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**Minute of Meeting of the Lanarkshire NHS Board
 held on Wednesday 31st March 2021 at 9.30am
 by using Microsoft Teams and Teleconferencing**

CHAIR: Mrs N Mahal, Non Executive

PRESENT: Mrs L Ace, Director of Finance
 Mr A Boyle, Non Executive Director
 Mr P Campbell, Non Executive Director
 Mr E Docherty, Director of Nursing, Midwifery and Allied Health
 Professionals
 Mr G Docherty, Director of Public Health and Health Policy
 Councillor P Kelly, Non Executive Director
 Ms H Knox, Chief Executive
 Mrs M Lees, Chair, Area Clinical Forum
 Mr B Moore, Non Executive Director
 Ms M Morris, Non Executive Director
 Ms L McDonald, Non Executive Director
 Councillor J McGuigan, 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
 Mr R Coulthard, Site Director, University Hospital Hairmyres
 Dr L Findlay, Medical Director, South Lanarkshire Health & Social Care
 Partnership
 Mrs V de Souza, Director, South Lanarkshire Health & Social Care
 Partnership
 Mr C Lauder, Director of Planning, Property & Performance
 Mr B McAlister, Head of IT Applications
 Mr R McGuffie, Chief Officer, North Lanarkshire Health & Social Care
 Partnership
 Ms G Queen, Child Health Commissioner, NHS Lanarkshire (2021/03/87)
 Ms V Boxall, Children and Young Peoples Improvement Collaborative Lead,
 South Lanarkshire Council (2021/03/87)
 Dr M Russell, Associate Medical Director, North Lanarkshire, Health and
 Social Care Partnership (2021/03/69)
 Mrs K Sandilands, Director of Human Resources

APOLOGIES: Dr J Burns, Medical Director
 Mrs L Macer, Employee Director
 Mrs J Park, Director of Acute Services
 Mr D Wilson, Director of Information and Digital Technology

2021/03/55

WELCOME

Mrs Mahal welcomed colleagues to the meeting, in particular Mr McAlister who was attending for Mr Wilson, Dr Findlay who was attending for Dr

Burns and Mr Coulthard who was attending for Mrs Park. As the meeting was being livestreamed, she also welcomed observers and reminded them that the meeting was not being recorded and there was no permission to record or rebroadcast the meeting.

Mrs Mahal advised the Board of the sad death of a member of staff due to Covid. Mr David Trower passed away on 9th March 2021. He had retired from NHS Lanarkshire but had come back to support the response to the pandemic and his colleagues in the administration section within the Emergency Department at University Hospital Monklands.

Mrs Mahal invited Board Members to join her in a minute of reflection in memory of Mr Trower.

2021/03/56

DECLARATION OF INTERESTS

There were no declarations of interest.

2021/03/57

MINUTES

The minute of the meeting of the NHS Board held on 24th February 2021 was submitted for approval.

THE BOARD:

1. Approved the minute of the meeting held on 24th February 2021.

2021/03/58

MATTERS ARISING

There were no Matters Arising raised not otherwise covered on the agenda.

2021/03/59

ACTION LOG

It was noted that the Action Log had been split into two sections, the first section to show active items, the second listing Covid-19 related items on hold. Members discussed specific items on the Action Log. The Action Log would be updated.

2021/03/60

CHAIR'S REPORT

Mrs Mahal provided a verbal report to the NHS Board, and in her introductory remarks highlighted three recent appointments.

It was noted that Mrs Maureen Lees had been reappointed as Chair of the Area Clinical Forum, and that the Cabinet Secretary had invited Mrs Lees to serve as a Non-Executive Board Member for a further four-year term, which she had accepted.

Mrs Mahal also congratulated Mr Russell Coulthard on his recent appointment as Deputy Director of Acute Services.

Mrs Mahal confirmed that following due process, and Cabinet Secretary approval, Dr Lesley Thomson had been appointed Vice Chair of the Board, for a period of one year from 1 April 2021. This shorter term appointment was in order to reflect that a new Chair will be appointed in June 2021, and

the one-year appointment provided flexibility around Board Member portfolios. Mrs Mahal also paid tribute to Mr Phil Campbell who had served as Vice Chair, and would be coming to the end of his second term of office in August 2021.

In relation to Non-Executive Board Member recruitment, it was noted that the vacancy targeting Digital Skills was out to advert and a joint round of recruitment was underway with NHS 24 and the Scottish Ambulance Service. A virtual Information Event was planned for Tuesday 6 April 2021, and Mr Boyle had agreed to participate.

In relation to the Vaccination Delivery Programme, Mrs Mahal paid tribute to the efforts of all the staff involved, and in particular Dr Mark Russell, who was leading this effort. In addition, Mrs Mahal indicated that she, the Chief Executive, and other Directors, had participated in a number of meetings with local MPs and MSPs and Local Authority Councillors to explain the changes made recently to the delivery programme, and to listen to their concerns, many of which had been, or were being, taken on board.

Mrs Mahal also highlighted that the Vaccination Programme was on the agenda and there would be a further opportunity to hear an update on the programme, and for Members to discuss the programme.

THE BOARD:

1. Noted the update from the Board Chair.

In view of the fact that many of the items on the agenda had been discussed or referenced by Governance Committees that had met recently, Mrs Mahal proposed changing the order of business and to take those items listed at section 7 of the agenda next. Board Members agreed.

2021/03/61

CHIEF EXECUTIVE'S REPORT

Ms Knox provided a verbal report to the NHS Board.

