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**Minute of Meeting of the Lanarkshire NHS Board
held on Wednesday 30 October 2019 at 9.00am in the
Board Room, NHS Lanarkshire**

CHAIR: Mrs N Mahal, Non Executive Director

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

IN ATTENDANCE: Mr C Brown, Director of Communications
Mr P Cannon, Board Secretary
Ms L Clyde, Chief Midwife (for Minute 167)
Dr A Cook, Medical Director, North Lanarkshire Health and Social Care Partnership
Mr C Cunningham, Head of Commissioning and Performance, South Lanarkshire Health and Social Care Partnership
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
Ms J Lockhart, Senior Nurse (for Minute 155)
Dr J Logan, Consultant in Public Health Medicine
Mr P McCrossan, Director for Allied Health Professionals (for Minute 160)
Mr R McGuffie, Chief Officer, North Lanarkshire Health and Social Care Partnership
Ms K McLean, Senior Nurse (for Minute 155)
Ms M Smith, Board Secretary, State Hospital
Mrs V de Souza, Director, South Lanarkshire Health and Social Care Partnership
Mr J White, Director of Human Resources
Mr D Wilson, Director of Information and Digital Technology

APOLOGIES: Dr J Burns, Medical Director

2019/10/148

WELCOME

Mrs Mahal welcomed colleagues to the meeting, particularly Dr Cook who was attending on behalf of Dr Burns. Mrs Mahal noted that there would be a number of visitors attending the meeting, and each would be introduced at the relevant agenda item.

2019/10/149

DECLARATION OF INTERESTS

Mrs Mahal and Dr Thomson both declared an interest in respect of item 12 on the agenda, in relation to their roles as Members of Glasgow Caledonian University Court. In view of this it was agreed that item 12 would be chaired by Mr (Philip) Campbell.

The NHS Board considered that this would enable oversight and decision-making to be discharged appropriately; and that there was no requirement for Mrs Mahal and Dr Thomson to leave the meeting for the duration of this item given that neither had played any part in discussing this in their role as Member of the Court of Glasgow Caledonian University.

2019/10/150

MINUTES

The minutes of the meeting of the NHS Board held on 28 August 2019 were submitted for approval.

THE BOARD:

1. Approved the minutes of the meeting held on 28 August 2019.

2019/10/151

MATTERS ARISING

The NHS Board received an update on the Hepatitis C Infected Healthcare Worker Situation and the Associated Patient Notification Exercise. Dr John Logan, Consultant in Public Health, provided an overview and summary.

It was noted that the report of the NHS Lanarkshire Incident Management Team (IMT) which investigated a hepatitis C infected healthcare worker situation in 2008 and 2015, and prepared for and delivered a patient notification exercise during February to April 2016, was submitted to the UK Advisory Panel for healthcare workers infected with blood borne viruses (UKAP), Health Protection Scotland and National Services Scotland, in October 2016.

The NHS Lanarkshire report made eleven recommendations, six of which were made to UKAP. UKAP had undertaken work over the last three years which related to several of the recommendations, and published updated guidance in July 2019.

This had enabled a paper on the implementation of all of the recommendations to be completed and submitted to NHS Lanarkshire Board, as was requested by the Board in 2016.

Dr Logan asked the NHS Board to note that the recommendations made by the IMT had been taken forward for implementation within NHS Lanarkshire. However, the updated UKAP guidance did not include the IMT recommendation for mandatory testing. In response to a question from Mr Fuller, Dr Logan confirmed that further national discussion was not proposed. Board Members expressed some concern over the UKAP guidance around continued individual case by case assessment, particularly that healthcare workers should seek an assessment should they be aware of potential infection, as opposed to regular testing of healthcare workers.

Dr Logan explained that UKAP had agreed to publish their work underpinning their recommendations and considered that NHS Lanarkshire should consider further the benefits and risks in developing its own protocol.

THE BOARD:

1. Noted the report and recommendations; and
2. Acknowledged concern on the issue of self-assessment against regular testing of all healthcare workers; and
3. Asked Mr Docherty to review the UKAP guidance with the clinical team and provide a further report to the NHS Board on the benefits and risks of developing an NHS Lanarkshire policy further.

G Docherty

2019/10/152

ACTION LOG

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

2019/10/153

CHAIR'S REPORT

Mrs Mahal provided a verbal report to the Board.

