Lanarkshire NHS Board **Kirklands Hospital**

Fallside Road Bothwell G71 8BB

Telephone: 01698 855500 www.nhslanarkshire.scot.nhs.uk



Minute of Meeting of the Lanarkshire NHS Board held on Wednesday 31 May 2023 at 9.30am at Law House, Carluke, and by using Microsoft Teams

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

PRESENT: Mrs L Ace, Director of Finance

> 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 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

Mr R Coulthard, Deputy Director of Acute Services

Ms C Hope, Corporate Risk Manager

Mrs M A Hunter, Staff Side

Mrs J Jones, Director of Human Resources (Designate)

Mr C Lauder, Director of Planning, Property & Performance

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

Mrs A McKechin, Vice Chair, Public Health Scotland (observer)

Mrs J Park, Director of Acute Services

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

APOLOGIES: Mr A Boyle, Non-Executive Director

Mr C Lee, Non-Executive Director Mrs L Macer, Employee Director

B/2023/144 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/2023/145 **DECLARATION OF INTERESTS**

There were no declarations of interest.

B/2023/146 **MINUTES**

The minutes of the meeting of the NHS Board held on 29 March 2023 were submitted for approval subject to reference being added to reflect the discussion around the Director of Public Health Annual Report 2021/22.

THE BOARD:

1. Approved the minutes of the meeting held on 29 March 2023 subject to this update.

B/2023/147 MATTERS ARISING

No issues raised.

B/2023/148 **ACTION LOG**

The Action Log was noted.

In relation to the General Surgery Business Continuity Plan Mr Coulthard stated that the Terms of Reference had been agreed and a report available in mid-September 2023, which would be discussed at the Acute Governance Committee in the first instance.

B/2023/149 CHAIR'S REPORT

Mr Hill provided a verbal report to the NHS Board.

He highlighted that since the last Board meeting he had met with the Cabinet Secretary at a joint meeting with NHS Board Chairs and Chief Executives, and he highlighted that NHS Lanarkshire's Operation FLOW was referenced at the meeting, with North and South Lanarkshire Council leaders, with West of Scotland Regional Chairs, and the Sustainability Champions Network. He highlighted that the Regional meeting of Chairs had a session on AI led by the Centre for Sustainable Development, and he commended this as a potential development session for the Board in due course, linked to the new Hospital. He added that Sustainability Champions Network were advised of the development of a Net Zero Route map.

THE BOARD:

1. Noted the update from the Board Chair.

B/2023/150 CHIEF EXECUTIVE'S REPORT

Professor Gardner provided a verbal report to the NHS Board.

In relation to Podiatry, it was noted that the Podiatry Hub had been launched with an accompanying website. This was highlighted as a significant service development which the staff themselves had identified and delivered and was making a tangible difference in waiting times for patients.

Professor Gardner reported on the meetings held with a variety of staff groups, including most notably Pharmacy.

The relaunch of Operation FLOW was highlighted and would be discussed later on the agenda. Professor Gardner also referenced her attendance at the Parliamentary Health & Sport Committee on 2 May 2023.

It was noted that the Scottish Government Permanent Secretary and NHS Director General will be visiting University Hospital Monklands on 21 June 2023 to hear about the issues with the current infrastructure and learn more about the plans for the new Hospital.

It was noted that a Decision Letter on the continued use Non Agency Framework Nurses was being actioned and will lead to a reduction in the cost of agency nursing overall.

The Integrated Performance & Quality Report was being drafted ready for C Brown discussion at the Non-Executive Briefing session in June 2023.

THE BOARD:

1. Noted the update from the Board Chief Executive.

B/2023/151 GOVERNANCE COMMITTEE MINUTES

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

HEALTHCARE QUALITY ASSURANCE & IMPROVEMENT COMMITTEE – 20 APRIL 2023 (draft)

Noted

<u>ACUTE GOVERNANCE COMMITTEE - 24 MAY 2023 (Exception</u> Report)

Noted.

