

## NHS GREATER GLASGOW & CLYDE

### Minutes of Meeting of the Area Partnership Forum Boardroom, JBR House and via Microsoft Teams on Wednesday 18<sup>th</sup> December 2024, 9:30am

**CHAIR: Ann Cameron-Burns**

**(Sederunt at the end of Minute)**

			<b>ACTION BY</b>
<b>1.</b>	<b>Welcome &amp; Apologies</b>		
	Ann Cameron-Burns welcomed everyone to the meeting.  Apologies were received and acknowledged from Emilia Crighton, Director of Public Health, Colin. Neil, Director of Finance; Ali Marshall, Deputy Director of Planning; Dr. Deirdre McCormick, Chief Nurse, Head of Service, Public Protection; Annie Hair, Unite the Union; Frances Pollock, Convenor, Unison; Cathy Miller, Branch Secretary, Unison; Margaret McCarthy, Staff Side Lead, Glasgow City HSCP Staff Partnership Forum; Amanda Jane Walton, Staff Partnership Lead, and Mary Finn, GMB.  Members acknowledged that agenda item 4.2, Annual Delivery Plan 2024/25 would be deferred to the next meeting.		
<b>2.</b>	<b>Minute of the Last Meeting – 18<sup>th</sup> September 2024</b>		
	The Minute of the Last Meeting from the 18 <sup>th</sup> of September 2024, was approved and members acknowledged that all actions from the Rolling Action List were complete.		
<b>3.</b>	<b>Sustainability &amp; Value</b>		
	Mr. P. McKenna, Head of Financial Improvement, presented a financial overview for Month 7.  The Forum was informed that as of the end of October 2024, the Board recorded a deficit of £40.01m and noted an improvement of		

	<p>£3m; overspends were also recognised for Acute and Corporate sectors. P. McKenna reported that 75% of the overall financial challenge of £226.9m had been achieved.</p> <p>Following the announcement of the Scottish Government budget on December 4th, 2024, P. McKenna highlighted key points including a 3% baseline budget increase. Discussions with the Scottish Government regarding National Insurance contributions and associated funding were ongoing and additional funding had been allocated to reduce waiting lists and support the reduction of delayed discharges.</p> <p>P. McKenna mentioned that there was an expectation for all NHS Scotland Boards to achieve a minimum of 3% savings.</p> <p>E. Quail suggested considering the impact of a non-fully funded pay deal when negotiating future pay.</p> <p>Regarding Sustainability and Value (S&amp;V), E. Quail inquired if S&amp;V would have an expiration date or become standard practice and how the 15-box grid could be used to retain staff. P. McKenna explained that work was ongoing with national procurement focusing on retention. A. MacPherson noted that the 15-box grid would highlight opportunities across NHS Scotland and this detail was included in a letter from the Scottish Government issued to all Boards.</p> <p>A. Cameron-Burn asked if the Scottish Government would assist NHSGGC if they did not meet their savings targets. P. McKenna indicated that he was unsure of the mechanism and a pathway for this scenario had not yet been developed.</p> <p>Mrs. Jane Grant noted that although NHSGGC had not yet developed a path to a balanced position, all possible measures were being taken. National discussions continued regarding the further reduction in the working week.</p> <p>A. Cameron-Burns thanked members for the discussion.</p>		
<b>4.</b>	<b>Items for Discussion</b>		
<b>4.1</b>	<b><u>NHSGGC Anti-Racism Plan</u></b>		
	Mr. Liam Spence, Head of Staff Experience gave an overview of the		

