Lanarkshire NHS Board Kirklands Hospital

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Minute of Meeting of the Lanarkshire NHS Board held on Wednesday 30 August at 9.30am at the Ken Corsar Medical Education Centre, Kirklands, and by Microsoft Teams

CHAIR: Mr M Hill, Non-Executive Director / Board Chair

PRESENT: Mrs L Ace, Director of Finance

Mr A Boyle, Non-Executive Director Cllr M Coyle, Non-Executive Director Mr P Couser, Non-Executive Director Mr N Dar, Non-Executive Director Dr C Deighan, Medical Director Mr E Docherty, Nurse Director Professor J Gardner, Chief Executive Mrs M Lees, Chair, Area Clinical Forum Cllr E Logan, Non-Executive Director Mr C Lee, Non-Executive Director

Mr B Moore, Non-Executive Director Mr J Muir, Non-Executive Director Ms L McDonald, Non-Executive Director

Professor J Pravinkumar, Director of Public Health

Mr D Reid, Non-Executive Director

Dr L Thomson, Non-Executive Director / Board Vice Chair

Mrs S White, Non-Executive Director

IN

ATTENDANCE: Mr C Brown, Director of Communications

Mr P Cannon, Board Secretary

Ms C Hope, Corporate Risk Manager Mrs J Jones, Director of Human Resources

Mr C Lauder, Director of Planning, Property & Performance

Mr R McGuffie, Chief Officer, North Lanarkshire Health & Social Care Partnership

Mrs J Park, Director of Acute Services

Mr S Sengupta, Director, South Lanarkshire Health & Social Care Partnership

Mr Donald Wilson, Director of Information & Digital Technology

APOLOGIES: None

B/2023/165 **WELCOME** 

Mr Hill welcomed colleagues to the meeting. Mr Hill also welcomed members of the public and staff who were observing the meeting and he confirmed that a recording of the meeting would be available on the Board's

website to view over the next week.

B/2023/166 **DECLARATION OF INTERESTS** 

There were no declarations of interest.

#### B/2023/167 **MINUTES**

The minutes of the meeting of the NHS Board held on 29 May 2023 were submitted for approval subject to the sentence on page 5 "... a fair share..." reflecting that the reference was to NHS Lanarkshire.

#### **THE BOARD:**

1. Approved the minutes of the meeting held on 29 May 2023 subject to this amendment.

#### B/2023/168 **MATTERS ARISING**

No issues raised.

#### B/2023/169 **ACTION LOG**

The Action Log was noted.

In relation to the timetable for the Initial Agreement for the National Treatment Centre, Mr Moore asked for an update and Mr Lauder stated that there was no clarity on the timing of the programme going forward, and agreed that this would have an impact on the planned care assumptions made as part of developing Our Health Together.

#### B/2023/170 **CHAIR'S REPORT**

Mr Hill provided a verbal report to the NHS Board.

Mr Hill put on record his thanks to the Permanent Secretary and the Director General, Health & Social Care for taking time to visit University Hospital Monklands in June 2023.

Mr Hill had also participated in a recent Corporate Induction session to welcome new staff to NHS Lanarkshire, and had attended the Project Search awards.

He commended the work of the Monklands Replacement Project Team for reaching out schools during the summer recess and inviting 16 students to join the team for a week and participate designing features of the new Hospital.

Mr Hill also referred to a Digital Mind-set workshop he had attended and suggested that this be added to the list of potential Non-Executive Briefing P Cannon topics.

At a recent meeting with the Cabinet Secretary, all Board Chairs were encouraged to consider stigma and mental health and to provide as much focus at Board level to Mental Health as compared to Physical Health.

#### **THE BOARD:**

1. Noted the update from the Board Chair.

### B/2023/171 CHIEF EXECUTIVE'S REPORT

Professor Gardner provided a verbal report to the NHS Board.

