

PRG(M)05/06  
Minutes : 46 - 55

GREATER GLASGOW NHS BOARD

**Minutes of the meeting of the  
Performance Review Group held at 9.00 a.m.  
on Tuesday, 15 November 2005 in  
the Conference Room, Dalian House,  
350 St Vincent Street, Glasgow**

**PRESENT**

Mr A O Robertson OBE (in the Chair)

Mr R Cleland	Cllr. J Handibode
Cllr. J Coleman	Mrs S Kuenssberg CBE
Dr R Groden	Mr D Sime
Mrs E Smith	

**OTHER NHS BOARD MEMBERS IN ATTENDANCE**

Sir John Arbuthnott	Mr T A Divers OBE
Mr J Best	Cllr. R Duncan (from Minute 51)
Mr R Calderwood	Mr P Hamilton
Ms R Crocket	Mr G McLaughlin

**IN ATTENDANCE**

Mr D Griffin	... Acting Director of Finance
Mr J C Hamilton	... Head of Board Administration
Ms C Renfrew	... Director of Planning and Community Care

**ACTION BY**

46. **APOLOGIES**

Apologies for absence were intimated on behalf of Cllr. D Collins, Ms R Dhir MBE and Mrs A Stewart MBE.

47. **MINUTES**

On the motion of Mr R Cleland and seconded by Dr R Groden, the Minutes of the Performance Review Group held on 20 September 2005 [PRG(M)05/05] were approved as an accurate record.

48. **MATTERS ARISING**

a) Annual Review

The outcome of the Annual Review meeting held with the Minister for Health and Community Care and members of the Scottish Executive Health Department (SEHD) Management Board on Wednesday, 31 August 2005 had been included in the agenda for the NHS Board meeting later that day.

b) Performance Management Arrangements

The draft proposals for the future performance management arrangements had been discussed with members at the NHS Board Seminar on 4 October 2005. A further iteration of the proposals, taking account of members' comments, would be submitted to a future NHS Board Seminar for discussion. The timing of the Seminar would be determined by the issuing of the draft National Guidance, which was due to be issued by the end of November 2005.

c) New Stobhill and Victoria – Draft Final Business Case

In relation to Minute 40 – Overview of the Governance Arrangements – New Hospitals – Stobhill and the Victoria – Mr Calderwood advised members that the Consortia were at the detailed planning application stage with the City Council for the Victoria and an application for detailed planning consent for Stobhill would be submitted in December/January 2006.

Thereafter, once planning permissions had been approved, a final price structure would be submitted by the Consortia and the aim was to submit a Final Business Case to the February NHS Board meeting. If these timetables were met then financial close would be achieved by the end of April 2006 and a start on both sites by early June 2006.

49. **TENDER REPORT – NEW ROAD AT QUEENS PARK RECREATION GROUND**

There was submitted a paper [Paper No. 05/25] from the Programme Director – Acute seeking approval to accept a tender submitted for the provision of the new road at the Queens Park Recreation Ground and a temporary car park at the former Queens Park House. The new Victoria Hospital development at Queens Park Recreation ground had a planning requirement which imposed a duty on the NHS Board to create a new road through the existing Queens Park Recreation ground, connecting Grange Road and Prospecthill Road. This new road would replace the present Annan Street, which dissects the new hospital footprint. Thereafter Annan Street would be subject to Closure Order promoted by the City Council.

In addition, the NHS Board had submitted a planning application for the creation of a temporary Car Park in the 'Nose Site' of the former Queens Park House School.

Mr Calderwood explained the tender process involving four contractors and the evaluation process undertaken on the submitted bids.

Mr Calderwood advised that the planning application for the new Victoria Hospital was being reviewed by the City Council and he had explained at the previous agenda item the timetable for the Final Business Case and Financial Close. These were also linked to the planned purchase of the required site from the City Council and these negotiations were ongoing, with the NHS Board's sole intention of purchasing the required site for the purposes of building the new hospital. Mr Calderwood wished to highlight to members the potential risk of agreeing to accept the tender for the construction of the new road ahead of acquiring the required site and receiving the final approvals relating to planning and financial close. There was every expectation that the project would proceed as planned and early construction of the new road would assist with the ability to commence construction work on the new hospital almost immediately after the necessary approvals had been granted.

