NHS GREATER GLASGOW AND CLYDE

Minutes of the meeting of the
Performance Review Group held at 9.15 a.m.
on Tuesday, 20 March 2007 in
the Board Room, Dalian House,
350 St Vincent Street, Glasgow, G3 8YZ

PRESENT

Mr A O Robertson OBE (in the Chair)
Mr R Cleland Mr P Hamilton
Cllr. R Duncan Mr D Sime
Mrs A Stewart MBE

OTHER NHS BOARD MEMBERS IN ATTENDANCE

Sir John Arbuthnott Mr D Griffin
Mr G Carson Ms G Leslie
Mr T A Divers OBE Mr B Williamson

IN ATTENDANCE

Ms H Byrne … Director of Acute Services Strategy, Implementation and Planning
Mr R Calderwood … Chief Operating Officer, Acute Services Division
Mr T Eltringham … Head of Health and Community Care, East Renfrewshire CHCP
(for Minute 17)
Mr J C Hamilton … Head of Board Administration
Mr A McClaws … Director of Corporate Communications
Mr J Rundell … Audit Scotland
Mr D Walker … Head of Performance and Corporate Reporting

ACTION BY

12. WELCOME AND APOLOGIES

The Chair welcomed Mr J Rundell, Audit Scotland, Mr Grant Carson, Non-
Executive Director, and Mr Tim Eltringham, Head of Health and Community Care, East Renfrewshire CHCP, to their first meeting of the Performance Review Group.

Apologies for absence were intimated on behalf of Ms R Dhir MBE, Cllr. J Handibode and Mrs E Smith.

13. MINUTES

On the motion of Cllr. R Duncan and seconded by Mr D Sime, the Minutes of the Performance Review Group meeting held on 16 January 2007 [PRG(M)07/01] were approved as an accurate record.
14. MATTERS ARISING

a) Renfrew Health and Social Care Centre – Outline Business Case

In relation to Minute 4 – Renfrew Health and Social Care Centre – Outline Business Case – Mr Griffin reported that the Capital Investment Group, Scottish Executive Health Department (SEHD) had approved the Outline Business Case and preparation was now under way to pull together the Final Business Case. Discussion would continue with the SEHD on contributions to the revenue costs.

b) National Shared Services – Draft Final Business Case

In relation to Minute 9 – National Shared Services – Draft Final Business Case – Mr Griffin reported that the NHS Board in common with other Boards, had submitted a response as requested by National Services Scotland (NSS) on the draft Final Business Case. In view of the responses received from Health Boards, NSS had decided not to take forward the Final Business Case but to adopt an alternative approach, aimed at standardising work practices and procedures across Health Boards in the first instance, and using this as a platform for a future move towards a shared services approach. This was closely in line with the views expressed by NHSGG&C regarding how the national shared services approach should be taken forward.

15. NEW SOUTH-SIDE HOSPITAL AND CHILDREN’S HOSPITAL - UPDATE

There was submitted a paper [Paper No. 07/09] from the Director of Acute Services Strategy, Implementation and Planning, which provided an update on the progress being made to complete the Outline Business Case for the new South-Side Hospital and Children’s Hospital.

Ms Byrne reported that high level design configurations had been completed and additional design detail would allow the production of an exemplar plan for the hospitals. Discussions had been held with clinicians and stakeholders to firm up on schedules of accommodation and the first draft of the campus plan had been submitted to Glasgow City Council. The formal Outline Planning Application would be submitted to the Council by the end of the month or early April.

The Clinical Advisory Group had agreed the Children’s Hospital bed numbers target and the current design was intentionally flexible to enable alterations in size as required as a result of local discussions or on the outcome of national work under way in relation to reviewing a number of specialist areas. Discussions were being held with the West of Scotland NHS Boards and the National Services Division on planning the new Children’s Hospital to reflect the large proportion of patients who access services at the Children’s Hospital from outwith NHS Greater Glasgow and Clyde.

Mr P Hamilton referred to the ongoing community engagement process under way with the public and stakeholders and the involvement of the Architect in these discussions.
Mr Sime enquired about the links to the planning of laboratory services – discussions were ongoing on how best to take forward the review of laboratory services.

Mr Cleland was advised in relation to a point he had raised that the new Stobhill and Victoria Hospitals did not have dedicated palliative care outpatient provision.

**NOTED**

16. **BED MODELLING – EXTERNAL AUDITORS’ REPORT**

There was submitted a paper [Paper No. 07/10] from the Director of Acute Services Strategy, Implementation and Planning, on the external auditors’ report on the bed modelling process which had been put in place to underpin the NHS Board’s Acute Services Strategy.