<p>NHSGGC Anti-Racism Plan which was developed in partnership to ensure that support is provided to all protected characteristics including ethnicity in response to a Scottish Government request in September 2024.</p> <p>Noting previous comments made by the Area Joint Trade Union &amp; Professional Organisations Committee (JOC). L. Spence confirmed these had been incorporated into the document.</p> <p>Referring to the MS Teams chat, it was agreed that the slide deck for the agenda item three would be circulated to members following the meeting. A. Cameron-Burns also noted a request for a link to the BME Leadership Programme which L. Spence agreed to forward on to G. Usrey.</p> <p>Members were asked to keep the MS Teams chat to a minimum.</p> <p>Noting G. Usrey's comment regarding the BMA Leadership Programme, A. MacPherson added that the link was issued widely via Core Brief and discussed at the Workforce Equality Group.</p> <p>A. McCready noting that there would be a third cohort of training going forward queried how successful the first two cohorts were and how many had been successful in gaining a promoted post. L. Spence confirmed he would be able to provide these figures in the coming weeks however confirmed that promotions had taken place and feedback from the initial cohorts had been excellent.</p> <p>E. Quail whilst welcoming the Plan, was mindful that there was a need to consider and ensure that training reached everyone in the organisation and to outline how this would be done.</p> <p>Discussion followed regarding ringfencing of posts for groups of staff. Both A. Cameron-Burns and A. Robertson were asked to provide further information by e-mail to N. Smith.</p> <p>Welcoming the Plan, G. Usrey suggested that there may be a need to prioritise international educated nurses following RCN survey results, which noted a great impact of this community of staff and was happy to continue discussion outwith with meeting.</p> <p>Referring to discussion regarding ringfencing, A. MacPherson added that if there was an interim acting up arrangement within a team, it would be legitimate for a post to be ringfenced to ensure succession planning. However, if the post is permanent this should not be ringfenced.</p> <p>Mindful that further work was required, A. Cameron-Burns and A.</p>	<p><b>L.S/G.U</b></p> <p><b>L.S</b></p> <p><b>A.R/ A.C-B/ N.S</b></p>
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	<p>MacPherson confirmed that NHSGGC was one of two boards within NHS Scotland that had Anti-Racism Plans in place prior to the Scottish Government request, members were asked to remain positive and work in partnership to resolve any issues that do occur.</p> <p>A. Cameron-Burns thanked members for the discussion.</p>		
4.2	<p><u>Public Protection Strategy – Safeguarding it Matters to Us 2023-26 Annual Report</u></p>		
	<p>Brought to the Forum for awareness, Dr. Kerry Milligan, Public Protection Medical Lead, Child Protection Unit gave an overview of the Annual Report including detail on key deliverables during 2023/24.</p> <p>Noting the governance pathway of the Report, Dr. Kerry Milligan was open to receiving any further feedback from the Forum.</p> <p>A. Cameron-Burns welcomed the format of the Report and noted that the Report had been developed in partnership.</p> <p>Discussion followed regarding the practical application elements noted within the Report with Dr. K. Milligan explaining that e-Health had been very supportive specifically regarding the referral system and streamlining what was a laborious system to use ensuring that user-friendliness and being able to gather the relevant data is as effective and efficient as possible.</p> <p>Professor A. Wallace added that staff training remained a priority to ensure that staff are competent and confident to use the systems in place.</p> <p>A. Cameron-Burns commended the format of how the objectives were presented noting the responsible officer .</p> <p>A. Cameron-Burns thanked Dr. K. Milligan and Professor A. Wallace for the update.</p>		
4.3	<p><u>NHSGGC Quality Strategy Update</u></p>		
	<p>Anne McLinton, PCHC Programme Manager, Nursing &amp; Midwifery presented a progress update on the NHSGGC Quality Strategy, setting out a clear vision for how NHSGGC will work in partnership across all areas of the service to ensure people experience high-quality individualised, person-centred care.</p> <p>Members were informed of the Strategy's aims, the implementation approach and governance model, key priorities, evaluation approach</p>		