**DECIDED:**

That the tender submitted by R J McLeod for the value of £1,406,525 (exclusive of VAT) for the provision of the new road at Queens Park Recreation Ground and temporary car park at the former Queens Park Home ground be accepted.

*Programme  
Director - Acute*

**50. FINANCIAL REPORT FOR 6 MONTHS TO 30 SEPTEMBER 2005**

There was submitted a report [Paper No. 05/26] from the Acting Director of Finance setting out the financial mid-year review to 30 September 2005. The report indicated that the NHS Board continued to forecast a balanced financial position at the year end.

The out-turn for the first six months highlighted expenditure exceeding available funds by £1.3m, which was mainly attributed to additional expenditure within Acute Services, rising energy and nursing expenditure levels.

Mr Sime asked if there were any plans to consider a public sector approach to contracting for energy. It was felt that this may form part of the next steps of the Efficient Government Initiative and public authorities could be asked to review expenditure across different public sectors. Opportunities would also be available when constructing the new NHS facilities over the coming years to combine heat and power to lead to greater energy efficiency savings.

**NOTED**

**51. MID-YEAR REVIEW OF 2005/06 FINANCIAL PLAN**

There was submitted a report [Paper No. 05/27] from the Acting Director of Finance describing the outcome of the recently completed review of the 2005/06 Financial Plan. The report confirmed that it was reasonable for the NHS Board to forecast that it would manage the total expenditure within the total available resource allocation of £1.8 billion for 2005/06 and consequently remain within its revenue resource limit for 2005/06.

Mr Griffin took members through the report in detail and highlighted the following:-

- i) Land Sales – planned land sales of £7.5m, with £1m received to date and the balance of receipts anticipated through the Kirkintilloch Initiative (disposal of land at the former Woodilee Hospital) and/or disposal of surplus land at the former Belvidere Hospital site. The Board's Property Advisers had confirmed that it continues to be reasonable to forecast that this level of receipt can be realised in 2005/06.
- ii) Asylum Seekers – the NHS Board would have continued discussions with the SEHD in an attempt to secure additional funding for this patient group. £1.5m had been retained within the income forecast for 2005/06, however, the risk of not securing this amount can be regarded as high.
- iii) Corporate Recovery Plan savings targets had been embedded within the Divisional expenditure budgets and thus far overall savings were forecast to be slightly ahead of plan.

- iv) Implementation of the Acute Services Review – the construction of new facilities could be expected to produce a significant increased capital charge which would remain for the duration of the residual lives of existing buildings due to the ‘impairment’ of these buildings.

SEHD funding was typically available and therefore a bid for funding in tandem with submitting our annual capital charges return would be undertaken. The impact of impairment was likely to commence in 2006/07 and likely to feature in the context of the Auditor’s review of the 2005/06 Annual Accounts and Financial Plan for 2006/07.

- v) Financial Plan – following discussions with the SEHD, it had been agreed to incorporate an additional cost improvement target of £10.4m for 2005/06.
- vi) Nursing expenditure – it was reported that Ms Crocket was leading a project to achieve savings on the agency/bank nursing costs over a 2-year period. With the significant efforts being made to achieve the Ministerial commitments associated with waiting time targets by the end of December 2005 and the issues associated with changes in payment from the Agenda for Change initiative, it had been necessary to access agency and bank nurses at a greater level than had originally been planned. A review would be undertaken of nursing expenditure to confirm whether the original 2-year target could still be met.

*Director of  
Finance/Nurse  
Director*

The Chair thanked Mr Griffin for his comprehensive and clear report on the review of the 2005/06 Financial Plan.

