

NHSGGC (M) 23/03
Minutes: 49-71

NHS GREATER GLASGOW AND CLYDE

Minutes of the Meeting of the NHS Greater Glasgow and Clyde Board held on Tuesday 27 June 2023 at 10.00 am via Microsoft Teams

PRESENT

Professor John Brown CBE (in the Chair)

Dr Jennifer Armstrong	Cllr Michelle McGinty
Ms Mehvish Ashraf	Professor Iain McInnes
Cllr Jacqueline Cameron	Ms Ketki Miles
Ms Ann Cameron-Burns	Mr Colin Neil
Dr Emilia Crighton	Mr Ian Ritchie
Ms Jacqueline Forbes	Dr Lesley Rousselet
Ms Dianne Foy	Dr Paul Ryan
Mrs Jane Grant	Mr Francis Shennan
Mr Graham Haddock OBE	Ms Rona Sweeney
Ms Margaret Kerr	Mr Charles Vincent
Rev John Matthews OBE	Ms Michelle Wailes
Cllr Martin McCluskey	Professor Angela Wallace
Cllr Collette McDiarmid	

IN ATTENDANCE

Ms Denise Brown	Director of Digital Services
Ms Beth Culshaw	Chief Officer, West Dunbartonshire HSCP
Ms Sandra Bustillo	Director of Communications and Public Engagement
Mr Andrew Clark	Senior Communications Officer
Ms Kim Donald	Corporate Services Manager Governance/Board Secretary
Ms Gillian Duncan	Corporate Executive Business Manager (Minute)
Mr William Edwards	Chief Operating Officer, Acute Services
Ms Christine Laverty	Chief Officer, Renfrewshire HSCP
Mrs Anne MacPherson	Director of Human Resources and Organisational Development
Ms Julie Murray	Chief Officer, East Renfrewshire HSCP
Ms Caroline Sinclair	Chief Officer, East Dunbartonshire HSCP
Ms Elaine Vanhegan	Director of Corporate Services and Governance

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49.	Welcome and Apologies		
	<p>The Chair, Professor John Brown, welcomed those present to the June 2023 meeting of NHS Greater Glasgow and Clyde Board.</p> <p>The meeting combined members joining via video conferencing and a socially distanced gathering of some members within the Boardroom of JB Russell House. Members were reminded to observe the online meeting protocol - microphones should remain on mute until invited to speak, the virtual hands up function should be used when wishing to contribute and members should refrain from using the chat function.</p> <p>The Chair also welcomed members of the public who had taken up the invitation to attend the Board meeting as non-participant observers. He reminded members of the public that the virtual hands up function should not be used and they should remain on mute throughout the meeting.</p> <p>The Chair noted the agenda would focus on the progress being made towards achieving the four Corporate Aims – Better Health, Better Care, Better Value and Better Workplace. The Chair advised that the Board meeting would be followed by a meeting of the Audit and Risk Committee as part of the work to finalise the annual accounts.</p> <p>The Chair suggested that those presenting should assume that Board Members have read the papers, and presentations should be concise with only key issues highlighted.</p> <p>Apologies on behalf of members were recorded on behalf of Mr Simon Carr, Mr Alan Cowan, Councillor Chris Cunningham, Mr David Gould, Ms Anne Marie Monaghan and Councillor Katie Pragnell.</p> <p>Apologies on behalf of the Executive Team were noted on behalf of Ms Susanne Millar and Professor Tom Steele.</p> <p><u>NOTED</u></p>		
50.	Declarations of Interest		
	<p>The Chair invited members to declare any interests in any of the matters being discussed. There were no declarations made.</p> <p>The Chair reminded Board Members of the requirement to keep their details updated on the Register of Interests and that they</p>		

