

ACF (M) 21/01
 Minutes: 01 - 11

NHS GREATER GLASGOW AND CLYDE

**Minutes of the Meeting of the
 Area Clinical Forum
 Microsoft Teams / Boardroom
 On Thursday, 11 February 2021**

PRESENT AT TELECONFERENCE

Mrs Audrey Thompson (in the Chair)

Dr Lesley Rousselet	Vice Chair of the AOC
Dr Ruth Hamilton	Chair of the AAHP & HCS
Dr Alastair Taylor	Chair of the AMC
Dr Gayle Cooney	Vice Chair APsychC
Ms Julie Tomlinson	Chair of the AMNC
Mr Ian Millar	Chair of the APC

IN ATTENDANCE

Ms Jane Grant	..	Chief Executive - Boardroom, JBR
Dr Jennifer Armstrong	..	Medical Director - Boardroom, JBR
Mr Jonathan Best	..	Chief Operating Officer - Boardroom JBR
Dr Margaret McGuire	..	Director of Nursing - Microsoft Teams
Ms Julie Murray	..	Chief Officer – Microsoft Teams
Ms Fiona Smith	..	Director of Allied Health Professions - Microsoft Teams
Ms Pamela Joannidis	..	Acting Associate Nurse Director / Infection Prevention and Control Team - Microsoft Teams
Ms Linda de Caesteker	..	Director of Public Health – Microsoft Teams
Ms Anne Harkness	..	Director related to Flu and COVID-19 Vaccination - Microsoft Teams
Ms Nareen Owens	..	Deputy Director of Human Resources and COVID-19 Vaccination - Microsoft Teams
Ms Fiona McKay	..	Associate Director of Planning - Microsoft Teams
Ms Geraldine Mathew	..	Secretariat Manager - Microsoft Teams
Mrs Lorraine Bulloch	..	Secretariat - Microsoft Teams

		ACTION BY
01.	WELCOME AND APOLOGIES	
	Apologies for absence were intimated on behalf of Dr Cerys MacGillivray and Ms Gail Caldwell.	
	<u>NOTED</u>	
02.	DECLARATIONS OF INTEREST	

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	<p>The Chair invited members to declare any interests in any of the items being discussed. There were no declarations made.</p> <p><u>NOTED</u></p>	
03.	MINUTES OF THE PREVIOUS MEETING OF THURSDAY, 10 DECEMBER 2020	
	<p>The Forum considered the minute of the Area Clinical Forum Meeting of Thursday, 10 December 2020 at 2.00pm [Paper No ACF (M) 20/08] and were content to approve the minutes as an accurate record subject to the following amendment:</p> <p>Item 101 – (page 5) Redesign of Urgent Care: Change wording of “<i>Mental Health Services during GP Hours</i>” to “<i>Mental Health Services outside GP hours</i>”.</p> <p><u>APPROVED</u></p>	
04.	MATTERS ARISING	
a)	<p><u>ROLLING ACTION LIST</u></p> <p>Members reviewed the Rolling Action List and were content to close the following items:</p> <p><u>No 98 Annual Review</u></p> <p>This action was circulated to members on 14 December 2020 and therefore members were content to close the action.</p> <p><u>No 99 Care homes</u></p> <p>Dr McGuire will provide an update at Care homes Update regarding funding to recruit to new posts and therefore members were content to close the action.</p> <p>The Forum were content to note the Rolling Action List updates provided.</p> <p><u>NOTED</u></p>	
05.	COVID-19 VACCINATION	
	<p>Dr Linda de Caestecker, Director of Public Health provided an update on the current position in respect of the COVID-19 Vaccination Programme. She reported that the COVID-19 vaccination rollout had progressed very well and noted the amazing work carried out by the staff at the Vaccination Centres. Dr de Caestecker provided an overview of the cohorts who have received the first</p>	

dose of the COVID-19 vaccine and advised that the aged 65 and over cohort would receive the first dose of the vaccination by the end of the week. She noted there had been many offers of help, however delivery of the vaccine would slow down due to availability of the vaccine. Dr de Caestecker highlighted that NHSGGC were further ahead nationally and advised that the Joint Committee on Vaccination and Immunisation (JCVI) would make a new announcement on 15 February 2021 regarding vaccination for younger age groups. She noted that the changing situation with supply of the vaccine had adjusted schedules, however there remained confidence that cohort 6 would be completed over the next few weeks.