Board Members were provided with up to date Covid community prevalence data, and Hospital data, and Ms Knox reminded Board Members that there would be an opportunity to discuss Covid issues, and the vaccination programme, later on the agenda. The number of covid positive patients being admitted to Hospital, and requiring intensive care, was reducing week on week, and the vaccination rates for first and second doses were increasing also.

It was also reported that as part of the national effort to remobilise services, the Louisa Jordan Hospital was reverting back to its previous use, and that vaccination programme would be continuing in the SSE Hydro for patients in the Greater Glasgow & Clyde Health Board area. The services previously provided at the Louisa Jordan Hospital for NHS Lanarkshire patients were being transferred back to NHS Lanarkshire, and these had been transferred back into the Board without difficulty.

Ms Knox paid tribute to the input and support provided by our Military Liaison Officer, Major Donald Urquhart, who had left the Board, but was now supporting colleagues in Scottish Government. The expertise,

assistance and support of the Military, in particular in establishing covid vaccination centres at pace, was greatly appreciated.

Board Members also noted that Ms Knox had led a national group looking at improving the uptake of Breast Screening, in particular in deprived communities, where the uptake of the offer of screening was low, and she referred to the targeted approach now being adopted to reach these patients.

Ms Knox also provided an update on the plans being taken forward for the recruitment of the Chief Officer of the South Lanarkshire Integration Joint Board.

2021/03/62

AUDIT COMMITTEE - 2ND MARCH 2021 - DRAFT MINUTES

The NHS Board received and noted the draft minutes of the meeting of the Audit Committee held on 2nd March 2021.

Mr Moore highlighted some of the items discussed, as part of a very full agenda, and specifically drew attention to the fact that the Standing Financial Instructions and Scheme of Delegation Review was discussed by the Audit Committee.

2021/03/63

HEALTHCARE QUALITY ASSURANCE AND IMPROVEMENT COMMITTEE - 11TH MARCH 2021 - EXCEPTION REPORT

The NHS Board received and noted the Exception Report arising from the meeting of the Healthcare Quality Assurance and Improvement Committee held on 11th March 2021.

Dr Thomson referred to the update provided around the Care Homes Review, which was an extensive piece of work, and it was hoped that this would be completed and reported to the Committee meeting in July 2021.

In addition, Dr Thomson reported that the Committee had considered a detailed presentation on Covid cases in University Hospital Wishaw, and an update on the progress of finalising a Significant Adverse Event Report. The presentation covered the topics that would be explored within the report and highlighted the main factors that were thought to have contributed to the outbreaks. The Committee was assured by the analysis undertaken to date and that there were currently no closed wards in the acute sites and only one community ward was closed.

2021/03/64

NORTH LANARKSHIRE INTEGRATED JOINT BOARD MINUTES - 22ND SEPTEMBER 2020 AND 9TH DECEMBER 2020 & 23RD MARCH 2021 - VERBAL UPDATE

The NHS Board received and noted the minutes of the meeting of the North Lanarkshire Integration Joint Board which took place on 22 September 2020, and the draft minutes from the meeting held on 9 December 2020.

Dr Osborne highlighted that the Integration Joint Board had met on 23 March 2021 and she provided a verbal update on items discussed, highlighting the discussion around finance, both year end and the plans for 2021/22. It was noted however that the meeting was not quorate and that the

decisions made by the Board around budget setting required formal approval and this was being followed up with Members separately.

2021/03/65

**SOUTH LANARKSHIRE INTEGRATION JOINT BOARD –
MINUTES OF 8TH DECEMBER 2020 & 29TH MARCH 2021 - VERBAL
UPDATE**

The NHS Board received and noted the minutes of the meeting of the South Lanarkshire Integration Joint Board which took place on 8th December 2019.

Mr Campbell referred to a more recent special meeting of the Integration Joint Board which took place on Monday 29th March 2021 which covered financial issues, and there was also a discussion about the recruitment process for the Chief Officer of the Integration Joint Board.

2021/03/66

**ACUTE GOVERNANCE COMMITTEE - 24TH MARCH 2021 -
EXCEPTION REPORT**

The NHS Board received and noted the Exception Report following the meeting of the Acute Governance Committee held on 24th March 2021.

Dr Osborne reported that the Committee had a wide ranging discussion on Covid related issues, as well as updates in relation to key performance indicators, and focused on staff wellbeing and remobilisation issues.

2021/03/67

CORPORATE RISK REGISTER

The NHS Board considered the Corporate Risk Register.

Mr Cannon asked the NHS Board to note the material changes made to the Corporate Risk Register since the last report was presented to the NHS Board (February 2021) including new or closed risks. Mr. Cannon took Members through each of the very high graded risks that had emerged from each of the Risk Registers within the risk management taxonomy. It was also highlighted the Covid very high risks had been reviewed since the report had been provided and the number of very high risks had reduced significantly.

In relation to risk 1684, Mr E Docherty reported that the Very High graded risk was reviewed with the Senior Nursing leaders and it was agreed that this risk could be closed as the focus has changed and a new risk was subsequently opened (risk 2009).

Mr Boyle asked if risk 1959, in relation to the supply of reagents, was causing any difficulties and Mr Coulthard reported that this was not causing problems and that it was possible that the risk would be reduced when next reviewed.

In relation to Safe Staffing (risk 2009), Mr Moore asked if the safe staffing legislation was still being monitored by Scottish Government, and Mr E Docherty reported that the monitoring arrangements had been paused, but the legislation was still extant. Mr Moore added that he was pleased to see that the risk around clinical waste (1702) had been reduced in the light of no significant service impact.