B/2023/152 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 Governance Code of Conduct (no changes)
- Register of Interests (Approved)
- Committee Annual Reports (For Assurance)

B/2023/153 **PERFORMANCE UPDATES**

Board Members received a series of reports from Mr Sengupta, Mrs Park and Mr McGuffie which provided an overview of key areas of performance in the South Lanarkshire Health & Social Care Partnership, the Acute Division and the North Lanarkshire Health & Social Care Partnership. The main issues were captured in the reports provided.

Mr Sengupta drew Members attention to the published delayed discharge performance for the period and referenced the difficulties social care providers were facing in being sustainable business models which was impacting on delays.

Members asked about the learning coming nationally from Discharge without delay and Mr Sengupta referred to a national Dashboard that was being developed that would allow for more meaningful benchmarking.

Dr Deighan reflected that in terms of benchmarking available now, there were positive performance metrics around bed days lost, which in NHS Lanarkshire had reduced by 20% but increased overall across Scotland by 20% since 2019.

In relation to the Acute Division, Mrs Park highlighted unscheduled care performance and referred to the item later on the agenda on Operation Flow which would detail how this had impacted on performance metrics across the Division.

Mrs Park also referred to the work being taken forward with the National Elective Coordination Unit (NECU) to support national waiting times recovery, and the local administrative validation exercise underway. IT was noted that the local validation process had resulted in 9% of patients deciding not to continue on the waiting list.

In relation to Out Patients, Mrs Park alluded to the focus on Gastroenterology, and the pan Lanarkshire approach being adopted to maximise the use of the workforce and establish a single waiting list for the Board.

Members noted that the TTG over 104 week waiting list was reducing in line with plans in place and that the main focus was Urology patients waiting.

In relation to Diagnostics, it was noted that the Board had secured funding for additional mobile capacity which would be sited at University Hospital Hairmyres.

In relation to cancer performance, the unvalidated data for quarter 1 was above target for 31 days, but still to recover against the 62-day target.

Mrs Park indicated that the Division was focussed on reducing wherever possible the use of Non Framework Agency (NFA) Nursing and a series of checks were in place for authorisation only in agreed circumstances. There were a number of areas such as Peri-Operative staffing where vacancies were high and there was a reliance of Non Framework Agency Nursing to run theatre lists, however the need to reduce to zero the reliance on NFA staff was goal.

In terms of unscheduled care, Mrs Park referred to the Operation FLOW item later on the agenda, but reiterated that the main focus was standardisation and reduction if variation across all three acute hospital sites.

Ms McDonald, as Chair of the Acute Governance Committee, extended an invitation to all Members to attend the next Committee meeting which would be focussed on Planned Care.

Mr Couser asked if NHS was getting a fair share of national support and Mrs park responded by saying that the difficulty was that the share of national support, particularly from the Golden Jubilee National Hospital was always factored into our baseline, and that reduction was undoubtedly having an impact. Mrs Park also referred to 7 day working and referenced the work of Task & Finish Group 4 which was looking at this across the whole system, alongside greater use of the Discharge Lounges to improve early flow, utilising separate minors areas in EDs and greater use of planned date of discharge.

Mrs Park also added that the new minors area at University Hospital Wishaw was anticipated to be ready to handover from the contractor in late July 2023.

Mr McGuffie provided an overview of services hosted by the South Lanarkshire Health & Social Care Partnership. It was noted that delayed discharge performance was improving and he highlighted the positive impact of Home Assessment. He cited that of 740 patients referred for Home Assessment, 60% had no ongoing needs. This demonstrated the value of home assessment and the service was actively recruiting for more staff to expand this support. The ability to completely separate the Reablement Team was also a very welcome development, as it increased resilience in both areas.

In relation to the Speech & Language Therapy Service it was noted that the Population Health, Primary Care and Community Services Committee had discussed this service in detail last week.