Ms Anne Harkness, Director related to COVID-19 Vaccination Centres provided an overview of COVID-19 vaccination data and explained that she wouldn't be able to give a level of depth to the data produced at present as the information was at high level. She reported that NHSGGC had vaccinated 250,000 of the population within several community clinics and noted that the uptake of the vaccine had been very good, for example at 93% of over 75s. Ms Harkness provided a breakdown of figures from cohorts in Health and Social Care Partnerships (HSCP's) and noted that 40,000 vaccination appointments had been scheduled over the next few weeks. Furthermore, she commented regarding the vaccine uptake rates amongst staff and explained that there would be vaccination clinics for 300 members of staff scheduled for the following week for pregnant workers and staff with allergies. Ms Harkness reported that the second dose of the COVID-19 vaccine would commence between now and the end of March 2021 for HSCP and care home staff.

Ms Nareen Owen, Deputy Director of Human Resources and Organisational Development provided an overview of the current position in respect of staffing and recruitment to support the COVID-19 Vaccination Programme. She reported on progress with continued recruitment and described the workforce of 1700 Vaccinators alongside a combination of Independent Contractors. Ms Owen advised that initially there had been confusion regarding vaccinator training, however the training had now been established. She highlighted a contingency service delivery of a Band 3 Vaccinator workforce and noted that the Vaccinator Bank would ramp up with shadow shifts available at the Louisa Jordan Hospital. Ms Owen asked members to reassure colleagues that the bank would be utilised, however there would be no further requests for expression of interest at this time. Ms Owen noted that the response to the Vaccinator Programme had been overwhelming and would allow NHSGGC the confidence to create a sustainable Vaccinator Bank.

In relation to questions raised by members regarding Vaccinator training timeframe and pay rates. Ms Owen advised that NHSGGC had slimmed down training to the minimum of training set out nationally, however she would examine training material and feedback. In relation to the question raised regarding pay rates for Vaccinators, Ms Owen reported that the pay rates had been set out by the Scottish Government to encourage Independent Contractors to contribute. She advised that NHSGGC could not change the rates of pay as this had been set nationally and noted that Band 3 Vaccinators had different roles and aspects to the Programme.

In relation to a question raised by a member regarding a combination of Pfizer/BioNtech and Oxford University/ AstraZeneca for first and second doses of the vaccine, Dr de Caestecker confirmed that vaccines would be consistently provided in the same environment with the same vaccine as set out by national

	<p>guidance. In relation to an additional question related vaccine supply and Allied Health Professional students from different Health Boards, Dr de Caestecker confirmed that NHSGGC had a process in place to accommodate students with a consistent first and second dose of vaccine via requests from the COVID-19 inbox. Further discussion ensued regarding completion of yellow card reports related to vaccine side-effects. Dr de Caestecker confirmed completion of yellow card reports for side effects including mild symptoms for reporting and prevalence. Mrs Thompson would take forward with Mr Alan Harrison, Lead Pharmacist in Community Care for balance and best approach.</p> <p>Dr de Caestecker provided an update related to the position in respect of lateral flow testing in NHSGGC. She advised that Ms Anne MacPherson was meeting Government Officials to discuss delivery of lateral flow testing kits for Primary Care. Dr de Caestecker advised that the rollout had been slightly delayed and reported testing would be extended for asymptomatic staff to attend sites to be tested and isolate as quickly as possible.</p> <p>In relation to a question raised by a member regarding the timeframe to register for lateral flow testing and record the result, discussion ensued regarding the process of lateral flow testing and the confirmation of a positive COVID-19 result and delay of appointment for a further Polymerase Chain Reaction (PCR) test. Dr de Caestecker advised on the turnaround for a further PCR COVID-19 test was much speedier, however she would examine the process of staff testing and timeframe for an appointment for a PCR test.</p> <p>Mrs Thompson thanked, Dr de Caestecker, Ms Harkness for attending the meeting this afternoon to discuss COVID-19 Vaccinations. Mrs Thompson stated she would be happy to act as a link from the Clinical Community related to COVID-19 feedback. Dr de Caestecker agreed that feedback would be helpful.</p> <p>The Area Clinical Forum were content to note the update and were assured by the information provided.</p> <p><u>NOTED</u></p>	<p>Mrs Thompson</p> <p>Mrs Thompson</p>
<p>06.</p>	<p>UPDATE FROM THE CHIEF EXECUTIVE ON ONGOING BOARD BUSINESS</p>	
	<p>Ms Grant noted the next Board meeting would be held on 23 February 2021 with a review of the ongoing governance arrangements.</p> <p>Ms Grant provided an overview of the ongoing response to the COVID-19. She reported that the key situation was stable and noted there had been a marginal improvement in the number of COVID-19 cases in the Acute Sector. Additionally, the COVID-19 position in care homes had gradually reduced and was stable.</p> <p>Ms Grant reported that a significant challenge remained in the Acute Sector in the Elective Programme related to Priority 2 elective patients and there also remained a challenge to minimise delayed discharges. Additionally, Ms Grant noted that Health and Social Care Partnerships (HSCP's) continued with their tireless hard work related to COVID-19, care homes and Community Assessment Centres (CAC's).</p>	