- a) Mrs Mahal confirmed that the Non-Executive Director vacancy that would arise at the end of Mr Michael Fuller's second term of office, in March 2020, was currently out to advert, with a closing date of 15 November 2019. An information evening would be held on 6 November 2019, and Board Members were asked to support this event.
- b) Mrs Mahal noted that the Strategic Partnership with Strathclyde University would be discussed later in the meeting as part of the Board Executive Team update, and welcomed the Strategic Partnership Agreement.
- c) Members were reminded that the Board Development Day would take place on 27 November 2019, and it had been decided that in view of the number of issues to be discussed by the Planning, Performance and Resources Committee, that it would not be feasible to meet also on that day. Therefore, it was necessary to hold a Planning, Performance and Resources Committee separately, and this would be on 10 December 2019. Following the Committee meeting there would also be a session with colleagues from the Scottish Government Chief Nursing Office to brief Board Members on preparation for the implementation of safe staffing legislation.

d) Feedback on NHS Chairs' meeting - 28 October 2019

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

Work was progressing on sharing 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. Hospital at Home had been selected as the first project under consideration by the hub.

John Sturrock, QC, had attended the meeting to provide NHS Chairs with an update on progress since the publication of his report into NHS Highland, and it was highlighted that this issue would be picked up at the Board Development Day on 27 November 2019.

The Chairs' Group received an update on the establishment of the new NHS Board, Public Health Scotland, with the appointment of a shadow Chair and Executive Team. Advertisements had been placed for Non-Executive Director posts.

Board Chairs' had been asked to ensure that Boards continued to focus on

- Unscheduled care performance;
- The pace needed to deliver the integration of health & social care services;
- Cancer performance; and
- Delayed discharges.

THE BOARD:

1. Noted the update from the Board Chair.

2019/10/154

BOARD EXECUTIVE TEAM REPORT

The NHS Board considered the Board Executive Team Report.

Mr (Calum) Campbell highlighted that following UK political developments, NHS Lanarkshire preparations in relation to BREXIT had been stepped down as a live incident. He emphasised the significant time and resources across the organisation devoted to Brexit preparedness.

Mr Campbell then highlighted the Strategic Partnership Agreement entered into with the University of Strathclyde, which mirrored the existing agreements with Glasgow Caledonian University and the University of the West of Scotland.

He also reminded Board Members that the Ministerial Mid-Year Review would take place on 4 November 2019 which would focus on the key Government priorities of waiting times, health and social care integration and mental health.

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

Mrs Barkby referred in particular to the staff survey on psychological safety, with the results just having been received and she would be linking with Mr White to take this forward.

Dr Cook confirmed the support arrangement put in place for the Medical Director role, during Dr Burns absence, with Dr Findlay acting as Medical Director until 31 January 2020, and Dr Cook taking on the role for three months thereafter.

Mr Lauder highlighted ongoing discussions on the management of car parking at pilot locations (University Hospital Hairmyres, Motherwell Health Centre, and the Kirklands Hospital site). These discussions included dialogue with the Area Clinical Forum and Area Partnership Forum, and a report on progress would be provided in due course.

C Lauder

Mr Wilson advised that NHS Lanarkshire had hosted a team from NES Digital Service to review NHS Lanarkshire Digital Health and Care to explore further alignment in this area.

Mrs Ace noted that focused work was continuing on the 20/21 savings plan and that she would be attending a meeting of the national NHS Directors of Finance Group in the coming week.

Mr Docherty highlighted the reaffirmation through Scottish Government of the Child Health Commissioner role within NHS Boards.

Mr Brown asked the Board to note that NHS Lanarkshire were winners at the recent NHS Scotland Communications Awards specifically for communications support provided to manage changes at Greenhills Medical Practice in 2018, and were also finalists in five categories overall. The Board Members commended Mr Brown and his colleagues for this national recognition.

Ms Knox highlighted the improvements made in unscheduled care performance at University Hospital Monklands, as well as the quality improvement focus within cardiology care at University Hospital Hairmyres, with a 47% reduction from the cardiac baseline rate. She also noted that “Styles and Smiles” won the Best Hospital Initiative at the Scottish Dementia Awards in September 2019. Ms Knox asked Board Members to note continued recruitment to the Acute Directorate as detailed in the report.

Mr McGuffie referred to the launch of the Lanarkshire Mental Health Strategy which had taken place on 24 October 2019, the culmination of a significant planning and engagement exercise.