In relation to Paediatrics, Mr McGuffie was pleased to be able to report that 2 Consultants had been recruited, to start in the summer.

THE BOARD:

1. Noted the reports.

B/2023/154 IMPROVEMENT UPDATES

OPERATION FLOW

Board Members received an update on Operation Flow from Mr Lauder which updated the report to the April PPRC and the presentation to the NHS Board seminar on 17 May 2023. The paper outlined the revised model and structure to support delivery and implementation of the Operation Flow 2 Project Plan to support stabilisation and improvement up to Summer 2023 in preparation for Winter 2023/24.

It was noted that the approach was to improve effectiveness and efficiency of models of care – developing and standardising pan Lanarkshire models and escalation, define plans to convert non-recurring spend to key substantive roles, and invest in the delivery of Operation FLOW new models of care.

The paper set out the key objectives of each of the Task & Finish Groups, and Mr Lauder took Members through issues around leadership, embedding best practice and focussed on the resources identified at each Emergency Department and Front Door to provide a baseline level of staffing. It was noted that the staffing levels were based on historic non-recurring overspends

within the EDs and front door areas, which amounted to £6.980 million in 22/23. It was proposed to transfer £5m of this non-recurring spend into internal reinvestment in these service areas and recruit into these posts permanently. This was to support the development of a sustainable workforce in NHS Lanarkshire, help maximise the benefits of service improvement and minimise exposure to ongoing agency nursing costs.

Members also noted the rigour with which each Task & Finish Group had set key objectives and measurements to monitor progress.

Professor Gardner stated that each Task & Finish Group had a key role in ensuring that the plans were sufficiently robust and deliverable, and had been stress tested.

Mr Moore referred to a recent Quality Walkround when he observed very positive progress in criteria led discharge.

Mr Brown also added that a range of videos were being filmed this week to promote the relaunch of Operation FLLOW 2.

THE BOARD:

1. Noted the work being taken forward by the Task & Finish Groups in relation to Operation Flow 2, and the resource required to support this.

CANCER - PERFORMANCE & INEQUALITIES

Dr Deighan provided a verbal update and indicated that a further more detailed paper would be presented to the PPRC in June 2023. He referred to the work being sponsored by the Detect Cancer Early Group in establishing baselines, and in particular focussed on the Bowel Cancer Screening, and the data which was now available via Discovery on a quarterly basis.

Professor Pravinkumar added that the impact of smoking and maintaining a healthy weight, both entirely preventable disease factors, were also having an impact on cancer prevalence. It was noted that the Population Health, Primary Care and Community Services Committee would discuss these factors in greater detail at the meeting in July 2023.

J Pravinkumar

THE BOARD:

1. Noted the updates from Dr Deighan and Professor Pravinkumar.

B/2023/155 CORPORATE OBJECTIVES 2023/24

Board Members received a paper from Mr Lauder seeking the Board's approve of the Corporate Objectives for 2023/24.

Mr Laude reminded Members that in 2021/22 the process was paused to consider and reflect on the pressures facing local systems, and for 2022/23 a "paired-down" approach was introduced reflecting remaining uncertainties across the system.

Since that time, a more streamlined approach had been adopted for the development of the 2023/24 Corporate Objectives, with individual workstreams grouped into strategic themes, rather than having a large number of very specific objectives as was the case previously. The detail of specific objectives/deliverables will be realised through the CMT Member's personal objectives, which will be further developed into measurable project/work plans. The content of Corporate Objectives had also been reviewed alongside our ADP requirements to ensure that these are better aligned.

It was noted that progress against Corporate Objectives was monitored twice yearly, at mid-year and at year end. Progress reports will be submitted to the Planning, Performance & Resources Committee. Following approval by the Board, a high level summary of our approach to Corporate Objectives 2023/24 will be on our public website.

Mr Dar asked if Digital featured in the Corporate Objectives and was advised that these were captured within the Chief Executives Objectives and Our Health Together.