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	should notify any changes to Ms Kim Donald, Board Secretary, and the Chair by email.		
	<u>NOTED</u>		
51.	Minute of Previous Meeting		
	The Board considered the minute of the NHS Greater Glasgow and Clyde Board Meeting held on 25 April 2023 [Paper NHSGGC (M) 23/02] and on the motion of Rev John Matthews, seconded by Dr Paul Ryan, the Board were content to accept the minute of the meeting as a complete and accurate record.		
	<u>APPROVED</u>		
52.	Matters Arising		
a)	Rolling Action List		
	The Board considered the paper 'Rolling Action List' [Paper No. 23/33].		
	The Board were content to accept the recommendation that 7 items were closed and noted that there was one item that was ongoing to the August Board meeting.		
	There were no other matters arising noted and the Board were content to approve the Rolling Action List.		
	<u>APPROVED</u>		
53.	Chair's Report		
	The Chair advised the Board that he had attended and contributed to a wide range of governance meetings since the previous Board Meeting. These included the Acute Services Committee (ASC), the Clinical and Care Governance Committee (CCCG), the Finance Planning and Performance Committee (FPPC) and the Audit and Risk Committee (ARC).		
	Along with the Chief Executive, the Chair had attended two meetings with Mr Michael Matheson MSP, the new Cabinet Secretary for NHS Recovery, Health and Social Care. These meetings had focused on current service delivery and NHSGGC's response to the challenges around urgent care and planned care.		

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	<p>The Chair had also attended two meetings of the Board Chairs Group. Following those meetings the Board Chairs had met with the Cabinet Secretary and those meetings had also focused primarily on how NHS Boards are progressing with recovery following the COVID-19 pandemic.</p> <p>The Chair had discussions with the two Vice Chairs about the challenges facing NHS GGC. The Vice Chairs had also been out and about meeting people, including visits to the Intensive Care Units at Glasgow Royal Infirmary (GRI) and Inverclyde Royal Hospital (IRH). ASC members had also visited the Royal Alexandra Hospital (RAH).</p> <p>The Chair had hosted a visit by the Cabinet Secretary to the site of the new North East Hub. He had also hosted a visit to the Royal Hospital for Children (RHC) by Ms Siobhan Brown, the Minister for Victims and Community Safety, where the impact of the Navigators initiative was discussed.</p> <p>The Chair had met with Mr John-Paul Marks, the Permanent Secretary to the Scottish Government, when Mr Marks visited the Queen Elizabeth University Hospital (QEUH) and RHC with Ms Caroline Lamb, the Director General for Health and Social Care, to review progress with the remediation work in the atrium and meet staff in both hospitals. Mr Marks and Ms Lamb also met with the Chief Executive and members of the Executive Leadership Team to review NHS GGC's overall performance.</p> <p>The Chair reported that he had chaired the recruitment panel for the Director of Digital Services and, on behalf of the NHS Board, he formally congratulated Ms Denise Brown on her appointment.</p> <p>Accompanied by Professor Iain McInnes at a ceremony at GRI, the Chair also had the privilege of awarding the St Mungo's medal for research to Mr Richard Lowrie, Lead Pharmacist Research and Development Homeless Health (PHOENIX) Team, and his team for their research into support for people who experience homeless. This was only one of a number of research projects that would ultimately lead to innovative new ways of delivering healthcare to a wide range of people with an equally wide range of needs and health conditions.</p> <p>The Chair also joined Ms Julie Murray, Chief Officer, East Renfrewshire HSCP and NHS GGC executive lead for the armed forces, at an event at Erskine Hospital to consider how the health and wellbeing of veterans could be improved through better collaborative working with all the organisations involved in this important work. The event was a success and the Chair</p>	