Mrs de Souza noted that formal notification had been received of a Joint Inspection of Services for Children and Young People in Need of Care and Protection in the South Lanarkshire Community Partnership Area. Further, she highlighted a separate report published recently which had underlined significant improvements in the quality of care and support given to people with Multiple Sclerosis in Lanarkshire over the past 18 months. She also asked the NHS Board to note the Clydesdale Integrated Community Support Team had recently won a prestigious COSLA award.

Following presentation of this report, Mrs Mahal offered congratulations to all the award winners across NHS Lanarkshire over recent months and asked for details to be submitted to her office, so that she could write to each winner on behalf of the NHS Board.

THE BOARD:

1. Noted the content of the report, and that a further update would be provided in due course. C Lauder

2019/10/155

PATIENT EXPERIENCE - HIGH RESOURCE USER PROJECT

The NHS Board received a report from Mrs I Barkby, Director for Nurses, Midwives and Allied Health Professionals, which included a presentation led by Senior Nurse Lockhart and Senior Nurse McLean. The Board viewed a short video clip in which a patient, who was regarded as a high resource user, told his personal story of recovery from alcohol dependency, in which he had experienced periods of self-harming, and suicide attempts, as well as homelessness. Through recounting these experiences, the patient spoke of the reliance he had during this time on the Emergency Department (ED). He also spoke of how his life had been transformed through the links he had formed with the High Resource User Project.

Senior Nurse Lockhart and Senior Nurse McLean highlighted the aims of the project in improving health and well-being outcomes among high users of the Emergency Department. Although the project had involved a small patient cohort, this had evidenced a 10% reduction in ED attendances by March 2019. Given this success, the target reduction rate was increased to 20% by August 2019.

The presentation was received warmly by Board Members, with congratulations offered to the team for the success to date. It was, however, also acknowledged that a number of patients identified in this cohort had not engaged with the project. Dr Thomson noted the need to foster constructive sharing of learning rather than repeating project experience. Dr Osborne highlighted the success of multi-disciplinary team working, and how this work can impact positively on current service pressures within unscheduled care services.

Senior Nurse Lockhart stated that the project's success was founded upon a multidisciplinary approach and that the aim would be to share this approach more widely. Funds were also now in place to extend the project for one year from September 2019.

Miss Morris sought further assurance that the project would have a wider focus as part of the mental health strategy, and Senior Nurse Lockhart confirmed that this was the case.

Councillor Kelly asked how the project would monitor the long term impact on patients e.g. through their future employment prospects, and Nurse Lockhart outlined the plans to keep in contact with patients and to obtain further feedback from them over time. Senior Nurse McLean provided the NHS Board with some practical examples of how the team linked with patients to help with the wider aspects of their recovery through activity and work opportunities.

Mr Docherty underlined the way that this project had helped to identify a key cohort of patients for whom specific support links could be put in place, and that this had then demonstrated success in supporting these patients more effectively, as well as reducing attendances at ED. The reduction in ED attendance would in turn show a beneficial reduction in the costs in caring for patients where their behaviour could be impactful of service delivery overall.

Mrs Mahal commended the initiative, and the work being progressed in this regard and noted that further scrutiny in this area would be remitted to the Population Health, Primary Care and Community Services Governance Committee.

THE BOARD:

1. Noted the excellent work being taken forward through the High Resource User Project;
2. Noted that additional funding for the project had been secured;
3. Noted the desire to take forward a cost benefit analysis to support further consideration of funding; and
4. Asked the Population Health Primary Care and Community Services Governance Committee to add this item on their work plan for continued scrutiny on scaling and impact.

G Docherty

2019/10/156

HEALTHCARE QUALITY ASSURANCE & IMPROVEMENT COMMITTEE 12 SEPTEMBER 2019

The NHS Board received and noted a summary of the meeting of the Healthcare Quality Assurance & Improvement Committee held on 12 September 2019.

THE BOARD:

1. Noted the report.

2019/10/157

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.

Ms Cormack took Board Members through the report in detail, noting oversight through Healthcare Quality Assurance & Improvement Committee. She highlighted in particular the value management approach taken, with a seminar held on 23 August 2019 to further explore areas of potential to ensure quality whilst creating value. She also asked the Board to note the work progressed in conjunction with Health Improvement Scotland (HIS) to meet the aim of the Cabinet Secretary for Health and Sport for a national approach for patient facing NHS Boards in respect of Adverse Events. In response to a question from Mr Fuller, on how this

would be taken forward, Ms Cormack reported that benchmarking work was being taken forward through HIS and that the current focus was on the process for national reporting of significant events.