THE BOARD:

- 1. Approved the 2023/24 Corporate Objectives; and
- 2. Noted that the 2023/24 Corporate Objectives mid-year and yearend progress reports will be prepared for consideration by the PPRC.

B/2023/156 FINANCIAL REPORT FOR THE PERIOD TO 31 MARCH 2023

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

Mrs Ace highlighted that the key message from the paper was that the Board was reporting that all 3 of its financial targets were met in 2022/23. At the year end the NHS Board had broken even against the Revenue Resource limit (RRL) of £1,569.874m and the Non-Core Revenue Resource Limit of £39.638m. The Board also stayed within its Capital Resource Limit of £33.322m and its cash limit. Mrs Ace added however that these results were subject to audit during May and June of 2023.

THE BOARD:

1. Noted the Financial Report for the period to 31 March 2023 and commended Mrs Ace and her team for delivering all three targets.

B/2023/157 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 March 2023 – May 2023.

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

- Three new risks were proposed: 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 increased in score: 2125 Optimal Clinical Outcomes & 2150 – Ability to Maintain General Medical Service Provision
- ➤ Two risks had decreased in score: 2205 Fire Safety Within NHSL & 2038 - Procurement of New NHS Lanarkshire Labs Managed Service Contract
- > One risk has been closed and removed from the Corporate Risk Register: 2123 - Ability of NHSL to Deliver a Balanced Budget within Year 2022/23

It was suggested that risks 2213 and 2212 be looked at again as they were both relating to climate issues, and it was suggested that climate challenges and net zero be viewed as separate risks.

C Hope

Mr Couser also suggested that a risk around changes in population demographics might be included, albeit this was included in the Our Health Together Strategy, and it was agreed to discuss this out with the meeting.

THE BOARD:

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

B/2023/158 **QUALITY REPORT**

Board Members received the Quality Report.

Dr Deighan took Members through the report and highlighted the Complaints Annual Report for 2022/23, progress in reducing the timelines for completion of SAERS, unsolicited feedback (via Care Opinion), and a variety of audits undertaken.

Mr Hill expressed his disappointment that only 30% of stage 2 complaints in particular were being closed, and asked if this could be discussed in greater detail by the Healthcare Quality Assurance & Improvement Committee. Dr Deighan indicated that this would be scheduled for the September meeting C Deighan and an update provided to the September PPRC meeting.

Mr Reid, in sharing the concerns, however highlighted that the qualitative data (SPSO upheld complaints) would suggest that the responses to complaints were of a high quality.

Mr Moore asked if families involved in Adverse Events were involved at the start and finish of the process and Dr Deighan indicated that this was offered to all involved.

THE BOARD:

1. Noted the Quality Report.

B/2023/159 <u>CALENDAR OF DATES 2023</u>

Noted.

B/2023/160 WORKPLAN 2023

Noted.

B/2023/161 ANY OTHER COMPETENT BUSINESS

No items raised.

B/2023/162 **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/2023/163 DATE AND TIME OF NEXT MEETING

Wednesday 30 August 2023 at 9.30am.

B/2023/164 **OPERATION FLOW - RESOURCES**

Due to the confidential nature of the discussion the following item was taken in private.

Professor Gardner indicated that following discussions with Scottish Government about the need to provide additional resources to ensure that Operation FLOW was embedded, approval to proceed to allocate up to £5.9m was agreed, on top of the funds the Board will be converting from temporary to permanent posts, as discussed earlier on the agenda. It was noted that this would in effect increase the Board's projected deficit but was required on the grounds of patient safety and avoiding a repeat of the issues experienced by patients (and staff) last winter. Professor Gardner indicated that the spend of this allocation would be tightly controlled and monitored to ensure it was delivering better performance and safe patient care.

THE BOARD:

1. Approved the securing of £5.9m from Scottish Government and noted that this was an additional financial pressure.

The meeting ended at 1.00pm