Mrs Mahal referred to risk 1982, and asked for an update on the site lease at 160 Dundee St, Edinburgh. Mrs Sandilands reported that the Personal Independence Payments contract was being discussed with Scottish Government, as this was due to end in July 2021, and the experience to date had led to a review of the estate used, as more contacts had been via telephone, rather than face to face assessments, and this reduced the reliance on the estate required. Mr Lauder indicated that the Board were actively looking for another tenant to take over the lease at Dundee St, Edinburgh after providing notice to quit. It was however noted that the notice was not provided within the break period so the Board would continue to maintain the lease in the meantime. Mitigation in terms of the financial impact was in place. It was noted that a full report on the contract extension negotiations (and lease arrangements) would be provided to the Board in due course.

In terms of remobilisation, Ms Knox reported that performance management arrangements were being put back in place for the Acute Division, and both Health & Social Care Partnerships.

THE BOARD:

1. Noted the summary of closed, de-escalated, new risks and significant material changes to the Corporate Risk Register;
2. Endorsed of the NHS Lanarkshire Corporate Risk Profile over time; with the number of risks plotted by likelihood x impact, including the increased levels of tolerance;
3. Noted the very high graded risks across NHS Lanarkshire;
4. Noted the very high graded risks through operational units, business critical programmes of work/redesign, including the very high graded risks on the Monklands Business Continuity Risk Register;
5. Noted the Corporate Risk Register, accurate as at 22nd March 2021;
6. Noted the COVID-19 incident specific risk profile, risks by category and the very high graded risks accurate as at 22nd March 2021, and that a recent review had reduced the number of very high risks significantly;
7. Noted the updated position for the EU Withdrawal risk register;
8. Noted the risks that had the Board as the assurance committee; and
9. Noted that a full report on the contract extension negotiations (and lease arrangements) would be provided to the Board in May 2021. **C Lauder**

2021/03/68

COVID-19 WHOLE SYSTEM OVERVIEW

The NHS Board received and discussed an update which provided an overview of Covid 19 related activity. Ms Knox introduced the update and invited Directors to highlight particular issues for Board Members. Ms Knox also indicated that some of the issues referred to in the overview were included on the agenda as substantive items.

Dr Osborne commended the efforts of the Board Officers in responding to concerns about the establishment of two supercentres for the delivery of the covid vaccination programme, which was supplemented by 7 local centres and mobile units. It was very pleasing to note that the changes made in the delivery of the vaccine in the second phase of the delivery programme had resulted in significant number of citizens being vaccinated very quickly and that concerns about transport and access were being addressed.

THE BOARD:

1. Noted the Covid Whole System update.

2021/03/69

COVID VACCINATION PLAN - UPDATE

The NHS Board received and noted a report from Dr Russell which provided an update on the vaccination delivery programme.

Dr Russell attended to provide Board Members with a PowerPoint presentation, which outlined how the Vaccination Programme had performed to date, and how the next phase of mass vaccination was being rolled out.

Dr Russell reported that in the past month NHS Lanarkshire had moved the primary appointing locations to its two new supercentres, which together can accommodate up to 7,000 patients per day. This had enabled NHS Lanarkshire to be among the first boards in Scotland to have offered all patients in Cohorts 1-9 an appointment, by 28 March 2021, over two weeks ahead of Scottish Government's mid-April deadline. At the time of writing over 290,000 vaccinations had been given in Lanarkshire and just over 50% of the adult population had been vaccinated

Mrs Moore asked if the Did Not Attend (DNA) rate had been impacted by recent adverse publicity around the Astra Zeneca Vaccine and Dr Russell stated that there has been a slight increase in DNA rate since the move to the supercentres, with an average of about 12% of patients not attending their appointment each day. This was an increase from 10% under the previous model, but also coincided with a Scotland-wide rise in DNA rates which are at the same level. Dr Russell stated that the adverse publicity surrounding the AstraZeneca Vaccine may have contributed to this rise. Dr Russell added that all patients who do not attend are followed up to encourage them to do so and provided with another appointment.

Mr Campbell asked Dr Russell about the main risk to the programme around supply and being able to deliver a first dose to all adults by the end of June 2021. Dr Russell stated that the supply of the vaccines was the limiting factor, but that current plans would see that target being met. He added that if additional supplies were to be provided there was sufficiently flexibility in our programme to accelerate the delivery of vaccines, and to exceed the target.

Dr Thomson asked if the on call commitments were continuing to be onerous and if there were any plans to support staff who were on-call. Dr Russell stated that the frequency of on call contacts was diminishing over time as systems and processes were established, and that it was hoped to include the vaccination centres in the business as usual on call system.

Mr Boyle asked if there was any guidance to be issued to family members of immunocompromised patients, and Dr Russell stated that the feasibility of using the Carers Portal was being looked into.

Mrs Sandilands highlighted that many of the staff who had been seconded to work in the vaccination programme were returning to their substantive posts as permanent staff were being appointed to the programme.

Councillor Kelly asked if citizens over 70 years old, who had attended local centres for their first dose, were being offered a local appointment again, and Dr Russell confirmed that this was the case.

In response to Dr Osborne on the sustainability of delivery going forward, Dr Russell stated that attention was now turning to the flu programme and the feasibility of offering a Covid booster vaccination at the same time as the flu campaign. Mrs Knox indicated that the Corporate Management Team would begin looking at scenarios and feasibility plans.

In relation to venues, Dr Russell also highlighted that many of these had been provided by the Local Authorities and in time these will need to return to their former use, which meant that the Board would need to look to having alternative venues in the near future.

Mrs Mahal thanked Dr Russell and his team for all of their efforts in delivering the programme at pace, and being so adaptable and patient centred in their approach. It was noted that the Board was ahead of trajectory and that all of the risks which may emerge were well understood, being addressed and actively mitigated with future scenario planning taking place.