	<p>and next steps.</p> <p>A. Cameron-Burns thanked A. McLinton for the presentation.</p> <p>E. Quail explaining that the Quality Strategy should be for everyone noted the Strategy's focus on nursing and midwifery and queried what staff side involvement had taken place, its governance route and to whom it was pitched at.</p> <p>Professor A. Wallace explained that the Strategy was broader than just clinical staff and noted her disappointment to hear that this was felt not to be the case and was happy to discuss further outwith the meeting. Noting testing prototypes, members were informed that Estates and Facilities were looking at what the Strategy means for them, ensuring implementation at the right level and support in place to deliver across the organisation.</p> <p>Regarding staff engagement Professor A. Wallace confirmed that wide engagement had taken place including across HSCP's. A. McLinton added that staff side representation from Facilities and Labs were included in the membership of the Design and Development Group.</p> <p>A. MacPherson noting the excellent piece of work confirmed that there had been staff engagement with significant partnership participating with a number of engagement sessions having taken place during the Strategy's development phase.</p> <p>W. Edwards confirmed that work taken across Acute was focused on laying down the principles of the Quality Strategy and expressed his thoughts that the Strategy was very much an organisational wide Strategy.</p> <p>Mrs. J. Grant noting the wide engagement that has taken place, asked members to remain positive and support the Strategy and its direction of travel for everyone in the organisation. The Forum was asked to engage positively and effectively with the Strategy, working within the operational framework provided, working towards a bottom-up approach across multi-disciplinary teams.</p> <p>E. Quail noting the good work that has taken place, was mindful that the Strategy required to be communicated and visible throughout all areas of the organisation.</p> <p>Discussion was brought to a conclusion by A. Cameron-Burns.</p>		
<b>5.</b>	<b>Service Updates</b>		

5.1	<u>Acute</u>		
	<p>W. Edwards provided an overview of the Acute position noting Planned Care activity with outpatient delivery at 3.5% at end of November 2024, inpatient day cases at 10.4% ahead of plan and Diagnostics also ahead of plan at 8.6%. Members noted that there were some specialties where challenges regarding capacity matching demand and work remained ongoing to mitigate this.</p> <p>The Forum was informed that a first draft of the Health Improvement Scotland (HIS) Review into Emergency Departments across Acute sites was expected in February 2025 with a final report published in March 2025.</p> <p>Challenges remain with performance in Unscheduled Care with a gradual decline seen in October/November 2024 to 66% as we approach the winter period. Work remains ongoing to support sites, introducing initiatives where necessary to reduce pressures including peer support.</p> <p>W. Edward explained that the Winter Plan had been approved and was moving into its implementation stages with additional capacity opening in January 2025.</p> <p>A. Cameron-Burns queried how many additional beds there were; W. Edwards confirmed there would be 48 additional beds as of the 6<sup>th</sup> of January 2025 with this position being reviewed at a later date.</p> <p>A. Cameron-Burns thanked W. Edwards for the update.</p>		
5.2	<u>Community</u>		
	<p>B. Culshaw explained that efforts continue to manage pressures across all of the six HSCP's with this week there have been particular workforce challenges due to various viruses.</p> <p>Reflecting on delayed discharge numbers it was noted that the figure was at its highest and all efforts were being made to reduce the figure before Christmas.</p> <p>Care Homes remain open.</p> <p>Discussion is ongoing regarding budget setting, and it was agreed that a Report would come to this meeting noting its impact.</p> <p>A. Cameron-Burns thanked B. Culshaw for the update.</p>		

5.3	<u>Workforce</u>		
	<p>Noting a slight increase to sickness absence levels at 7.36%, A. MacPherson explained that all efforts were being made to keep absence in stable working in partnership.</p> <p>Referring to the additional bed capacity, A. MacPherson explained that additional support was being reviewed with no expectation that external resource would be required with all work being taken forward by the Recruitment team.</p> <p>Members were directed to the video issued via Core Brief regarding Civility Saves Lives.</p> <p>A. Cameron-Burns thanked A. MacPherson for the update.</p>		
5.4	<u>Public Health</u>		
	<p>M. O'Neill presented an overview of Public Health activity and updated members on the Vaccination Programme and the changes to the eligibility criteria bringing the Programme in line with England.</p> <p>As of the 8<sup>th</sup> of December 2024, over 450,000 winter vaccinations had been delivered in NHSGGC. For COVID and Flu, NHSGGC were above the Scottish average for children's vaccinations however below the national average for adult vaccinations.</p> <p>Across HSCP's it was noted that East Dunbartonshire had the highest vaccination uptake.</p> <p>The Forum was informed that a Planning Group had been established to review barriers for staff vaccination update with a reintroduction of the peer support model. In September 2024, 5,000 vaccinations have been delivered and ongoing efforts are being made with the Communications Team to ensure that all staff are being reached.</p> <p>M. O'Neil confirmed that a second communication had been issued this week detailing information regarding a second staff vaccination clinic with over the last couple of days, 419 staff flu vaccinations have been delivered and 306 COVID vaccinations.</p> <p>The Forum was asked to continue to encourage staff to take both vaccines which would continue to run until the end of December 2024.</p> <p>Members noted that there had been a slight increase in COVID hospitalisations across NHS Scotland with 204 admissions.</p> <p>A. Cameron-Burns thanked M. O'Neill for the update.</p>		