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	<p>commended Ms Murray and her team for taking this important initiative forward.</p> <p>The Chair also hosted the opening ceremony for the new garden at the QEUH. Accompanied by Ms Michelle Wailes, the Board’s Environment and Sustainability Champion, they had the opportunity to meet the team behind this initiative and the new mural that greets visitors to the campus.</p> <p>The Chair had also continued his work with colleagues on supporting Global Citizenship within NHS Scotland and had chaired two meetings of the Advisory Board in the last couple of months.</p> <p>The Chair advised that his work on improving corporate governance was continuing and he had delivered presentations to colleagues across Scotland on the refreshed edition of the Blueprint for Good Governance in NHS Scotland. He had also spent more time on the external governance review of NHS Forth Valley and expected that work to continue until at least the end of July.</p> <p>The Chair had also attended the NHSGGC Celebrating Staff Event on 4 May 2023 and was hugely impressed by everyone he had met and their contribution to delivering high quality health and social care. The Chair said that NHSGGC was fortunate to have such a committed and professional workforce and wanted to put on record the Board’s appreciation of every member of staff.</p> <p>Finally, the Chair offered his congratulations to people who had recently been honoured as part of the King’s first Birthday Honours. Professor Tom Evans, Consultant Microbiologist and Professor of Microbiology at the University of Glasgow, had been awarded a CBE for services to healthcare during COVID-19; Ms Donna Bell, Director of Social Care and National Care in the Scottish Government, had been awarded an OBE; and, local MSP Jackie Baillie had received a damehood for the contribution she continued to make to political and public life.</p> <p>The Chair handed over to the Chief Executive for her update following which he would invite any questions or comments from Board Members.</p> <p><u>NOTED</u></p>	

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54.	Chief Executive's Report	
	<p>Mrs Grant advised that she continued to participate in routine meetings covering a wide range of issues including the Sustainability and Value Board, the Best Start national group and she had also attended the Board's governance Committees as noted by the Chair.</p> <p>Mrs Grant said that this had been a very busy period during which there had been a significant focus on finalising the draft Annual Delivery Plan for submission to the Scottish Government as well as winter planning and recovery to improve planned care and cancer performance before the winter period. There had also been a number of meetings to ensure preparedness for the proposed industrial action by Junior Doctors.</p> <p>Mrs Grant advised that there had been a presentation on Moving Forward Together: Building Future Health and Care Services at a Directors' workshop and the recent Board Seminar. This had been presented at the annual NHS Scotland event on 19 June 2023 and there had also been a presentation from NHSGGC on Using an Evidence-based Approach to Improving Unscheduled Care. Both of these presentations had been very well received and Mrs Grant commended all those involved.</p> <p>Mrs Grant, together with the Chief Executive of Glasgow City Council and the Chief Officer of Glasgow City HSCP, had also met with the Cabinet Secretary to discuss delayed discharges. The Permanent Secretary to the Scottish Government, Mr John-Paul Marks, had also met with the Executive Team to discuss recovery and Mrs Grant reported that this had been a positive meeting with good feedback.</p> <p>The Board Chief Executives Group had also met twice and the items discussed included pay negotiations and short and medium term priorities.</p> <p>The Scottish Hospitals Inquiry hearings had been taking place over the last few weeks and considerable work had been undertaken to support staff giving evidence with the closing statements to be submitted to the Inquiry by the middle of August.</p> <p>Mrs Grant had attended a Scottish Public Services Ombudsman (SPSO) workshop in early June about supporting vulnerable people. This had been an interesting event with some good learning.</p>	