	<p>Ms Grant provided an update in respect of the legal case related to Multiplex and the progress with the legal claim of £70 million. She advised that the Preliminary Hearing would be held in the next few months. Ms Grant reported that the Public Inquiry had attained significant pace and the Oversight Board would provide an update in due course.</p> <p>Members were content to note the update from the Chief Executive on ongoing Board business.</p> <p><u>NOTED</u></p>	
<p>07.</p>	<p>RECOVERY PLAN 21/22:SEEKING VIEWS;</p>	
	<p>The Forum received a presentation by the Associate Director of Planning, Ms Fiona MacKay, which provided an overview of the work being undertaken to develop the Remobilisation Plan, which represented an update and further iteration of the existing Remobilisation Plans to remobilise, recover and redesign. Ms MacKay outlined a year-long recovery plan and would ask for feedback before submission of the draft plan on 26 February 2021. She noted the framework for the plan had been approved by Strategic Executive Group (SEG) and highlighted the key priority areas identified by the Scottish Government. Ms MacKay described the timescales for the review and assessment process for March 2021 and work towards finalised plans in April and May 2021. Ms MacKay explained the overarching principles in planning with strategic direction and the fast pace of Moving Forward Together (MFT) including e-health; WOS Scotland Trauma Network; Redesign of Urgent Care and the removal of barriers between primary and secondary care. Furthermore, Ms MacKay provided an overview of governance and explained the key priority areas including Workforce and Workplace; Patient Experience; Public Health; Adult Social Care; Planned Care; Unscheduled Care (USC); Mental Health; Primary and Community Care; Addressing Inequalities; Digital / eHealth and Finance and Capital. Ms MacKay noted that a feedback letter would follow from the Scottish Government later in the year to review performance templates due to the uncertainty of COVID-19.</p> <p>Mrs Thompson thanked Ms MacKay for the presentation regarding the Recovery Plan 21/22 and requested for the presentation be circulated to members for feedback comments by the end of next week.</p> <p>Ms Smith raised a question related to the National Rehabilitation Framework and the recovery of lockdown. She noted that Allied Health Professionals (AHP's) would take the lead on Rehabilitation and would examine work strands. Ms MacKay and Ms Smith would take forward discussion out with the ACF meeting.</p> <p>Members welcomed the presentation and opportunity for contribution towards the development of the plan. It was agreed for the presentation to be circulated to Members for further consideration and comment directly to the Chair.</p> <p><u>NOTED</u></p>	<p>Ms MacKay/ Ms Smith</p> <p>Secretariat Mrs Thompson</p>