THE BOARD:

1. Noted the Vaccination Programme update;
2. Noted that the delivery model would need to continue to be flexible and adaptable.

2021/03/70

TEST AND PROTECT UPDATE

The NHS Board received and noted an update on the Test and Protect service, from Mr G Docherty.

Mr G Docherty highlighted the significant and rapid recruitment of a range of staff to support Test and Protect and the paper set out how this had been achieved. The paper also provided an overview of activity and epidemiology since September 2020.

It was noted that to date the service had approximately 38,000 case records contact traced on the case management system (CMS). Overall the trend of cases had been steadily falling, but recent evidence shows a levelling off of this deceleration of case numbers.

In relation to case interview completion rates inside 24 hours of notification, it was noted this was 96% to 18 March 2021, and that all investigations were completed in same period in 93% of all cases.

Mr G Docherty cautioned that there were significant challenges ahead as lockdown eased and it was critical that the Test & Protect Service was able to collect information on transmission of infection to keep incidence low. In particular, Mr G Docherty highlighted that there had been significant rise in the infection rates in under 15 year olds.

Mr Boyle asked if the Board was engaged in a bespoke communications effort to target this population. Mr Brown indicated that Scottish Government were targeting this age group in social media campaigns, but by the nature of the targeting this would not be visible to the wider population.

THE BOARD:

1. Noted the development in service capacity since September 2020; and
2. Noted the key performance data up to 22nd March 2021.

2021/03/71

CARE HOMES – UPDATE

The NHS Board received a paper which provided an update on the support being provided to Care Homes in NHS Lanarkshire. Mr E Docherty took Board Members through the paper in detail.

It was noted that the oversight of Care Homes was likely to be extended to beyond June 2021 and further guidance from Scottish Government was awaited.

The paper stated that there were 2 Care Homes in Lanarkshire with on-going COVID-19 outbreaks This reflected the reducing community prevalence across our localities alongside the completion of the second dose of the vaccination schedule for care home residents and staff.

Mr E Docherty also highlighted that the second cohort of supportive visits commenced in February 2021, this is a collaborative visit with Social Work, IPC and Care Home assurance, and it was anticipated that these visits will be completed by mid-June 2021.

In relation to cleaning products, Mr E Docherty reported that during the supportive visits it had proven to be a challenge to identify appropriate cleaning products, which had been escalated via national meeting requesting guidance. The National Infection Prevention Control Manual (NIPCM) for care homes was currently in the final draft and included a national cleaning specification specific to care homes. The date for launching had yet to be confirmed.

Mrs Lees asked if the role of the Care Inspectorate was being changed in light of the likely extension of the oversight role of the Executive Director of Nursing. Mr E Docherty confirmed that the Care Inspectorate would retain overall responsibility for the safety and quality of care in Care Homes, and any concerns that the Board had would be escalated to them.

Ms McDonald asked if funding would be allocated to support the extension of the oversight beyond June 2021 and Mr E Docherty reported that this was

anticipated but had not yet been confirmed. Mrs Morris stated that the team should be supported if the Board was expected to continue to provide this level of oversight.

Mr Boyle asked if there had been any consideration of the longer term support required for Care Homes beyond March 2022 and Mr Docherty confirmed that this was being considered by Scottish Government and Scottish Executive Nurse Directors. Mr E Docherty stated that this had been covered in the Independent Report on Adult Social care (known as the Feeley Report) but as yet the Scottish Government had not confirmed with Boards how the recommendations were to be taken forward. Mrs Mahal indicated that the potential implications of the recommendations within the report would be the subject of a Board Briefing Session in due course.

In relation to visiting, Dr Osborne asked if this was likely to be changed soon, and Mr G Docherty reported that this was being closely monitored. Much depended on the community prevalence and the absence of local outbreaks.

THE BOARD:

1. The Board derived assurance from the report and noted that the appropriate support is being provided to Care Homes.

2021/03/72

STANDING FINANCIAL INSTRUCTIONS AND SCHEME OF DELEGATION

The NHS Board received a paper which summarised changes required to the Standing Financial Instructions (SFIs) and the Scheme of Delegation in line with the policy review date of April 2021. The Board was requested to give final approval to the revisions made.

Mrs Ace reported that the changes were required to reflect current practice, to tidy up language or update titles of post holders and that the changes had also been discussed with the Audit Committee at their meeting on 2 March 2021.

It was also noted that the Corporate Management Team had been consulted about the changes required.

THE BOARD:

1. Approved the changes to the Standing Financial Instructions and the Scheme of Delegation as set out in the paper.

2021/03/73

TENDER OUTCOME REPORT – PRINCIPAL SUPPLY PARTNER

The NHS Board received a report which sought approval of the award of the Principal Supply Chain Partner, Lanarkshire Projects 2021 – 2026 contract to John Graham Construction Ltd following a tender exercise.

The tender exercise and the outcome was described in full in the report.

THE BOARD:

1. Noted the outcome of the tender exercise; and
2. Approved the award of the contract to John Graham Construction Ltd.

2021/03/74

MONKLANDS REPLACEMENT PROJECT

The NHS Board received a report from Mr Lauder which provided Board Members with an update on how revised governance arrangements were being taken forward in discussion with members of the Monklands Replacement Oversight Board and the Stakeholder Engagement Group, and sought agreement to hold a Development Session on 28 April 2021 (after the Board meeting) on the development of an Outline Business Case.

Mr Lauder reported that the Outline Business Case would be submitted to Scottish Government at the end of 2021 and that the governance arrangements that had been in place to date needed to be reviewed to ensure that these were fit for purpose in developing the Outline Business Case.