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	<p>Mrs Grant had opened NHSGGC’s first Workforce Equality, Diversity and Inclusion Conference on 20 June 2023 which had been well received and she commended Mrs MacPherson and the Equalities Team for the high degree of enthusiasm generated by the event.</p> <p>Mrs Grant also offered her congratulation to Ms Denise Brown on her recent appointment as Director of Digital Services.</p> <p>Finally, Mrs Grant had also attended the Celebrating Success event and she commended the outstanding staff from across the organisation.</p> <p>In response to a query about the potential Junior Doctors Industrial Action, Mrs Anne MacPherson, Director of Human Resources and Organisation Development, provided assurance that, although there were ongoing negotiations at a national level in the hopes of averting the possible strike action, there was significant work underway to ensure NHSGGC was as prepared as possible, including the stepping up of Gold Command which was currently meeting weekly and would increase as required.</p> <p>The Chair thanked Mrs Grant for her continued dedication and commitment to her role as the Board’s Chief Executive.</p> <p>NOTED</p>		
55.	Patient Story		
	<p>Professor Angela Wallace, Nurse Director, introduced a short video presentation which described the work of Compassionate Inverclyde, an award winning and inspirational social movement which was helping to tackle loneliness, social isolation, death and bereavement across Inverclyde highlighting.</p> <p>The Chair thanked all who participated in the video presentation. In response to a query about rolling this out across the Board area, Professor Wallace said the team were looking at best practice and what aspects could be rolled out across the different areas. The Chair encouraged Board Members who were also IJB Members to have this conversation within their own HSCP.</p> <p>NOTED</p>		

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56.	Public Health Screening Programme Annual Report 2021-22	
	<p>The Board considered the paper Public Health Screening Programme Annual Report [Paper no 23/34] presented for awareness by Dr Emilia Crighton, Interim Director of Public Health.</p> <p>Dr Crighton reported that 2020/21 had been a challenging year for screening as a number of programmes had been paused during the COVID-19 pandemic, however, she had been encouraged that there had still been good uptake reported. Dr Crighton said that staff had been actively engaging with people during COVID-19 recovery and work on engaging people with learning disabilities and mental health diagnosis had shown some success. She said that with the changing population of NHSGGC, ensuring that people from all backgrounds participated in screening was a key priority.</p> <p>In response to a query about priority actions for specific groups, Dr Crighton advised that there was a specific part of the strategy looking Board-wide at the physical needs of people with enduring mental health issues and there were programmes that engaged in areas where people had been residents in mental health care for a long time. She said that they were also working with the Communications Team to understand the barriers to screening for people from an ethnic minority background. There was ongoing work specific to each programme which included engaging and delivering the message in a way that was relevant to specific sectors of the population.</p> <p>There was a question about Abdominal Aortic Aneurysm (AAA) screening and Dr Crighton confirmed that this was much more likely to affect men and data had shown that screening would not need to be expanded to women. She also said that cardiovascular prevention measures over the last 20 years had reduced the number of AAA cases.</p> <p>In response to a query about the decline in the uptake of cervical screening over the last six years, Dr Crighton provided assurance that every eligible person received invitations to attend as well as reminder prompts. She said that the programme statistics were monitored regularly and they were working with the Communications Team on how best to encourage people to take up this invite.</p> <p>Dr Crighton was asked about the annual health check for people with Learning Disabilities and what impact that would have on</p>	

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	<p>screening. Ms Julie Murray, Chief Officer of East Renfrewshire HSCP and lead for learning disabilities, advised that the first national implementation board would be taking place later today and it was expected that one of the benefits would be to encourage screening. It was agreed that the Population Health and Wellbeing Committee should receive a report on this initiative once it had been fully established and continue to have oversight on how this was progressing. It was also agreed that Dr Crighton would include this as a separate section in the next annual report.</p> <p>In response to a query about differences in visual defects in primary 7 children between the most and least deprived areas, Dr Crighton explained that the vision tests were carried out when the child was wearing spectacles and more children from deprived areas had not had their visual deficiencies corrected by the provision of spectacles.</p> <p>With regards to the difference in uptake rates between population groups, Dr Crighton said part of the next stage of the inequalities work would be looking at comparators between the different parts of the screening programme.</p> <p>Professor Brown thanked Dr Crighton for the update and the Board were content to note the report.</p> <p>NOTED</p>		<p>Dr Crighton/ Ms Murray</p> <p>Dr Crighton</p>
57.	Acute Services Committee		
a)	Chair’s Report of Meeting held on 13 June 2023		
	<p>The Board considered the paper ‘Chair’s Report of Meeting held on 13 June 2023’ [Paper No. 23/41] presented for assurance by Mr Ian Ritchie, Chair of the Committee.</p> <p>Mr Ritchie said that the Committee had reviewed the performance of acute services across the Board recognising the challenges associated with this complex system. The Committee had also received a detailed presentation on the continuous flow model (GlasFLOW) which was being adopted and received a presentation about the alternatives to attending the Emergency Department, including a presentation about the success being achieved by Flow Navigation and Outpatient Parenteral Antibiotic Therapy (OPAT). The Committee recognised that there remained challenges around delayed discharges which had subsequently been discussed at FPPC where assurance was given about the significant amount of work ongoing.</p>		