It was noted that Professor Gardner had attended events highlighting Modern Apprenticeships, and the Board's Anchor work. It was agreed to share the Anchor update with Board Members at the next Board meeting, after being discussed in detail at the Population Health, Primary Care and Community Services Committee. It was intended to discuss this in greater detail at a Non-Executive Briefing session in the New Year. Professor Gardner had also attended a Breastfeeding Conference, and made visits to each of the Acute Hospital sites since the last meeting, including to see the opening of the Baby Loss Unit at University Hospital Wishaw (UHW). Councillor Logan welcomed the opening of the Unit and provided very positive feedback from local patients.

P Cannon

Professor Gardner highlighted that attendance of the First Minister at the NHS Lanarkshire Ethnic Minority Network event on 27 July 2023, which was very well attended and provide very personal insights from the First Minister.

Professor Gardner referred to the Integrated Performance and Quality Report (IPQR), which was on the agenda at item 19, and thanked Mr Brown and his team for delivering the first IPQR report to the Board.

Professor Gardner also updated Board Members on the support being provided to staff at University Hospital Wishaw following the Scottish Government announcement that Level 3 babies would no longer be treated at UHW and Level 3 services will be concentrated in three centres across Scotland. It was noted that we have asked for further details around timescales and other implementation details, and continued to work closely with Scottish Government on this service change, to better understand the impact on the unit in UHW. Professor Gardner emphasised that services will continue to be provided to neonates, but that the number of babies who may need to be transferred to another unit was still unclear. Mrs Park stated that a local group had been established to look at the detail of the implementation phase to make this transition as smoothly as possible.

Councillor Logan asked about links between the Modern Apprenticeship work being taken forward by the Board and the Care Academy, and Mr McGuffie provided an overview of the depth and reach of the Care Academy, including referencing the co-location of the Chryston Health Centre and School campus.

#### **THE BOARD:**

1. Noted the update from the Board Chief Executive.

#### B/2023/172 GOVERNANCE COMMITTEE MINUTES

A number of Governance Committee minutes were provided and Mr Hill invited Committee Chairs to highlight material items for awareness.

#### STAFF GOVERNANCE COMMITTEE – 5 JUNE 2023 (DRAFT)

Noted.

#### **AUDIT & RISK COMMITTEE – 6 JUNE 2023**

Noted.

# HEALTHCARE QUALITY ASSURANCE & IMPROVEMENT COMMITTEE – 8 JUNE 2023 (DRAFT)

Noted.

### AUDIT & RISK COMMITTEE - 28 JUNE 2023 (DRSAFT)

Noted.

# POPULATION HEALTH, PRIMARY CARE & COMMUNITY SERVICES COMMITTEE – 17 JULY 2023 (DRAFT)

Noted.

# ACUTE GOVERNANCE COMMITTEE - 19 JULY 2023 (DRAFT)

Noted.

#### B/2023/173 CONSENT AGENDA

In order to better organise the business of the meeting, a number of papers that were for information or noting were listed under the Consent agenda section and these were not discussed in detail. These were

- Corporate Objectives Year End Report (2022/23)
- Annual Delivery Plan 2023/2024 final
- Quality Report
- Calendar of Dates 2023
- Workplan 2023

#### B/2023/174

# WHISTLEBLOWING ANNUAL REPORT 2022-2023

Mr Hill suggested that the item on Whistleblowing be taken from the consent agenda section and discussed, in the light of recent national coverage of the important role of raising concerns.

Board Members received and noted the Whistleblowing Annual Report 2022/23, and this was presented by Ms McDonald, Non-Executive Whistleblowing Champion. It was noted that although the three cases investigated last year were not upheld, there was still learning identified and cascaded appropriately.

Ms Jones highlighted that following a review of the executive responsibility for Whistleblowing, it had been agreed that this would transfer on 1 October 2023 from the Director of Human Resources to the Executive Nurse Director, supported by the Board Secretary and Corporate Business Manager.

Dr Thomson asked if the changes to executive responsibility arrangements would be consistent with practice in other NHS Boards post 1 October, and was reassured that this was the case.

Ms McDonald stated that other routes to highlight concerns were regularly reviewed, such as iMatter survey results, to determine if staff feel able to raise concerns.