It was noted that a series of proposals would be presented to the Board in April on the governance arrangements to support this next phase of activity, after discussion with members of the Monklands Replacement Oversight Board and the Stakeholder Engagement Group.

Dr Thomson agreed that it was timely to reflect on the governance arrangements that had served the Board well in the selection of a preferred site, and was pleased to note that the views of key stakeholders would be taken on board in doing so.

Dr Osborne reflected that it was the responsibility of all Board Members to ensure that there was oversight of the process, and that the Outline Business Case was robust.

THE BOARD:

1. Noted that discussions will be taken forward with members of the Monklands Replacement Oversight Board and the Stakeholder Engagement Group on the shape of future governance arrangements for the development of the Outline Business Case; and
2. Agreed to hold a Development Session after the Board meeting on 28 April 2021, to take the opportunity to fully describe the OBC process and to work through the key sections of this documentation in advance of each element of the OBC being considered later this year.

2021/03/75

GOVERNANCE ARRANGEMENTS

The NHS Board received a copy of a letter from the Cabinet Secretary dated 22 March 2021 to all NHS Boards to confirm that NHS Scotland will remain on an emergency footing until at least 30 June 2021.

THE BOARD:

1. Noted the confirmation that NHS Scotland will remain on an emergency footing until at least 30 June 2021.

2021/03/76

INFECTION CONTROL REPORT

The NHS Board received two reports on Infection Prevention and Control from Mr E Docherty. The first an update on NHS Lanarkshire performance against corporate and national AOP standards for SAB, CDI and ECB up to and including February 2021. The second on the Infection Prevention and Control response to COVID-19, and associated nosocomial transmission in NHS Lanarkshire and across Scotland.

In relation to the report on corporate and national AOP standards for SAB, CDI and ECB, Mr E Docherty highlighted that the data was unvalidated, and used as management information locally, but in view of the time lag in being able to present validated data, it was being shared with the Board to enhance assurance and scrutiny.

In relation to the challenges in achieving full compliance against Hand Hygiene targets, Mr E Docherty stated that although the Board was not an outlier nationally, and the data was showing that the system was stable and in control, it was being followed up as a matter of priority. The detailed actions being taken forward were discussed at the 11 March 2021 Healthcare Quality Improvement & Assurance Committee.

In relation to the COVID report, Mr E Docherty highlighted the significant work undertaken to investigate an increase in Covid cases at University Hospital Wishaw and referred to the detailed presentation provided at the Healthcare Quality Assurance & Improvement Committee on 11 March 2021. Dr Thomson referred to the report already provided as part of the Exception Report from the Committee, and assured Board Members that this was being addressed thoroughly by the Committee, and that a final report will be provided at the May 2021 Committee meeting.

In relation to infection rates in under 16's, Mr Campbell asked if data was available, and Mr E Docherty stated that this was, and undertook to provide this in the next update.

THE BOARD:

1. Noted the reports;
2. Noted that the monitoring of actions to improve hand Hygiene compliance was being addressed by the Healthcare Quality Assurance & Improvement Committee;
3. Confirmed that the reports provided sufficient assurance around Infection Prevention and Control in relation to performance against corporate and national AOP standards for SAB, CDI and ECB and COVID-19; and
4. Noted that data on infection rates in under 16's, would be provided **E Docherty** in the next report.

2021/03/77

ACTIVE GOVERNANCE PILOT UPDATE

The NHS Board received an update on the Active Governance pilot and noted the development of an Action Plan following on from the Active Governance development session on 3rd February 2021.

The paper reminded Board Members of the Active Governance approach which was being progressed by the NHS Scotland Corporate Governance Steering Group on behalf of the Cabinet Secretary for Health and Sport and the NHS Scotland Chairs Group.

Mrs Mahal commended the development of the Action Plan but stressed that the delivery of the proposals within the Action Plan were dependent on staff being able to devote time and effort to this, and will depend on how the Covid pandemic response is being managed.

Dr Osborne supported this important caveat and indicated that Governance Committee Leads and Committee Chairs should also be involved in the development of initiatives to support Active Governance. Mr Lauder stated that a wide range of individuals who provide data and information to Committees and the Board will be involved in the next phase of the work, including Committee Leads and Chairs.

Mrs Mahal also commented that not all Executive Directors were able to attend the development session on 3 February 2021 due to Covid pressures, and they needed to be brought up to speed.

THE BOARD:

1. Noted the development of an action plan following on from the Active Governance development session on 3 February 2021;
2. Agreed to receive further progress reports on the Active Governance NHS Lanarkshire pilot project at a future date; and
3. Noted that the development of the 2021/22 Corporate Objectives is described in the separate Performance Management paper on the agenda.

2021/03/78

WHISTLEBLOWING UPDATE

The NHS Board received and noted an update on the implementation of the soft launch of the new national Whistleblowing Standards on 1 April 2021 from Mrs Sandilands.

The paper and the action plan provided Board Members with assurance that the launch was being appropriately implemented in NHS Lanarkshire and also highlighted areas where further work is required.

Mrs Mahal invited Ms L McDonald, as the Board's Whistleblowing Champion to introduce the paper. At the outset Ms McDonald asked that the efforts of Mrs Ruth Hibbert be acknowledged as Ruth and her team had put together a very comprehensive implementation plan for the soft launch on 1 April 2021.

Mrs Sandilands stated that the Board will receive a quarterly report on cases and activity, and she also highlighted the very positive approach adopted by staff side representatives who worked closely with Board HR staff to develop the implementation plan.