**NOTED**

**52. WEST OF SCOTLAND ADOLESCENT SERVICES – 24-BED MENTAL HEALTH IN-PATIENT WARD: FULL BUSINESS CASE**

There was submitted a paper and Full Business Case [Paper No. 05/28] seeking approval to establish a 24 in-patient bed facility for adolescent health services for the West of Scotland on the Stobhill Hospital site.

The development of mental health services for adolescents was identified as a national priority and West of Scotland NHS Boards had worked together to establish a proposal for the in-patient facility to be located within NHS Greater Glasgow. The West of Scotland Regional Planning Group approved the Full Business Case on 7 November 2005.

**DECIDED:**

That the Full Business Case for the establishment of a 24 in-patient bed facility for adolescent mental health services for the West of Scotland NHS Board and located at Stobhill Hospital at a cost of £7.6m (NHSGG’s share - £4.492m) be approved.

*Acting Chief  
Executive, Primary  
Care Division*

**53. COMMUNICATION ISSUES: AUGUST – NOVEMBER 2005**

There was submitted a report [Paper No. 05/19] from the Director of Corporate Communications covering the communication issues from mid-August to mid-November 2005.

Mr McLaws highlighted the following:-

- i) Our Health Event – 31 August 2005: over 300 delegates had attended and received progress on the new developments at the new Beatson, Victoria and Stobhill Hospitals.
- ii) Annual Review – this followed on from the Our Health Event at the Royal Concert Hall and was Chaired by the Minister for Health and Community Care. Over 100 people from the Involving People network had attended.
- iii) Hospital Modernisation Programme – over 10,000 DVDs and new leaflets had been issued on the new Beatson, new Stobhill and Victoria Hospitals.
- iv) Royal Visit by His Royal Highness, the Earl of Wessex on 12 October 2005 to open the new state-of-the-art intensive care and high dependency unit at the Royal Hospital for Sick Children.
- v) Minimising Violence and Aggression Towards Staff – launch of NHSGG-wide Policy on 17 October 2005.

Sir John asked about the initiative to expand the Involving People Database and the expectations of involvement of those who joined the database. Mr P Hamilton replied that individuals would determine their own involvement, ranging from just receiving newsletters and consultation documents to attending strategy forming groups and steering groups. Currently, the team were working with Fiona Moss, Deputy Director of Health Promotion, on the establishment of the Public Partnership Forums being set up as part of the process to implement Community Health Partnerships (CHPs).

NOTED

#### 54. **NHS ARGYLL AND CLYDE: DISSOLUTION AND INTEGRATION**

Following on from the discussion at the November NHS Board Seminar, Mr Divers provided members with a further update on the NHS Argyll and Clyde dissolution and integration issues. Members received copies of the Minutes of the Project Board meetings and had access to the website which contained the key documentation in relation to dissolution and integration.

The SEHD consultation had ended on 11 November 2005 and the outcome on the expanded boundaries of NHS Greater Glasgow and NHS Highland was expected in December 2005.

Mr Divers highlighted ongoing issues and in particular the consultative proposals being developed for a future structure from 1 April 2006; the Financial Plan and what would be expected of NHS Greater Glasgow by way of targets and responsibilities in the early years of the expanded boundaries.

In response to a question from Mr R Cleland about responsibilities, Mr Divers advised that NHS Argyll and Clyde existed until 31 March 2006 and therefore was responsible for all its own acts and omissions up until that date. 1 April 2006 would see the transfer of responsibilities to NHS Greater Glasgow and NHS Highland.

**ACTION BY**

Sir John made reference to the meeting he and Mr Divers had with the SEHD on 10 May 2005 which discussed the Financial and Savings Plan and the Clinical Strategy. Sir John was meeting with the Chair of NHS Highland and the Minister at the end of November 2005 to discuss the outcome of the consultation and associated matters.

A further update would be provided to members at the December NHS Board Seminar.

*Chief Executive*

**NOTED**

55. **DATE OF NEXT MEETING**

The next meeting of the Performance Review Group would be held at 9.30 a.m. on Tuesday, 24 January 2006 in the Board Room, Dalian House, 350 St Vincent Street, Glasgow.

The meeting ended at 10.20 a.m.