Ms McDonald also referred to the opportunity to discuss common issues at a forthcoming Speak Up Conference in September 2023, and plans were in place to highlight Whistleblowing as part of Speak Up Week in October 2023.

#### THE BOARD:

- 1. Noted the Whistleblowing Annual Report for 2022/23; and
- 2. Commended the work being taken forward by Ms McDonald and the wider team.

## B/2023/175 <u>INTEGRATED PERFORMANCE & QUALITY REPORT</u>

Board Members received a report which highlighted the circulation of the first Integrated Performance & Quality Report (IPQR).

Mr Lauder emphasised that the IPQR will be the main corporate reporting tool for the NHS Lanarkshire Board, and this was the first of the monthly reports that will be prepared and circulated to all Board Members.

Mr Lauder reminded Board Members that in Spring 2023, it was decided to review how other Boards were addressing reporting performance consistently across all Governance Committees and it was concluded that NHS Lanarkshire needed to replicate processes already well embedded in other Boards, many of which took the form of an Integrated Performance & Quality Report.

In June 2023, Non-Executive Board Members were able to review a first draft template of the NHS Lanarkshire IPQR, drawn up by the Board Secretary as a proof of concept, and welcomed its development.

An Editorial Board was established to take this on to a more robust platform and this was led by the Director of Planning, Property and Performance, Colin Lauder. Co-ordination of the production of the report was passed to the Director of Communications. The Editorial Board has met weekly since the beginning of July and has endorsed this first live version of the IPQR.

The most up to date data available at the point of publishing the document has been the guiding principle for the Editorial Board, and validated data has been used where this is available. However, there are significant time lags in waiting for data to be nationally validated and it was agreed at the Non-Executive briefing in June 2023, and endorsed by the Chief Executive, that management (unvalidated) data could be used as long as this was clearly marked and acknowledged in the report. This is in keeping with the approach adopted by a number of other NHS Boards.

It was noted that the Editorial Board were continuing to refine the publication process to ensure that the report is available as early as possible, and synchronised with the Governance Committee cycle. This may mean that in the case of the remaining Committee dates in 2023, the dates of meetings may not lend themselves to a smooth assurance pathway, but the calendar for 2024 is being reviewed to ensure that Committees can provide that assurance to the Board, as timeously as possible.

The IPQR will replace the 4 separate performance reports previously provided to the Board and PPRC from the Acute Division, and North, and South Health & Social Care Partnerships, and the quarterly Corporate Performance report which provided an overview of the whole system.

Mr Lauder staffed that the intention was to minimise turbulence at the beginning of this process and not introduce significant changes to the contents list of the IPQR for at least the first 6 months. This will allow for processes to be refined, automated wherever possible, and embedded as business as usual. A full review will be undertaken in the early part of 2024 with the intention of making recommendations for changes to be incorporated from 1 April 2024.

Board Members welcomed the IPQR and thanked Mr Lauder and Mr Brown and their teams for producing the first of the monthly IPQRs.

In terms of the issues raised within the IPRQ, Dr Deighan provided an update on the work being taken forward to improve complaints handling key performance indicators, and he stated that this was being overseen in detail by the Healthcare Quality Assurance & Improvement Committee. Similarly, Mr Docherty provided an overview of the review of the various national and local key performance indicators around Hand Hygiene, and the proposed way forward in using one consistent and valid tool to measure compliance. Dr Thomson continued to express her concern and frustration that this standard was not being met. Mr Docherty acknowledged this and by way of assurance stated that NHS Lanarkshire infection rates were stable, and were not an outlier in comparison with other NHS Boards.

Mr Couser offered comments on the IPQR in the context of further developments at a review point, including making more explicit links with the Annual Operating Plan, and population health outcomes. Professor Gardner stated that the indicators within the Population Health section were still under review.

### THE BOARD:

1. Noted the first Integrated Performance & Quality Report and looked forward to its further refinement and embedding in the Governance structure.

#### B/2023/176 **OPERATION FLOW**

Board Members received an update on Operation Flow from Mr Lauder which updated the report to the 31 May 2023 NHS Board meeting and the June Planning, Performance & Resources Committee meeting.