Mrs Mahal thanked Ms McDonald for leading on this important initiative, and also acknowledged the significant efforts of Mrs Hibbert and her team. She advised the Board that the Short Life Working Group she was chairing was overseeing the implementation of the new Standards. It was however important to see the Whistleblowing Standards in the context of the Board's overall drive to improve workplace culture, promote openness and transparency, and many of the very positive changes in delegated decision making brought about by Covid should be retained in order to continue to empower staff.

THE BOARD:

1. Was assured that the launch was being appropriately implemented in NHS Lanarkshire and noted how the Standards were being implemented; and
2. Noted that the Board will receive a quarterly report on cases and activity.

2021/03/79

QUALITY REPORT

The NHS Board received and noted the update on the Lanarkshire Quality Approach and on progress with quality initiatives across NHS Lanarkshire. Dr Findlay took Members through the paper and highlighted areas of particular interest.

Mrs Morris commented on the very positive progress made around HSMR, Dr Findlay agreed and highlighted that University Hospital Monklands and University Hospital Wishaw were both within normal limits. University Hospital Hairmyres was below the lower control limit by between 2 and 3 standard deviations from the Scottish average.

Mr Moore asked about the 23 Best Start recommendations. Mr E Docherty reported that the Board had so far completed 7 recommendations with the remaining 16 on track for completion by 2022. Mr E Docherty indicated that the Oversight Group that had been stood down during the pandemic was being re-established and were meeting in the next few weeks.

THE BOARD:

1. Noted the range of work throughout NHS Lanarkshire to improve the quality and safety of care and services;
2. Endorsed the governance approach to this work and in particular the assurance being provided by the Healthcare Quality Assurance and Improvement Committee; and
3. Supported the ongoing development of the Lanarkshire Quality Approach.

2021/03/80

FINANCIAL PLAN 2021-2022

The NHS Board received a paper, from Mrs Ace, which outlined the financial plan for 2021/2022.

The paper set out the impact of expected inflationary pressures and developments on the Board's framework of authorised service budgets. It represented a baseline position from which the financial impact of any service changes would be evaluated.

It was noted that as the costs of the historic services exceed the funding available an efficiency programme would be needed to fill the gap.

In addition, significant elements of the response to the Covid 19 pandemic were still in place and these were also described in the paper. It had been assumed these would be separately funded.

The capital plan for 2021/22 was also presented for outline approval and agreement to proceed on certain elements.

Mrs Ace emphasised that Board briefing sessions in February and March 2021 had allowed discussion on the planning assumptions behind the paper.

Links with the IJBs' Chief Finance Officer had been made in developing the planning assumptions for the health element of the IJB budgets. The Board's Capital Investment Group had also reviewed the draft capital plan in March 2021.

Mrs Mahal welcomed the Plan and acknowledged that there were still a range of unknown factors in relation to Covid, which would inevitably impact on some of the assumptions made in the plan. It was also acknowledged that there was still a significant degree of uncertainty and complexity to forecasting future financial pressures.

Mrs Mahal also thanked Mrs Ace for providing Board Members with the opportunity to discuss the draft Plan in detail at briefing sessions held in February and March 2021.

THE BOARD:

1. Approved the financial framework, noting the risks and uncertainties.

2021/03/81

FINANCIAL REPORT

The NHS Board received a paper, from Mrs Ace, which outlined the financial position to 28 February 2021.

Mrs Ace provided a detailed overview of the paper.

It was noted that the Board's original 2020/21 financial plan, prepared prior to the Covid-19 emergency response, predicted cost growth would exceed the allocation uplift by £29.828m. Savings would be needed to bridge this gap, of which £10.030m had still to be identified by March 2020.

Mrs Ace highlighted that the Board moved into emergency response mode on 2 March 2020. From the outset, expenditure patterns varied from the business as usual financial plan. Lanarkshire had incurred an estimated £56.441m of expenditure to date, directly linked to the Covid-19 response. As services adapted and developments previously anticipated in specialist services and high cost drugs inevitably moved more slowly, this created part of the unfunded gap in the original plan, but these costs had not materialised to the full extent. So although the financial sustainability programme was suspended in March 2020 and there had been limited ability to make inroads into the original £10.030m gap, the gap itself had narrowed in 2020/21. The net impact of these three factors was that the Board should be able to achieve breakeven.

Based on this at the end of February 2021 the Board was reporting an underlying £1.720m under spend which is £2.192m better than the financial plan year to date trajectory.

Mrs Mahal commended the Director of Finance and her team for their significant efforts in tracking and accounting for additional covid expenditure and for managing the Boards financial and capital funds to be able to report, subject to audit, that the Board had, again, met all its financial targets.

THE BOARD:

1. Noted the financial report for the period 28 February 2021.

2021/03/82

PERFORMANCE MANAGEMENT UPDATE

The NHS Board received a paper from Mr Lauder which asked the Board to note that the draft AOP for 2020/21 would not be finalised, and that there would be no AOP for 2021/22. The 2021/22 AOP will be replaced with the Remobilisation Plan (RMP3), with further information awaited from the Scottish Government in relation to 2021/22 priorities and specific targets for NHSScotland.

In addition, the Board was asked to note the Quarter 3 Performance Report which described progress against the draft 2020/21 Annual Operational Plan (AOP) Targets and Locally Agreed Standards.

It was noted that the Quarterly Performance Exception Reporting system had been paused, but that key performance indicators were being addressed through the Board, those Governance Committees that were able to meet under the emergency arrangements, and the Corporate Management Team.

Mr Lauder added that the Corporate Management Team were discussing Corporate Objectives in the context of uncertainty around the AOP and the covid pandemic response, and that a draft set of Corporate Objectives would be provided to the Board in May 2021 to enable the Board to approve the Board's Strategic Aims.

