

Core Brief



Report from April meeting of the NHSGGC Board (3 May 2024, 4.50pm)

The Board of NHS Greater Glasgow and Clyde met on Tuesday, 30 April 2024. The full set of papers are [here](#).

This summary sets out key decisions and issues considered at the meeting.

Patient Story

Professor Angela Wallace, Executive Nurse Director, introduced the [patient story](#), which this month focuses on the support provided to veterans in our care.



Anti-Sexual Harassment Programme: 'Cut it Out'

The "Breaking the Silence" Report, published in September 2023, revealed unreported sexual harassment in surgery departments in NHS Boards across the UK. In response to this, NHSGGC set up, in partnership, a short life working group

to develop and promote a range of resources and support for staff and managers across the organisation to:

- Ensure a culture where there is zero tolerance for sexual harassment;
- Ensure a consistent approach in how this is managed;
- Build the trust and confidence of our staff to raise issues whenever they or one of their colleagues is affected.

The draft programme sets out to build a culture where ending sexual harassment and inappropriate behaviours is everyone's role and all staff feel empowered to speak up. The Board approved the programme which will be launched in May with our 'Cut it Out' campaign.

New Board strategies approved

The Board approved two new strategies, the Primary Care Strategy and the Stakeholder Communications and Engagement Strategy.

The *Primary Care Strategy 2024-29*, a first for NHSGGC, sets out primary care's shared contribution to the health and wellbeing of our population over the next five years. Primary care is often the first point of contact in the healthcare system – a front door to the wider NHS. It is critical to our health and wellbeing and to sustaining wider health and care resilience by intervening early to protect health and prevent ill-health, as far as possible.

The ambitions of the Strategy are for a sustainable, skilled workforce, services that are integrated and well-connected, a step-change in data and digital technology innovations to improve patient health and care outcomes and well-informed patients who have an improved understanding of available services and a better ability to navigate between primary care services.

Priorities for action include a five-year NHSGGC primary care workforce strategy focussed on primary care sustainability and security, the development of a shared care record across primary care, accessible to all primary care professionals, both in and out of hours and the development of more consistent, timely and effective patient pathways in primary care and to onward health and care. [To read the full strategy, click here.](#)

The *Stakeholder Communications and Engagement Strategy 2024-27* builds on the previous strategy and sets out key priorities for communicating and engaging with patients, the public and other key stakeholders.

Over the past three years, the communications landscape has continued to shift significantly, and we have seen a further broad decline in traditionally accessed

platforms, and a corresponding increase in the use of new platforms. While this presents some challenges, it means there are now more ways than ever to engage our stakeholders and an increased opportunity to provide highly targeted and creative communications which take advantage of the most relevant platforms to our stakeholders.

To support the organisation, communications priorities over the next three years will be to:

- Deliver public messaging on accessing services
- Help people to look after their own health
- Work with the public and patients on managing change
- Support our efforts to tackle climate change
- Educate and inform our communities about improvements and developments in our services.

[To read the full strategy, click here.](#)

Proposal on future of GP Out of Hours Service

The Board considered a proposal to move the urgent GPOOH service from business continuity to a permanent model based on a telephone first approach, supported by home visiting and access to one of five Primary Care Emergency Centres for those who need to be seen face-to-face, with free patient transport if required.

The proposal was brought to the Board following a significant programme of formal public engagement and a review of demand and capacity of the service. The engagement process gained very high levels of participation ranking among the highest in relation to engagement or consultation exercises for NHS Boards in Scotland. It achieved 2,923 responses with engagement activities involving over 1,000 people.

In five of the six Health and Social Care Partnership areas, there was strong support for the proposed model. This was in contrast to Inverclyde where 22% of the general public were in favour, with a desire expressed for a return to a seven-day physical primary care emergency centre at Inverclyde. The Board heard that support for Inverclyde residents who had recent experience of the service was considerably higher at 68%. Options for Inverclyde had been explored however there was not enough demand during the evening and overnight mid-week for the return of a seven-day service.

Following detailed scrutiny and a vote of members, the Board approved the proposal, including a commitment to extend the opening hours of the centre within Inverclyde to cover Sunday 10am-4pm, a commitment to all patients who required

it access to free patient transport, and the delivery of a communications campaign to drive up public awareness of the service.

The read the full paper, [click here](#).

Finance Plan

Colin Neil, Director of Finance, presented the 2024-25 Finance Plan for approval. Scottish Government announced its Budget for 2024/25 on the 19 December 2023 and it stated that all NHS Boards will receive a total increase of 4.3% for 2024/25 to cover costs related to the 2023/24 pay deal as well as the baseline of £100m of sustainability and NRAC funding provided in 2023/24. The pay award for 2023/24 was allocated on a non-recurring basis and this uplift ensures it is recurring.

In real terms the uplift for NHSGGC baseline budget is 3.6%. It is anticipated that the pay award, when agreed for 2024/25, will be funded in full however there is no uplift for any costs other than pay.

The three-year Plan highlights a deficit of £48.3m for 24/25 and a deficit of £37.9m and £7.2m for the subsequent years. This is on the assumption that recurring savings of £128.6m are achieved in 2024/25 and £82m in each of the subsequent years.

The Board approved the Financial Plan.

The read the full paper, [click here](#).

R&I Annual Report

Professor Julie Brittenden, Director, Research and Innovation, presented the R&I Annual Report. She highlighted that 330 studies had commenced during 2023, and more than 1,000 others directly involving patients were in the recruiting or follow-up phases.

The West of Scotland Innovation Hub, which is hosted by NHSGGC and works in collaboration with industry, clinical leaders and academic experts to address challenges and improve the delivery of care, supported 46 projects. These included projects involving artificial intelligence and other innovations including in radiology diagnostics, turnaround times for Chest X-ray and CT scans, stroke treatments and the at-home management of conditions such as COPD (chronic obstructive pulmonary disease).

Dr Jennifer Armstrong, Medical Director, said: "Our annual report highlights the incredible work that is going on within Research and Innovation in NHSGGC.

“With hundreds of new studies and trials getting underway in 2023, it was a hugely successful year and we are particularly delighted that so many of our projects directly involve patients who will ultimately benefit from advancements in their care.

“It is also encouraging to see the number of new studies and trials and overall recruitment recovering to pre-pandemic levels as we continue to play our part in enabling Scotland to grow as an internationally competitive location for clinical research and innovation.”

This was Professor Julie Brittenden’s final report to the Board as she steps down from her role as Director. The Chair paid tribute to Professor Brittenden for her expertise and leadership in the role she has held for the past eight years.

**It is important to share Core Brief with colleagues who do not have access to a computer.
A full archive of printable PDFs are available on the [website](#)**