08.	UNSCHEDULED CARE UPDATE	
	<p>Mr Best, Chief Operating Officer provided members with an overview of Unscheduled Care (USC). He updated on the current status of the Flow Navigation Centre (FNC) and advised that FNC was working well with 30% of calls redirected with the Centre receiving approximately 100 calls per day. Mr Best explained that the Minor Injuries Unit (MIU) would provide Senior Nurse or Medical advice after 10.00pm. Furthermore, Mr Best noted that the Scottish Government had requested that NHSGGC launched a Minor Assessment Unit at the Gartnavel Hospital site over the winter period. This would be staffed by Nurse Practitioners.</p> <p>Mr Best provided an update of the wider USC situation and noted that the Acute Sector remained extremely busy and as of today, 20 wards were closed and there were 225 delayed discharges. Mr Best provided an update in relation to the Intensive Care and High Dependency Unit figures and noted that COVID-19 cases continued to reduce. He reported significant staff absence continued and emphasised the need for staff to utilise A/L for wellbeing and rest.</p> <p>Mr Best reported on regular winter pressures and advised that admissions were slightly high.</p> <p>Mrs Thompson thanked Mr Best for USC update and noted the huge pressures on NHSGGC alongside the focus on staff wellbeing and A/L utilisation. Members were content to note the update and were assured by the information provided.</p> <p><u>NOTED</u></p>	
09.	CARE HOMES UPDATE	
	<p>Dr McGuire, Director of Nursing provided a verbal update regarding recruitment of staff and noted that there has been staffing issues across the Acute sector and Partnership. She noted the Right Time and Right Place campaign and highlighted AHP's professionalism and expertise. Dr McGuire reported there had been a recruitment gap of band 5 Nurses and advised members regarding a letter that had been sent to Health Care students to offer 15 hour weekly contracts for 3-6 months. She noted that students wouldn't be placed in the environment they were originally based in. Additionally, Dr McGuire explained from a nursing perspective that recruitment would commence earlier than normal with virtual interviews. Dr McGuire advised that additional Health Care Support workers had been recruited to manage risk locally. She was mindful that staff were tired and thanked all professional respective groups for their good will and hard work. She noted that healthcare quality continued to be monitored and governance around falls and tissue viability would continue to be monitored by Chief Nurses. Dr McGuire reported changes to service needs, eg regarding "COVID-19 legs" symptoms resulting from increased sedentary time and the requirement for additional leg ulcer clinics in Primary Care.</p> <p>The Area Clinical Forum considered the paper "NHSGGC Care Home Update" [Paper 21/03] presented by Dr Margaret McGuire, Nursing Director. Dr McGuire</p>	

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	<p>advised that the paper had been presented at the Corporate Management Team meeting and highlighted the huge amount work ongoing to support care homes across NGS GGC. She provided a number of key areas to be considered including the Care Homes Vaccination Programme; COVID-19 testing; Visiting; Care Home Hub Development, Assurance and Governance and Professional Leadership. Dr McGuire noted that lateral flow testing in care homes had been recorded on the TURAS dashboard. She remarked that rollout of the COVID-19 vaccination had gone incredibly well and noted that the second dose of the vaccine would be rolled out to staff and residents from 15 February 2021. Dr McGuire advised that visiting to care home residents would change, however national guidance had not been provided and once more information was available she would provide an update. Dr McGuire provided an overview of the two planned care home hubs and described staffing model and funding.</p> <p>Members welcomed the update provided and noted the significant amount of work being undertaken. In addition, members noted the progress made in respect of partnership working and integration, which had been strengthened through the work with Care homes.</p> <p><u>NOTED</u></p>	
10.	CLOSING REMARKS AND KEY MESSAGES FOR THE BOARD	
	<p>Mrs Thompson would provide an update at the next Board meeting to be held on 23 February 2021.</p> <p>The Forum agreed the key priorities for the Board would include: Information regarding COVID-19 vaccination, staffing of vaccination clinics, concerns with training and governance in place and appropriately trained Vaccinators; Remobilisation and Care homes.</p> <p>Members acknowledged the significant number of challenges at this time, and wished to note the ongoing support and willingness of the clinical community to assist the organisation and the senior management teams to respond to these.</p> <p><u>NOTED</u></p>	
11.	DATE OF NEXT MEETING	
	Thursday 8 April 2021 at 2.00pm	