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	The Board content to note the report.		
	<u>NOTED</u>		
b)	Approved Minute of Meeting held on 18 April 2023		
	<p>The Board considered the paper ‘Approved Minute of Meeting held on 18 April 2023’ [ASC(M)23/02] presented for assurance.</p> <p>In response to a query about the action plan from the unannounced Healthcare Improvement Scotland (HIS) inspection at Inverclyde Royal Hospital, Professor Wallace reported that positive progress had been made with delivering the action plan. Professor Wallace provided assurance that the CCGC had oversight of the HIS action plan.</p> <p>In regards to the recommendations about the fabric of the building, Mr William Edwards, Chief Operating Officer, Acute Services, advised that there was a core infrastructure list where areas requiring attention were prioritised for each site with a clear plan outlining what stage initiatives were at. Mrs Grant said that the FPPC received high level reports on backlog maintenance and it was agreed to add an action to the FPPC to ensure that regular update on this were recorded on the Annual Cycle of Business.</p> <p>The Board were content to note the minute.</p> <p><u>NOTED</u></p>		Secretariat
58.	IJB Board Reports		
	<p>The Board considered the paper ‘IJB Board Reports’ [Paper No. 23/36] presented for assurance by the Non Executive Board Member IJB Leads.</p> <ul style="list-style-type: none"> - Glasgow City IJB The Board were assured by the report from the Glasgow City IJB meeting that had taken place on 10 May 2023. There were no questions or comments on the report from members. - West Dunbartonshire The Board were assured by the report from the West Dunbartonshire IJB meeting that had taken place on 16 May 2023. There were no questions or comments on the report from members. 		

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	The Board were content to note the reports. <u>NOTED</u>		
59.	Clinical and Care Governance Committee		
a)	Chair’s Report of Meeting held on 20 June 2023		
	The Board considered the paper ‘Chair’s Report of Meeting held on 20 June 2023’ [Paper No. 23/37] presented for assurance by Dr Paul Ryan, Chair of the Committee. Dr Ryan reported that the Committee had received an update on the Best Start programme which was looking at the redesign of maternity and neonatal care. The Committee had also received a detailed report from the new Chief Nurse in Public Protection. The Board were content to note the report. <u>NOTED</u>		
b)	Approved Minute of Meeting held on 7 March 2023		
	The Board considered the paper ‘Approved Minute of Meeting held on 7 March 2023’ [CCGC(M)23/01] presented for assurance. The Board were content to note the minute. <u>NOTED</u>		
60.	Area Clinical Forum		
a)	Chair’s Report of Meeting held on 8 June 2023		
	The Board considered the paper ‘Chair’s Report of Meeting held on 8 June 2023’ [Paper No. 23/38] presented for assurance by Dr Lesley Rousselet, Chair of the Committee. The Board were content to note the report. <u>NOTED</u>		
b)	Approved Minute of Meeting held on 9 February 2023		
	The Board considered the paper ‘Approved Minute of Meeting held on 9 February 2023’ [ACF(M)23/01] presented for assurance.		