Ms Cormack acknowledged difficulties experienced within complaints in relation to the database, and confirmed that this would be resolved shortly. Board Members noted this concern, the impact of it and the expected resolution. Further, it was noted that a regional procurement solution may be possible in the longer term.

Ms Cormack highlighted that a Duty of Candour think tank event took place on 28 October 2019, with continued focus on legislative compliance.

Board Members noted this update and asked for assurance in particular about reporting on quality walkrounds, especially on any themes these produced and requested that this be included in future reporting. Ms Cormack confirmed that this level of reporting would be brought to the next meeting of the NHS Board. Board Members also asked that walkrounds take place out of hours. Ms Cormack acknowledged that presently there was a focus on midweek daytime visits, and also that the focus was within acute services, however planning was in place to extend quality walkrounds to community services and in out of hours periods. The NHS Board requested a further update on what would be viable in this respect

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. Agreed that there should be further consideration of the arrangements in place for quality walkrounds for acute and community services and out of hours; and
3. Requested that reporting in future should include a breakdown and analysis of the themes arising from quality walkrounds.

K Cormack

K Cormack

2019/10/158

HAI UPDATE (JANUARY 2019 - MARCH 2019)

The NHS Board received a report, which provided an overview of Infection Control and Prevention (IPC) and noted the key performance headlines and improvement activity.

Mrs Barkby summarised the report and asked Board Members to note in particular the new Standards on Healthcare Associated Infections and Indicators on Antibiotic Use for Scotland which were released on 10 October 2019. The Board asked Ms Barkby to clarify further whether this would have the effect of all NHS Boards facing the same targets for improvement; and she explained that each Board would be set a target based upon its own baseline position.

The Board noted this update and it was agreed that Ms Coulombe who had recently been appointed as Head of Infection Prevention and Control Head of ICP would be invited to attend a meeting of the NHS Board.

THE BOARD

1. Noted the report;
2. Extended an invitation to Ms Coulombe to attend a Board meeting;
and
3. Agreed to receive a copy of the workplan to provide detail on
actions being taken.

P Cannon

I Barkby

2019/10/159

IMPLEMENTATION OF THE NHS SCOTLAND GLOBAL CITIZENSHIP PROGRAMME

The NHS Board received a report which outlined the progress made in NHS Lanarkshire to promote and support the implementation of the NHS Scotland Global Citizenship Programme.

It was noted that this initiative had been progressed by Ms K Bell, Head of Strategic Change and Transformation, and Dr J Logan, Consultant in Public Health Medicine. Dr Logan provided a summary of the key highlights, and underlined the success to date of the planning partnership approach.

Mr (Calum) Campbell underlined the benefits for staff in participating in the programme. He also provided clarification to Board Members that it would be within the remit of partner organisations to set the indicators to measure success and to providing funding to support the Programme.

Board Members were supportive of the Programme and were keen to recognise the benefits that could accrue to NHS Lanarkshire. Dr Logan acknowledged that the programme was at an early stage and noted that a project management approach would be taken by Ms Bell to take this forward. Board Members asked to be kept updated with progress.

In discussion, Board Members raised questions on opportunities for NHS Lanarkshire to build on links with Malawi, further engagement work with Community Planning Partners, and Human Resources (HR) guidance. It was noted that HR guidance was available and it was also agreed that officers should explore other opportunities to promote this programme, such as through offering a Livingstone Scholarship in Lanarkshire.

THE BOARD

1. Noted the content of the report;
2. Approved the proposals and the approach taken;
3. Requested an update report in August 2020; and
4. Asked that officers explore other opportunities to promote this
agenda, such as through offering a Livingstone Scholarship in
Lanarkshire.

K Bell /
J Logan

2019/10/160

**UPDATE ON THE JOINT STRATEGIC PARTNERSHIP
BETWEEN NHS LANARKSHIRE AND GLASGOW CALEDONIAN
UNIVERSITY**

Mr (Phi) Campbell took the Chair for this item as had been agreed at the commencement of the meeting. Mrs Mahal and Dr Thomson both declared an interest in respect of item 12 on the agenda, in relation to their roles as Members of Glasgow Caledonian University Court.