THE BOARD:

1. Noted that the draft AOP for 2020/21 would not be finalised, and that there would be no AOP for 2021/22;

2. Noted that the AOP for 2021/22 would be replaced with the Remobilisation Plan (RMP3);
3. Noted that information was awaited from the Scottish Government in relation to priorities and specific targets for 2021/22 for NHSScotland. This would inform the development of the 2021/22 Corporate Objectives;
4. Noted that development of the 2021/22 Corporate Objectives discussions were ongoing;
5. Noted the impact of “Active Governance” on future reporting;
6. Noted the impact on Governance Committee roles/focus as a result of the ongoing changes to corporate governance arrangements in response to the global pandemic;
7. Noted the Quarterly Performance Exception Reporting system had been paused, but that key performance indicators were being addressed through the Board, those Governance Committees that were able to meet under the emergency arrangements, and the Corporate Management Team; and
8. Noted that the Quarterly Performance Report (Q4) will be presented at the June 2021 Board meeting.

2021/03/83

PERFORMANCE UPDATE

The NHS Board received a paper from Mrs Park, Mr McGuffie and Mrs de Souza on key performance indicators.

Mr Coulthard attended the meeting on behalf of Mrs Park and took Board Members through the key acute performance indicators, highlighting the increases in attendances at Emergency Departments in March 2021, the improvement in meeting the 4-hour target in March 2021, and the increased theatre capacity which was being established as the Hospitals move into recovery. He assured Members that discussions were underway with the Scottish Ambulance Service in response to issues. It was noted that these performance indicators and other significant service issues, had been discussed at the Acute Governance Committee held on 24 March 2021.

Mr McGuffie highlighted the additional funding that Scottish Government had announced recently to support Child and Adolescent Mental Health Services and Psychological Therapies, the performance in these areas and the improvements being sustained in reducing delayed discharges. He also provided an update on Speech and Language Therapy services and the actions being taken to support waiting times.

Mrs de Souza also highlighted the improvements being sustained in reducing delayed discharges, and referenced the efforts being made to improve Physiotherapy Service waiting times. A separate appendix to the report detailed the performance recovery actions in place.

In relation to the redesign of urgent care and patients who self-present at Emergency Departments, Mr Boyle asked if the information on the Board's website could be reviewed as it was not as clear as it might be about what patients should do before self-presenting.

Mrs Mahal also noted that there was an intention to restart the Population Health, Primary Care and Community Services Committee which would take oversight of the performance of primary care/community services.

THE BOARD:

1. Noted the content of the performance report; and
2. Noted that Mr Brown would review the presentation of information on the website

C Brown

2021/03/84

ROBOTIC ASSISTED SURGERY

The NHS Board received a paper from Mr Cannon inviting the NHS Board to homologate the decision made by Board Members following discussion at the Board Briefing Session on 9 March 2021 in relation to the order of a Surgical Robot, that will be located, initially, at the Golden Jubilee National Hospital.

Mr Cannon reminded Board Members that, at the Board Briefing Session on 9 March 2021, Board Members were asked to consider making a decision on the order of robotic surgical equipment, as this decision could not wait until the formal Board meeting at the end of March 2021. The order had to be confirmed by 11 March 2021 in order for the equipment to be delivered, and paid for, in the current financial year.

Board Members took the opportunity at the Briefing Session to ask a range of detailed questions about the clinical benefits of the development of robotic surgery, the financial impact, and the timescales involved. Dr Burns highlighted not only the clinical benefits but also the significant reputational benefits in being able to attract clinical staff to a Board that had invested in this surgical technology and conversely, significant risks of not being able to offer this resource. It was noted that the local clinical community were supportive of moving towards robotic assisted surgery.

Mrs Ace provided reassurance to the Board that the ongoing financial impact could be managed by the Board within existing resources by use of an infrastructure fund to support these revenue costs over several years.

At the Briefing Session Board Members were supportive of the request from the Golden Jubilee National Hospital (which was followed up by formal approval by Board Members by email), and the Board Chief Executive was asked to confirm that NHS Lanarkshire agreed to the arrangements (including accepting revenue costs) as set out in the paper, to allow the Golden Jubilee National Hospital to proceed to place the order to purchase the robotic equipment.

THE BOARD:

1. Formally homologated the decision taken following the Board Briefing Session on 9 March 2021, to ask the Golden Jubilee National Hospital to place the order for the Robotic equipment.

2021/03/85

BIODIVERSITY DUTIES REPORT 2018-2021

The NHS Board received a paper from Mr Lauder which highlighted progress made in the period since January 2018, when the last report was agreed by the Board, and sought approval for the submission of the 2018-2020 report to Scottish Government Biodiversity Team.

Mr Lauder reminded Board Members that the Nature Conservation (Scotland) Act 2004, stated that all public bodies were required to further the conservation of biodiversity when carrying out their responsibilities. Following an amendment in the Wildlife and Natural Environment (Scotland) Act 2011 public bodies were required to publish and make publically available every three years a report on actions they have taken to meet their biodiversity duty. NHS Lanarkshire's previous report was published in January 2018 following approval by the Board.

Mr Lauder stated that NHS Lanarkshire had a long running Sustainability & Environment Group, chaired by the Board's Director of Planning, Property & Performance, and who is also the Board's Sustainability Champion. The Group is responsible for delivery of the various Chief Executive Letters (CEL) and acts as a reference group for other relevant national mandatory and statutory legislation, such as CEL 2 (2012) "A Policy on Sustainable Development for NHSScotland 2012". It was also noted that the report complemented the work of the Board in relation to the Sustainability Assessment Toolkit.