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	The Board were content to note the minute.	
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61.	NHSGGC Board Performance Report	
	<p>The Board considered the paper ‘NHSGGC Board Performance Report’ [Paper No. 23/39] presented for assurance by Mr Colin Neil, Director of Finance.</p> <p>Mr Neil reported that the position at April 2023 had been positive. The cancer 62 day waiting time target had seen a further incremental improvement to 66% although he acknowledged this remained challenging. The number of patients waiting over 52 weeks for a new outpatient appointment and the number of TTG patients waiting over 78 weeks was within the planned position for the reporting period. Overall performance in mental health delayed discharges remained challenging but the number of delays had reduced in the period.</p> <p>Mr Neil provided an overview of the key areas that needed improvement. Access to psychological therapies was marginally below target and the number of CAMHS patients seen within 18 weeks of referral was below the planned position for April 2023 at 81.3%, however, the number of long waiting CAMHS patients had continued to reduce. Cancer 31 day performance had been at 92.1% which was down slightly on the previously reported position. Mr Neil acknowledged that A&E performance remained challenging and had been just under 70% in April. The overall number of acute delayed discharges also remained challenging.</p> <p>In response to a query about the impact of performance on winter planning, the Chair said that there had been a range of different initiatives developed over the last few months and the impact of these should be seen before the winter period. Dr Armstrong added that winter planning had commenced earlier this year with whole system and sector based workshops having already taken place and the winter plan scheduled to be finalised in July.</p> <p>Assurance was also provided that quality continued to be reviewed as well as the pace of service delivery. Dr Armstrong said that the quality of care patients received was monitored and this was reported through the Board governance groups. She said there was also significant innovation happening to improve care at the same time as building additional capacity. Professor Wallace agreed that patient experience was vitally important and this would further showcased as part of refreshing the Quality Strategy.</p>	

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	<p>The Chair thanked Mr Neil for the update noting that work continued to improve the presentation of the report.</p> <p>The Board were content to note the report.</p> <p><u>NOTED</u></p>	
62.	Healthcare Associated Infection Report	
	<p>The Board considered the paper ‘Healthcare Associated Infection Report’ [Paper No. 23/40], presented for assurance by Professor Angela Wallace, Director of Nursing.</p> <p>Professor Wallace reported that performance against the three Annual Operational Standards remained within the control limits. The year-end position was that the Staphylococcus Aureus Bacteraemia (SAB) and Clostridioides Difficile Infections (CDI) targets had remained within expected limits and were close to meeting the 10% reduction target. The E.coli Bacteraemia (ECB) rates remained within normal control limits and it was noted that the reduction target would remain at 25% following a Scottish Government review. Professor Wallace said that overall NHSGGC was performing well, with a further improvement in SABs and E.coli.</p> <p>Professor Wallace reported that during March and April 2023 there had been considerable activity around COVID-19 and Flu and the system had responded well. She reported that there had been an unannounced safe care Healthcare Environment Inspectorate (HEI) visit to Gartnavel General Hospital from 23-24 May 2023 and the final detail was awaited, though noted that the initial feedback had been positive.</p> <p>In response to a query about hand hygiene performance, Professor Wallace provided assurance that dedicated Hand Hygiene Coordinators and other colleagues were focusing on ensuring staff took all opportunities for handwashing and that this was properly recorded.</p> <p>With regards to the SSI surveillance and why this was not carried out for all surgical specialties, Professor Wallace said that this had been paused nationally, however, NHSGGC had made the decision to continue this within a limited number of procedures.</p> <p>The Board were content to note the report.</p> <p><u>NOTED</u></p>	