Mr Campbell reiterated that Mrs Mahal and Dr Thomson did not have to leave the room for the discussion given that neither had played any part in discussing this in their role as Member of the Court of Glasgow Caledonian University.

The NHS Board received a paper, which summarised the position and Mr McCrossan was in attendance to highlight the key points for the NHS Board.

Following the establishment of a strategic partnership between the NHS Board and Glasgow Caledonian University (GCU), in 2017, three NHS departments had come forward to seek granting university status as clinical areas that were able to demonstrate a strong record of education and research carried out in conjunction with GCU. Mr McCrossan reported that the GCU Executive Board had agreed that the Department of Podiatry, the Department of Psychology, and the Monklands Hospital Department of Stroke Care had all met the agreed criteria. The NHS Board were asked to note this and to endorse the award of university status for these departments.

The NHS Board endorsed the award of university status as set out in the paper.

Mr Fuller also asked that the Board's congratulations be passed on to those staff who had been appointed as Honorary Fellows with the University.

Members asked if there would be potential in the future for further services and departments to seek university status. Mr McCrossan advised that this was expected to be the case and that further applications were being actively discussed.

THE BOARD:

1. Noted the report;
2. Endorsed the decision made by GCU to award the use of university titles by the Department of Podiatry, the Department of Psychology and the Monklands University Hospital Department of Stroke Care; and
3. Looked forward to receiving further proposals for the award of university status in 2020.

2019/10/161

WINTER PLAN

The NHS Board received a paper seeking approval of the planning arrangements being put in place to ensure services were prepared for the coming winter months, and were asked to note that planning had been taken

forward by the winter planning group, with the NHS Lanarkshire Corporate Management Team, and Senior Management Teams of North and South Health & Social Care Partnerships. This would also be shared with North and South Lanarkshire IJBs.

Mr Cunningham provided a high level summary of the report for Board Members outlining the key points which had been developed in line with Scottish Government guidance. The report was due to be submitted to Scottish Government on 31 October 2019.

Mr Cunningham was asked to provide further clarification around workforce issues, in terms of the provision of additional staffing in key areas, given the current pressures in unscheduled care. A key service pressure had been the challenge in providing two Urgent Care Out of Hours centres system during recent months.

Mr Cunningham advised that planning was in place to appoint supernumerary staff who would assist trained clinical teams, as an additional resource. These appointments would be temporary and therefore any additional resourcing need could be re-considered into 2020. At the same time, recruitment to more senior clinical posts was continuing. This was being taken forward system wide and carefully planned to ensure staffing was re-focussed in specific areas as necessary. Workforce was highlighted as amber risk within the report. Mr White added that recruitment programmes were being actively taken forward with the recruitment of 100 Health Care Support Workers.

Mr Cunningham also underlined the need to ensure that whole system planning was especially focussed over the three week period of Christmas and into the New Year, with Friday 27 December noted as a potential area of pressure. The Board acknowledged the bottom up nature of the planning with evidence of good coordination across the whole system.

Mr (Philip) Campbell highlighted communication and public messaging and asked how we best influence patient attitudes, particularly to discourage inappropriate reliance on Emergency Departments, and asked what further action could be taken to highlight the risks to other patients should Emergency Departments continue to be used inappropriately by some patients.

Mr Cunningham noted that at the national winter planning group, a key focus had been on the benefits of a national campaign to take these messages to the public. Mr (Calum) Campbell noted that unscheduled care would be discussed at the Chief Executives Group meeting in November, and agreed that a robust national campaign would be helpful.

The Board discussed and agreed that locally, NHS Lanarkshire should communicate more robustly about using Accident & Emergency (A&E) services appropriately and was supportive of promoting local messages to this effect.

THE BOARD:

1. Approved the Winter Plan 2019/20 for submission to Scottish Government; and

2. Approved the communication of robust messaging around using A&E services appropriately.

2019/10/162

MONKLANDS REPLACEMENT OVERSIGHT BOARD

The NHS Board received a paper, which presented the Monklands Oversight Board (MROB) Terms of Reference for approval.

Mr Lauder provided the NHS Board with a summary of the key issues, particularly around membership, to ensure representation across the Lanarkshire Health Board area. Dr Thomson confirmed that the first meeting of the MROB had taken place on 24 September 2019 in the form of a seminar.