The Group is responsible for overseeing and co-ordinating risk management for strategic sustainability planning, climate change adaptation, biodiversity and service improvement across all NHS Lanarkshire Services, and produces reports on the Board's energy performance and carbon emissions to meet Scottish Government requirements around annual climate change and sustainability reporting.

Mr Lauder also referred to the forthcoming COP26 (2021 United Nations Climate Change Conference) meeting in Glasgow in November 2021 and the opportunities that this may present in showcasing the efforts of NHS Lanarkshire to promote sustainability and biodiversity.

Mr Lauder also stated that the sustainability agenda would be firmly rooted in the refreshed Healthcare Strategy, which was being undertaken over the coming months.

Mr Moore welcomed the report and the significant efforts made by Board Officers in this area, and linked these efforts to the Realistic Medicine agenda.

Mrs McDonald also welcomed the report and asked if social prescribing could be take on board by the Sustainability & Environment Group.

Mrs Mahal asked for clarity on the reporting arrangements of the Sustainability Group and that this be confirmed and added to the appropriate Governance work plan.

THE BOARD:

1. Approved the content of the report which will be sent to Scottish Government Biodiversity Team; and
2. Asked for clarity on the governance reporting of this work and that it be added to the workplan of the Board/Performance Planning and Resources Committee

C Lauder

2021/03/86

HOSPITAL AT HOME UPDATE

The NHS Board received a paper which set out the background to the establishment of the Hospital at Home service, and how this had been developing in Lanarkshire.

It was also noted that at the Annual Review in December 2020 the Cabinet Secretary had asked that all Board Members be kept updated on Hospital at Home developments.

Mr McGuffie took Members through the paper in detail highlighting the changes made in the evolution of the service, and in particular drawing attention to the visit in February 2019, by the Cabinet Minister for Health & Sport, to the team in NHS Lanarkshire to observe the functions and service provision of the team. She complimented Lanarkshire on its success and its status as a leading Board in Scotland for its service. Later in that year, the Cabinet Secretary announced a national initiative whereby the Scottish Government pledged £1m from the 2020/21 budget to ensure all Scottish Health Boards could establish a functioning Hospital at Home service.

Mr McGuffie also highlighted the existing model and how the service had adapted to the challenges brought about as a result of dealing with the Covid pandemic, and future developments.

Mr Boyle thanked Mr McGuffie for his overview of the paper and the very positive contribution the service had made in particular in supporting patients being cared for in their own homes, and in responding to the pandemic. He asked if there was any work on patient outcomes that would be helpful in assessing the success of the service, and Mr McGuffie stated he would include this in the next update.

Dr Osbourne asked if this was a service that was accessible throughout Lanarkshire and Mr McGuffie reported that it was available in all parts, except Clydesdale. He added that a short life working group was looking at the final model to be adopted for NHS Lanarkshire and an update on their deliberations would be included in the next update in September 2021.

Mrs Mahal asked for clarification around accommodation issues, and Mr McGuffie stated that there were pressures on all three acute hospital sites, as services were being remobilised, but that this issue was being addressed positively. She reiterated the need to resolve the issue about it not being a pan Lanarkshire service.

THE BOARD:

1. Noted the progress made in developing the service to its current status and towards the five HIS standards;
2. Noted the plans to reconvene the short life working group to agree the future strategic direction of the service; and
3. Requested an update back to the Board in September 2021.

2021/03/87

CHILDREN'S SERVICES PLANS NORTH AND SOUTH LANARKSHIRE

The NHS Board received a paper, from Mrs Queen, which provided an update on the development of North and South Lanarkshire's Children's Services Plans (CSP's) 2021-2023. Mrs Queen also introduced Mrs Boxall who had supported the development of the South Children's Plan.

Mrs Queen reminded Board Members that the Children and Young People (Scotland) Act 2014, requires NHS Boards and Local Authorities to work together to produce and update a Children's Services Plan that sets out how services are delivered and support for children, young people and families (CYP&F).

Both CSP's agreed to roll over their current plans for an interim year to allow the desired level of participation and engagement of all partners, including service users, and inform the final versions of the new Children's Services Plans. Plans were revised to incorporate Covid-19 response and recovery, as well as the United Nations Convention for the Rights of Children (UNCRC) and will run from April 2021 - March 2023.

It was also noted that these reports will be a key part of the Health Inequalities Development Event that the Board will be holding, in conjunction with a range of statutory and third sector partners, once the pandemic allows for time to develop the event.

Mr McGuffie and Mrs de Souza both made introductory remarks about the reports, which it was noted were still to be finalised and printed.

Mr Moore commented that addressing Child Obesity seemed to have more prominence in the South report compared to the North and asked for assurances around information sharing.

THE BOARD:

1. Noted the development of the North and South Children's Services Plans; and
2. Noted that these will for a key part of the Health Inequalities Development Event to be held shortly.

2021/03/88

CALENDAR OF DATES

The NHS Board received and noted an updated calendar of Committee dates for 2021.

2021/03/89

ANY OTHER COMPETENT BUSINESS

There were no items of business raised.

2021/03/90

RISK

The NHS Board did not consider that any other new emerging risks should be considered for addition to the Corporate Risk Register, or that any existing risks needed to be re-assessed following discussion at this meeting.

2021/03/91

DATE OF NEXT MEETING

Wednesday 28th April 2021, 9.30am - 1.00pm.

To be followed by a Board Development Session on the Monklands Outline Business Case - requirements and milestones, from 2.00pm - 4.00pm

DRAFT