The paper provided an update on developing and implementing FLOW 2, a detailed overview of the work of each of the Task & Finish Groups, and the implementation of winter planning through Operation FLOW.

Mrs Park stated that an appointment had been made to fill a new post, and that Dr McNeish had been appointed as the new Associate Medical Director (Unscheduled Care), and that works were progressing at University Hospital Wishaw to create additional space for Minor Injuries patients in October 2023. It was noted that a visit for Non-Executives will be arranged once the works were complete and the unit operational.

The paper also provided an update on the financial investments made in embedding Operation FLOW 2.

Professor Mr McGuffie and Professor Sengupta updated on delayed discharges in their respective Partnerships, and highlighted that while there were reductions in the weekly overall numbers of patients in delay, and improvements in flow at Acute sites, it was becoming evident that off-site beds were a challenge in maintaining flow.

Mr Boyle asked if there were any plans to gather patient feedback and Mrs Park reported that this was being taken forward, as well as gathering staff feedback and patients who were in the Discharge Lounge.

Mr Moore asked if the work on bed modelling was complete and Mrs Park indicated that this was still being refined, and once complete an update would be brought to a future PPRC meeting.

Professor Gardner indicated that planning was underway to launch FLOW 2 formally at the end of October / early November. It was also reported that colleagues in NHS Tayside were continuing to support local teams in NHS Lanarkshire.

#### THE BOARD:

1. Noted the work being taken forward by the Task & Finish Groups in relation to Operation Flow 2, and the plans in place for a launch of Operation FLOW in the coming months.

#### B/2023/177 FINANCIAL REPORT FOR THE PERIOD TO 31 JULY 2023

Board Members received a report from Mrs Ace detailing the Board's financial position at 31 July 2023 which was noted.

Mrs Ace highlighted that the Board's opening financial plan projected a £68.485m gap between its recurring budget and ongoing expenditure, offset by £11.980m of non-recurring money leaving a £56.505m in year gap to be resolved by efficiencies or other means.

The Board was given permission by SGHSCD to add £5.9m to its original deficit projection to permanently invest in Operation Flow. This took the recurring gap to £74.385m and the in year gap before savings to £62.405m.

The June allocation letter contains £14.933m in additional sustainability funding and £12.312m non-recurring funding for new medicines. Applying

both to the NHS Board position would reduce the forecast in year gap before savings to £35.160m.

In the Annual Operating Plan (AOP) the Board indicated it could find c £22m of in year savings, which based on the original submission, took the forecast in year gap to £34.132m. Factoring in the movements above, delivering these savings would now take the forecast in year gap to £13.160m. However, so far, only £17.042m of potential savings have been identified (with a saving from agency still to be quantified) so the forecast deficit sits higher than SG would expect. Quantifying and delivering agency savings is a key task.

#### **THE BOARD:**

1. Noted the Financial Report for the period to 31 July 2023.

# B/2023/178 **NET ZERO ROUTEMAP**

Board Members received and noted a paper from Jacquie McGeough, Deputy Director Planning, Property and Performance, who highlighted that NHS Assure had commissioned Jacobs to develop the Board's Net Zero Routemap, and we have been working in conjunction with them, ensuring they had access to all the relevant background data and site information required to support their work.

A final draft of the of the Routemap has been provided via NHS Assure which has been reviewed and the content approved. The attached report provided a summary of the key messages contained within the document.

Board Members noted that the content had been reviewed by the Board's Sustainability and Environmental Group with key messages summarised for review by the Board.

Any associated work that resulted from the Net Zero Routemap will be approved through established governance routes which include the Sustainability and Environmental Group, the Capital Investment Group and PPRC.

The report detailed the Boards decarbonisation progress and set out a pathway for us to achieve the Scottish Government target of becoming a Net Zero NHS by 2040. The data reviewed as part of the production of the Routemap dated from 21/22 and is compared against a based year 1990. As part of the work carried out, 3 of our sites were surveyed by Jacobs. These were University Hospital Wishaw, University Hospital Hairmyres and Hunter Health Centre.