THE BOARD:

1. Approved the Terms of Reference of the Monklands Replacement Oversight Board, including the membership of the Oversight Board.

2019/10/163

POPULATION HEALTH, PRIMARY CARE AND COMMUNITY SERVICES GOVERNANCE COMMITTEE 3 SEPTEMBER 2019

The NHS Board received an update from the Population Health, Primary Care and Community Services Governance Committee which had met on 3 September 2019. Miss Morris provided an overview of the key issues discussed at the meeting and asked the NHS Board to note that the Urgent Care Out of Hours performance continued to be noted as a risk.

The NHS Board also received summary Access Target Reports from North and South Lanarkshire Health and Social Care Partnerships (H&SCPs). Mr McGuffie provided a summary of the key points on behalf of North Lanarkshire H&SCP and asked the NHS Board to note the improvements made in waiting times for access to Psychological Therapies, and the continued challenges in CAMHS performance. Mrs de Souza provided a summary on behalf of South Lanarkshire H&SCP and asked the NHS Board to note in particular the continuing pressure on delayed patient discharges, and the action taken in mitigation. Mrs de Souza also explained the issues in relation to waiting times for Musculoskeletal services.

THE BOARD:

1. Noted the update report from the Population Health, Primary Care and Community Services Committee; and
2. Noted the content of the North Lanarkshire H&SCP Access Report and the areas of challenge; and
3. Noted the content of the South Lanarkshire H&SCP Access Report and the areas of challenge.

2019/10/164

**ACUTE GOVERNANCE COMMITTEE 18 SEPTEMBER 2019
(DRAFT)**

The NHS Board received the draft minute of the meeting of the Acute Governance Committee, which took place on 18 September 2019. Dr Osborne provided a summary of the key issues considered and highlighted that the presentation received on general surgery, as well the continued pressures experienced in acute services in meeting performance targets for unscheduled care.

The NHS Board received the Access Targets Report for Acute Services and Ms Knox provided a summary of the key points. She highlighted the positive scheduled care performance, while echoing the concerns raised by Dr Osborne in relation to unscheduled care.

Mrs Mahal noted that the Board's performance was to be discussed in detail within the next item on the agenda, and that the improving position on scheduled care had been highlighted at the recent Chairs' meeting.

THE BOARD:

1. Noted the draft minutes of the Acute Governance Committee meeting held on 18 September 2019; and
2. Noted the content of the Access Targets Report for Acute Services, and the challenging performance issues around unscheduled care.

2019/10/165

A WHOLE SYSTEM APPROACH TO UNSCHEDULED CARE

The NHS Board received a paper and also a detailed presentation, which outlined the challenges faced in the delivery of unscheduled care, and explored the opportunities to address these challenges taking a whole system approach across acute and community services.

Mr Cunningham led the presentation, highlighting the pressures experienced within NHSScotland around the delivery of unscheduled care, and placed the challenge faced within NHS Lanarkshire in this national context. He emphasised that trends were not uniform across Scotland, and that there was particular pressure regionally in the West of Scotland. He outlined the reviews into the data carried out, which had demonstrated a growth in demand for unscheduled care services in NHS Lanarkshire over the past five years, as well as trends in activity across sites and patient flows.

He also detailed the work carried out on patient profiling in unscheduled care, as well as the impact on bed occupancy, delayed discharges and the rate of patients returning to use the Emergency Department in particular. Ms Hayward was also in attendance and led the NHS Board through the themes arising from the review, as well as the key areas of focus going forward, taking a whole system approach to meet these challenges. Mrs de Souza noted that this work would be taken forward in tandem with the Winter Plan.

Following this, Mrs Mahal acknowledged the scale of the pressures on services, and the urgent need to focus on actions to address these pressures. On behalf of the NHS Board, she outlined the expectation going forward in

terms of the pace of this workstream. Mrs Mahal highlighted that at the same time, specific actions, with defined timelines, and demonstrable measurable outcomes should be integral to this work. She asked colleagues to review what would be different in their approach in order to bring about change and how to gain traction in making necessary change particularly around identifying and sharing good practice. The NHS Board was seeking assurance on the actions being identified and noted that a fuller Action Plan will be brought to the Board Development Session on 27 November 2019.