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63.	Finance Planning and Performance Committee		
a)	Chair’s Report of Meeting held on 13 June 2023		
	<p>The Board considered the paper ‘Chair’s Report of Meeting held on 18 April 2023’ [Paper No. 23/41] presented for assurance by Ms Margaret Kerr, Chair of the Committee.</p> <p>Ms Kerr said that the Committee had discussed a number of key areas including social listening and the HIS major change threshold. Ms Kerr said that the report highlighted that the Committee worked agilely to address key emerging matters on a timely basis while ensuring its core business was discussed.</p> <p>In response to a query about social listening, the Chair said that this issue had been discussed at the Board Seminar on 30 May 2023 and in more detail at the FPPC on 20 June 2023. He said that it was important to note that this matter had not been taken lightly. Mrs Grant added that an error had been made on this occasion and apologies had been issued both privately and publicly with steps been taken to ensure this did not happen again.</p> <p>The Board were content to note the report.</p> <p>NOTED</p>		
b)	Approved Minute of Meeting held on 18 April 2023		
	<p>The Board considered the paper ‘Approved Minute of Meeting held on 18 April 2023 2023’ [FPPC(M)23/02] presented for assurance.</p> <p>The Board were content to note the minute.</p> <p>NOTED</p>		
64.	Audit and Risk Committee		
a)	Chair’s Report of Meeting held on 20 June 2023		
	<p>The Board considered the paper ‘Chair’s Report of Meeting held on 20 June 2023’ [Paper No. 23/42] presented for assurance by Ms Michelle Wailes, Chair of the Committee.</p> <p>Ms Wailes reported that the Committee had met twice in June with both meetings focused on annual accounts - the first meeting</p>		

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	<p>on the governance of the annual accounts and the second meeting to review the annual accounts. Ms Wailes advised that work was ongoing between the finance team and the external auditors with a further meeting taking place later today to finalise the annual accounts.</p> <p>The Chair said that there had been significant work undertaken to resolve this in time for the 30 June 2023 deadline and extended his thanks to everyone involved.</p> <p>The Board were content to note the report</p> <p><u>NOTED</u></p>		
b)	Approved Minute of Meetings held on 14 March 2023 and 6 June 2023		
	<p>The Board considered the paper ‘Approved Minute of Meetings held on 14 March 2023 and 6 June 2023 [ARC(M)23/01 and ARC(M) 23/02] presented for assurance.</p> <p>The Board were content to note the minutes.</p> <p><u>NOTED</u></p>		
65.	NHSGGC Finance Report		
	<p>The Board considered the paper ‘Finance Report’ [Paper No. 23/43], presented by Mr Colin Neil, Director of Finance.</p> <p>Mr Neil presented the month 12 position, subject to year-end audit. He said the Board had recorded a surplus of £0.56m. He said that the Acute Directorate was overspent by £13.58m which was offset by an underspend in the Corporate Directorates of £13.37m and an underspend in partnerships of £0.76m. He reported that all COVID-19 expenditure had been covered in full.</p> <p>In terms of the Sustainability and Value Programme, Mr Neil said that the financial plan in place for 2022/23 had set a recurring savings target of £50m and the Board had exceeded this meeting £54.8m which had slightly reduced the carry forward deficit position. Mr Neil also reported that the capital resource limit had been met and achieved in year.</p> <p>In closing, Mr Neil said that there had been a strong and incremental progress against the challenges noted when the revised plan had been discussed by the Board in August 2022 which had enabled the Board to reach this position. However, Mr</p>		

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	<p>Neil cautioned that there was a significant challenge facing the Board in 2023/24 with a deficit position of £71.1m as set out in the financial plan approved by the Board in April 2023.</p> <p>The Chair thanked Mr Neil for presenting the complex financial framework.</p> <p>The Board were content to note the report.</p> <p><u>NOTED</u></p>		
66.	Staff Governance Committee		
a)	Chair’s Report of Meeting held on 23 May 2023		
	<p>The Board considered the paper ‘Chair’s Report of Meeting held on 23 May 2023’ [Paper No. 23/44] presented for assurance by Ms Ketki Miles, Co-Chair of the Committee.</p> <p>The Board were content to note the report.</p> <p><u>NOTED</u></p>		
b)	Approved Minute of Meeting held on 21 February 2023		
	<p>The Board considered the paper ‘Approved Minute of Meeting held on 21 February 2023’ [SGC(M)23/01] presented for assurance.</p> <p>The Board were content to note the minute.</p> <p><u>NOTED</u></p>		
67.	Pharmacy Practice Committee - Decisions		
	<p>The Board considered the paper ‘Pharmacy Practice Committee - Decisions’ [Paper No. 23/45] presented for assurance by Mr Charles Vincent, Chair of the Committee.</p> <p>The Board was made aware that there had been change of ownership of a number of Lloyds pharmacies across NHSGGC. Dr Armstrong added that the national prison contract had also now been moved to another provider. Dr Armstrong provided assurance that the Director of Pharmacy, Ms Gail Caldwell, and her team were working with the new owners to ensure continuity of pharmaceutical services during the transition and the provision</p>		