The Routemap sets out, in detail, the most economically viable modelled pathway for NHS Lanarkshire to achieve Net Zero operational emissions target by 2040, utilising both established and emergent energy technologies.

Mr Lauder acknowledged the restrictions imposed by finite resources with the NHS Board, and he was very focussed on securing external funding wherever possible.

Mr Hill suggested that more time could be devoted to this important topic in a Non-Executive briefing session in the future.

### **THE BOARD:**

1. Noted the report.

#### B/2023/179 CORPORATE RISK REGISTER

Board Members received and noted a Corporate Risk Register Report from Ms Hope.

Members noted the report (appendix 1) and the Corporate Risk Register in full (Appendix 2) which presented an update to the Corporate Risk Register for the reporting period June – August 2023.

A summary of material changes to the risks within the Corporate Risk Register was noted:

- Six new risks were proposed: 2218 Urgent & Unscheduled Care, 2219 Planned Care, 2220 Junior Doctors Industrial Action, 2221 Non Compliance With Off Framework DL (2023)5, 2222 Nurse Agency Use & 2234 Nursing Home Beds
- ➤ One risk had been escalated: 2230 UHM Fire Safety Waste Receptacles
- Three risks had decreased in score: 2205 Fire Safety Within NHSL,
   2212 Failure to Comply with NHS Sustainability Policy, DL (2021)
   38 & 2213 Ability to Respond to Climate Change
- Two risks had been de-escalated: 2205 Fire Safety Within NHSL
   2073 NHSL Reputation Regarding FAI's
- Two risks had been closed and removed from the Corporate Risk Register: 2125 – Optimal Clinical Outcomes & 2220 – Junior Doctors Industrial Action.

It was noted that a risk around changes in population demographics raised at the last meeting was still under active consideration.

## **THE BOARD:**

1. Noted the summary of significant material changes to the Corporate Risk Register.

# B/2023/180 GOVERNANCE UPDATE

Board Members received the governance update, which highlighted changes to Committee Membership, the Blueprint Self-Assessment and the Annual Review.

Dr Thomson asked that newly appointed Employee Director be consulted on the changes envisaged to the Chair of the Staff Governance Committee.

P Cannon

#### THE BOARD:

1. Noted the governance update.

# B/2023/181 **CALENDAR OF DATES 2023**

Noted.

### B/2023/182 **WORKPLAN 2023**

Noted.

#### B/2023/183 ANY OTHER COMPETENT BUSINESS

Mr Hill indicated that this was the last meeting being attended by Ms Hope before her maternity leave, and all Members wished her well.

## B/2023/184 **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.

# B/2023/185 DATE AND TIME OF NEXT MEETING

Wednesday 20 December 2023 at 9.30am.

# B/2023/186 PRIVATE SESSION

Due to the confidential nature of the discussion the following items were taken in private.

# B/2023/187 MINUTES OF THE PHARMACY PRACTICES COMMITTEE HELD ON 18 JULY 2023

Board Members noted the minutes of the Pharmacy Practices Committee meeting held on 18 July 2023.

# B/2023/188 <u>APPOINTMENT OF MONKLANDS REPLACEMENT PROJECT</u> CONTRACTOR

Board Members were provided with a paper from Mr G Reid, Project Director, Monklands Replacement Project, which sought approval of the MRP Pre-construction services agreement (PCSA) contract procurement process and to agree the appointment of the main contractor.

It was noted that the paper and accompanying documents had been prepared by the Project Director - MRP with input from MRP Procurement Manager and project advisors (financial, legal and technical). The procurement papers had been reviewed and endorsed by both Project Board and Monklands Replacement Committee. Non-Executive Directors had also been briefed at a Non-Executive Briefing session on 16 August 2023 in detail.

#### THE BOARD:

- 1. Endorsed the PCSA procurement process; and
- 2. Approve the appointment of Laing O'Rourke Construction for the Pre-Construction Services Agreement (PCSA) on the MRP.

The meeting ended at 1.30pm