Mr Moore echoed these points and noted that specifics were required in terms of what additionality would be brought to bear in this approach. Dr Thomson highlighted the need for a cultural change in patient attitudes to urgent care services, and that this would require engagement through communications. Mr Fuller agreed with this point and asked for a focus on preventative action, especially focussed on patients making frequent demands on emergency care.

Dr Osborne raised concerns about the pressures experienced over the summer period, and the challenge that the winter season would add to services that were already challenged in meeting performance targets, and to staff resilience

Mr (Phil) Campbell also endorsed the need for a clear action plan which benchmarked good practice in other Board areas and identify what was working well and could be upscaled.

Mr (Calum) Campbell emphasised the need for urgent action given the performance in unscheduled care. The review carried out had identified some key points; and his expectation was that these now needed to be turned into concrete actions, with clear planning put in place to improve performance, and robust and timely reporting put in place to quickly identify any deviation from the plan. While acknowledging the challenge, Mr (Calum) Campbell emphasised the need to focus on and maintain patient safety.

Mrs Mahal emphasised that the NHS Board was not yet assured by the actions taken to date to address performance in unscheduled care, and the work taken forward as part of the whole system review should seek to address this deficit in assurance.

THE BOARD:

1. Noted the content of the update as presented; and
2. Noted the need to have further assurance on the actions being taken to meet the pressures faced in delivery unscheduled care; and
3. Requested that a detailed plan, with clear timescales, milestones and measurable outcomes be brought to the Board Development Sessions scheduled for 27 November 2019.

V de Souza

V de Souza

2019/10/166

FINANCE REPORT TO 30 SEPTEMBER 2019

The NHS Board received a paper, which outlined the financial position to 30 September 2019. The Board was reporting a £0.608m overspend which was £0.193m 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 for 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 uncertainties remained in some areas of expenditure, particularly on drugs, but that the risk of not achieving the target year-end financial position had been reduced to medium.

In relation to the Capital Plan, a small number of property receipts remained outstanding, and that even with all planned sale concluded there would still be a gap of £0.5m in the Plan. Discussions were being taken forward with Scottish Government to address the potential shortfall. She also noted the demand on capital for 2020/21 exceeded available resources.

THE BOARD:

1. Noted the content of the report detailing the financial position with actual overspend of £0.608m to 30 September 2019;
2. Noted that the initial assessment that month 6 was on trajectory though this relied upon assumptions on drugs and funding;
3. Noted the significant risks outlined in Section 11 of the report; and
4. Noted the intention to review the risks around the Capital Plan in October.

2019/10/167

ACHIEVING EXCELLENCE – PROGRESSING THE STRATEGY DELIVERY PLAN

A report was received from the Director of Planning, Property and Performance to provide an update on the Achieving Excellence Strategy in the form of a Pipeline update. Mr Lauder provided a summary overview for Board Members.

The report was welcomed, in providing a detailed summary of progress and the Board requested that additional reporting be provided on the development and progress of projects as they were rolled out. This would be taken forward by Mr Lauder.

C Lauder

Best Start Update

The NHS Board also received a report on the implementation of the Best Start Five-Year Forward Plan for Maternity and Neo-Natal service within NHS Lanarkshire, which had been an early adopter of the plan.

Ms Clyde, Chief Midwife, was in attendance to take Board Members through the key highlights of the report, and the key aims; keeping families together, providing choice of birth setting, continuity of care and the neonatal unit. She highlighted that the outcome of the national review of neo-

natal services was awaited and that this could impact on the neo-natal unit within University Hospital Wishaw. Mrs Mahal noted the excellent work taken forward to date and offered congratulations to staff on their contribution to the “Tiny Lives” TV documentary which had successfully showcased the excellence of the care provided.

Board Members acknowledged the work taken forward to date and also recognised that this had been a test of change, with further input required on the challenges this change represented and how the organisation could maintain a high quality service in this area. Mr (Calum) Campbell underlined that as this had been a test of change to date, further work would be progressed on costings, as well as the workforce challenges this presented, and that change should necessarily be evidenced led.

Ms Barkby added that challenges remained, particularly around workforce. It was noted that the NHS Board had previously discussed the future of the neonatal unit at University Hospital Wishaw and had indicated that they were not supportive of the unit losing its level 3 status. Further, any change to the provision of these services in NHS Lanarkshire would be regarded as being significant, requiring formal public consultation.