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	<p>of community pharmacy services continues to meet the needs of the local population.</p> <p>The Board were content to note the report.</p> <p><u>NOTED</u></p>		
68.	Annual Review of Governance – Operating Requirements		
	<p>The Board considered the paper ‘Annual Review of Governance – Operating Requirements’ [Paper No. 23/46] presented for approval by Ms Elaine Vanhegan, Director of Corporate Services and Governance.</p> <p>Ms Vanhegan reported that this annual review of the governance framework was core to the governance of the Board and included the Model Code of Conduct for members of NHS Greater Glasgow and Clyde; the NHS Board Standing Orders, including Decisions Reserved for the NHS Board; the Standing Financial Instructions; the Scheme of Delegation; the Standing Committee Terms of Reference; and, the Standing Committee Annual Reports</p> <p>Ms Vanhegan advised that there had been some minor changes to the Standing Financial Instructions which were set out in the cover paper. All Committee Terms of Reference and Annual Reports had been reviewed and approved by the respective Committees over the last few months.</p> <p>Ms Vanhegan advised that this had been reviewed at the Audit Committee on 20 June 2023 who had endorsed this to be presented to the Board for approval</p> <p>The Board were content to approve the paper.</p> <p><u>APPROVED</u></p>		
69.	Active Governance Update		
	<p>The Board considered the paper ‘Active Governance Update’ [Paper No. 23/47] presented for approval by Ms Elaine Vanhegan, Director of Corporate Services and Governance.</p> <p>Ms Vanhegan reported that there had been a further Assurance Information Framework Short Life Working Group at the end of May and significant work had been undertaken to review</p>		

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DRAFT – TO BE RATIFIED

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	<p>comments from Non Executive colleagues, benchmark the draft Framework with other NHS and IJB Boards and ensure alignment with the guidance on assurance information set out in the second edition of the Blueprint for Good Governance in NHS Scotland.</p> <p>Ms Vanhegan said that some final work was being undertaken supported by Mr Neil and the performance team over the next few months with a view to presenting this to Board for approval in August 2023 with the first information being presented to the Board October 2023. Following this, the information flows to the Standing Committees would be reviewed and aligned to the new Assurance Information Framework. The Board were assured by the position on the development of the Assurance Information System.</p> <p>Ms Vanhegan presented the updated Board Member responsibilities document noting that there were a number of changes as set out in the cover paper.</p> <p>The Board were content to approve the report.</p> <p><u>APPROVED</u></p>		
70.	Annual Cycle of Business		
	<p>The Board considered the paper ‘Annual Cycle of Business’ [Paper No. 23/48] presented for approval by Ms Elaine Vanhegan, Director of Corporate Services and Governance.</p> <p>Ms Vanhegan said that the paper described the timetable of topics for discussion, the business items that would be considered and their alignment to the Corporate Objectives. She said that this was subject to change and any alterations would be advised to the Board and annotated on the Annual Cycle of Business.</p> <p>The Board were content to approve the paper.</p> <p><u>APPROVED</u></p>		
71.	Date of Next Meeting		
	<p>There would be an adhoc meeting of the Board taking place on Friday 30 June 2023 at 9.00 am to sign off the annual accounts. The next scheduled meeting of the Board would be held on Tuesday 29 August 2023 at 9.30 am via MS Teams.</p>		