<b>6.</b>	<b>Circulars</b>		
	Members were asked to note the following Circulars.		
<b>7.</b>	<b>4 Key Messages</b>		
	1. <u>Public Protection</u>		
	2. <u>Anti-Racism Plan</u>		
	3. <u>Launch of NHSGGC Quality Strategy</u>		
	4. <u>Finance Update</u>		
<b>8.</b>	<b>Farewell &amp; Thank you</b>		
	<p>A. Cameron-Burns noting this would be Mrs Jane Grant's last APF Strategy, extended a note of thanks for her 41 years' service to the NHS adding that it had been a pleasure to work together and wished her well for her retirement.</p> <p>Mrs Jane Grant thanked everyone noting that working in partnership had been challenging but also provide opportunities. Working relationships were strong and would encourage everyone to continue to work in partnership, working constructively and wished everyone well.</p> <p>A. Cameron-Burns closed the meeting wishing everyone a happy Christmas and New Year.</p>		
<b>9.</b>	<b>Dates &amp; Times of Future Meetings</b>		
	<p>15<sup>th</sup> January 2025 - APF Workforce, 10am</p> <p>12<sup>th</sup> February 2025 – APF Workforce, 10am</p> <p>19<sup>th</sup> March 2025 – APF Strategy, 9.30am</p>		

## S E D E R U N T

**Meeting:** Area Partnership Forum (Strategy)

**Time:** 9:30 am

**Venue:** Boardroom/MS Teams

**Date:** Wednesday 18<sup>th</sup> December 2024

NAME	DESIGNATION
Ann Cameron-Burns	Chair
Josh Cairns	Staff Side Lead – Unison
Frances Carmichael	Co-Chair, Acute Services Directorate Staff Partnership Forum
Beth Culshaw	Chief Officer – West Dunbartonshire HSCP
William Edwards	Chief Operating Officer
Morag Gardner	Deputy Nurse Director – Acute Division
Robert Gibson	Unison
Mrs Jane Grant	Chief Executive (Co-Chair)
Andrew Gray	Unite the Union
Siobhan Harkin	Unison, Health & Safety Staff Side Lead
Anne MacPherson	Director of Human Resources & Organisational Development
Andrew McCready	Unite the Union
Diana McCrone	BAOT
Ciara McGuire	RCM
Paul McKenna	Head of Financial Improvements
Ann McLinton	PCHC Programme Manager • Nursing & Midwifery
Alison McLintock	SoR
Dr. Kerry Milligan	Public Protection Medical Lead
Steven Munce	Head of Workforce Planning & Resources
Marion O'Neill	General Manager, Public Health
Una Provan	Unison
Elaine Quail	Staff Partnership Lead, Employee Director's Office
Allan Robertson	HCSA
Elaine Robertson	RCN
Danny Scott	Convenor, Unite the Union
Natalie Smith	Deputy Director of Human Resources & Organisational Development
Liam Spence	Head of Staff Experience
Greg Usrey	RCN
Prof. Angela Wallace	Executive Director of Nursing
Susan Walker	Unite the Union
Amanda Jane Walton	Staff Partnership Lead

Gaile Weston	BDA
Teresa Will	GMB
Gordon Wilson	RCoP