The NHS Board thanked Ms Clyde for her report and also took the opportunity to thank her for her long and distinguished service, noting that she would be retiring in March 2020.

THE BOARD:

1. Noted the content of the report;
2. Noted and recognised the challenges in respect of cost and workforce;
3. Requested that a further report should be brought back to the NHS Board to clarify the costings / workforce challenges;
4. Noted their continued support for level 3 status for the neo-natal unit at University Hospital Wishaw and if service change was proposed through the national review, noted the need to establish how public consultation would be led; and
5. Requested that consideration be given to additional reporting of the detail of projects contained within the pipeline summary of progress

C Lauder

2019/10/168

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 was updated and presented to each meeting of the NHS Board for their review and consideration.

It was also noted that Scottish Government would be requesting a six monthly review on the implementation of the Action Plan, in November

2019. Colleagues were encouraged to ensure that up to date information was submitted to Mr Cannon to enable this to be submitted.

In addition, Mrs Mahal noted that a further self-assessment exercise to be carried out by all NHS Boards was expected in the summer of 2020.

A further update would 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 meeting; and P Cannon
2. A six-month review report would be completed and submitted to Scottish Government in November 2019. P Cannon

2019/10/169

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 September and October 2019.

In answer to a question on compliance on manual handling training, in North and South H&SCPs, Mr White provided assurance that work was in hand to complete this in time for the deadline of 2 December 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; and
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 16 October 2019; and
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; and
4. Considered all Very High graded risks in the context of the Healthcare Strategy, Commissioning Plans and decision-making; and
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 16 October 2019.

2019/10/170

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, and noted that the command structure was in place, tested, and was working effectively. Mr Docherty provided a verbal update in relation to the up to date position.

THE BOARD:

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

2019/10/171

CORPORATE COMMUNICATIONS REPORT

The NHS Board received a report from the Director of Communications, which provided an update on performance metrics for media coverage, social media, NHS Lanarkshire's public website and Freedom of Information Requests

2019/10/172

NORTH LANARKSHIRE INTEGRATION JOINT BOARD 12 JUNE 2019 AND 24 SEPTEMBER 2019

The NHS Board received and noted the minutes of the meeting of the North Lanarkshire Integration Joint Board which took place on 12 June 2019. Further, the NHS Board received and noted a summary of the meeting that took place on 24 September 2019.

2019/10/173

SOUTH LANARKSHIRE INTEGRATION JOINT BOARD 10 SEPTEMBER 2019

The NHS Board received and noted the draft minutes of the meeting of the South Lanarkshire Integration Joint Board which took place on 10 September 2019.

2019/10/174

AREA CLINICAL FORUM 19 SEPTEMBER 2019 (DRAFT)

The NHS Board received and noted the draft minutes of the meeting of the Area Clinical Forum held on 19 September 2019.

2019/10/175

COMMUNITY PLANNING PARTNERSHIP MINUTE SOUTH 19 JUNE 2019

The NHS Board received and noted the minutes of the meeting of the South Community Planning Partnership on 19 June 2019.

It was noted that the meeting of the North Community Planning Partnership scheduled to take place on 28 August 2019 had been cancelled.

2019/10/176

STAFF GOVERNANCE COMMITTEE 26 AUGUST 2019 (DRAFT)

The NHS Board received and noted the draft minutes of the meeting of the Staff Governance Committee on 26 August 2019.

- 2019/10/177 **AUDIT COMMITTEE 3 SEPTEMBER 2019 (DRAFT)**
- The NHS Board received and noted the draft minutes of the Audit Committee held on 3 September 2019.
- 2019/10/178 **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.
- 2019/10/179 **CALENDAR OF DATES 2019/2020**
- The NHS Board received an updated Calendar of Dates for meetings in 2019/2020.
- 2019/10/180 **ANY OTHER COMPETENT BUSINESS**
- Board Members noted that following a recruitment process Mr Eddie Docherty (NHS Dumfries & Galloway and NHS 24) had been appointed as Nurse Director, on the retirement of Ms Barkby at the end of March 2020.
- 2019/10/181 **RISK**
- The NHS Board did not consider that any new emerging risks should be added to the Corporate Risk Register, or that any existing risks should be re-assessed following discussion at this meeting.
- 2019/10/182 **DATE OF NEXT MEETING**
- Wednesday 29 January 2020, at 9.30am
- 2019/10/183 **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.