of the Area Clinical Forum held on 20 June 2019.
- 2019/08/140 **COMMUNITY PLANNING PARTNERSHIP MINUTES – NORTH 5 JUNE 2019 & SOUTH 17 APRIL 2019**
- The NHS Board received and noted the minutes of the meetings of the North (5 June 2019) & South (17 April 2019) Community Planning Partnerships.
- Mr Moore asked for further clarification on the model for community engagement - Ms Goodfellow would seek this and provide an update. A Goodfellow
- 2019/08/141 **STAFF GOVERNANCE COMMITTEE 3 JUNE 2019**
- The NHS Board received and noted the minute of the meeting of the Staff Governance Committee on 3 June 2019.
- 2019/08/142 **AUDIT COMMITTEE 4 JUNE 2019 & 26 JUNE 2019 (DRAFT)**
- The NHS Board received and noted the minutes of the Audit Committee held on 4 June 2019, and the draft minutes of the meeting held on 26 June 2019.
- 2019/08/143 **WORKPLAN 2019/2020**
- The NHS Board received and noted an updated Workplan for 2019/2020 and which would be updated to reflect discussion at today's meeting.
- 2019/08/144 **CALENDAR OF DATES 2019**
- The NHS Board received an updated Calendar of Dates for meetings in 2019, and noted some further amendments would be made.
- 2019/08/145 **ANY OTHER COMPETENT BUSINESS**
- Mrs Barkby asked colleagues to note that she intended to retire at the end of March 2020. Board Members joined in expressing their thanks to her for her work and commitment over many years and noting the loss to the organisation.
- 2019/08/146 **EXCLUSION OF PUBLIC AND PRESS**
- The Board considered and approved a motion by way of the Standing Orders (Section 19.5) to exclude the public and press during consideration of business due to the confidential nature of the business to be transacted.
- 2019/08/147 **DATE OF NEXT MEETING**
- Wednesday 30 October, at 9.30am