As a result of the debate in the Scottish Parliament in September 2002, a number of steps were introduced to monitor the implementation of the Acute Services Strategy. North and South Monitoring Groups were established with elected representatives, local community representatives and staff partnership involvement in order to monitor for five years the retention of named services at Stobhill and the Victoria Infirmary. In addition, the Auditor General was asked to monitor the implementation of the various strands of the Acute Services Strategy. The Auditor General in turn arranged for the then NHS Board’s external auditors – PricewaterhouseCoopers – to conduct this review.

As part of this process, the external auditors undertook a review of the processes and governance arrangements in place in relation to the bed planning project to support the Acute Services Strategy.

The external auditors produced their report last year and a number of meetings had been held between officers of the NHS Board and the auditors in order to agree the factual accuracy of the report. The report attached with the paper had been finalised with the auditors and the Action Plan agreed by both parties.

Ms Byrne took members through the key recommendations of the report and explained the actions undertaken by the NHS Board to address the areas highlighted. This had seen the completion of another significant strand of the review of governance arrangements which supported the Acute Services Strategy and brought to an end the auditors’ role in this particular area of work.

In relation to the completion of the Bed Model, Ms Byrne advised work was still under way with clinicians to ensure the appropriate number of beds to support the Acute Services Strategy was provided for.

**DECIDED:**

1. That the external auditors report into the Review of Bed Modelling be received.

2. That the actions to address the report’s recommendations be noted.
3. That the continuing work to ensure the appropriate bed numbers across the hospitals in NHS Greater Glasgow, once the Acute Services Strategy had been completed, was noted.

17. **BARRHEAD HEALTH CENTRE – OUTLINE BUSINESS CASE**

There was submitted a paper [Paper No. 07/11] from the Director, East Renfrewshire Community Health and Care Partnership, seeking approval to the Outline Business Case for the Modernisation and Re-Design of Primary and Community Health and Social Care Services and Facilities for Barrhead.

Mr T Eltringham, Head of Health and Community Care, East Renfrewshire Community Health and Care Partnership, presented the paper to members and provided the background to the proposal; the desire to develop primary care and community based health services alongside social care services; the Project Board’s consideration of the various options for this development, the funding proposals agreed with the SEHD and the proposed timetable of the various stages of the process.

Mr P Hamilton spoke of the positive engagement with the public and the Public Partnership Forum for this project.

The Chair raised two issues – the intended exchange of land with the local authority and the agreement on the rent for shared occupancy. Both had been described in the Outline Business Case and would be subject to ongoing negotiations between both parties. East Renfrewshire Council would make a capital contribution to the new build of £3m plus VAT.

The map highlighting the geographic area covered by the proposed service would be improved in the Final Business Case.

**DECIDED:**

That the Outline Business Case for the Community Health and Social Care Services and Facilities at Barrhead be approved for submission to the Capital Investment Group, SEHD.

**ACTION BY**

**DASSIP**

18. **PROPOSED CAPITAL PLAN – 2007/08**

There was submitted a paper [Paper No. 07/12] from the Director of Acute Services Strategy, Implementation and Planning, which set out proposals for the allocation of the 2007/08 capital resources for NHS Greater Glasgow and Clyde and the capital planning process for 2007/08.

The NHS Board had received confirmation of the allocation of capital funds for 2007/08 - £106.575m (made up of £97.606m under the national formula and £8.969m for medical equipment). In addition, £34.045m was available for the completion of ongoing schemes (the new Beatson Oncology Centre and the primary and community care premises modernisation programme at Springburn, Partick, Drumchapel and Yoker) and the carry forward from the 2006/07 capital programme.
The Capital Planning Group set out recommendations for the allocation of the capital resources – covering acute services, the acute services strategy, Partnerships, including the Mental Health Partnership and CH(C)Ps for NHS Greater Glasgow and Clyde. Priority was given in the general allocation for minor new local schemes, the completion of existing schemes and essential new schemes. This incorporated allocations for Health and Safety, Medical Equipment and IM&T schemes (including Fire Precautions, implications of the Disability Discrimination Act and Infection Control).

In view of the likely significant over-commitment of capital funds for 2008/09 and 2009/10, the current plan had an identified under-commitment and discussions would be held with the SEHD to seek agreement about managing the capital plan over the three-year period.

Mrs Stewart sought assurances that cognisance had been taken of local authority timescales for committing their capital allocations, especially in connection with joint working across the CHCPs. Mr Griffin confirmed that this had been an important consideration this year and there were a number of joint schemes which were being taken forward by the CH(C)Ps.

Mr Cleland sought, and received, confirmation that the refurbishment and upgrading of existing facilities was ongoing and included in the capital plan.

Mr Bannon had submitted a note in his absence about the proposal affecting the phased upgrading programme for the Dental Hospital and School – he recalled that the Oral Health Strategy had suggested the possible replacement of the Dental Hospital on another site. It was reported that following a recent survey, it was possible to carry out an upgrading programme at the Dental Hospital which would provide a 10/15-year life-span. An event held between staff, students and patients had endorsed the benefits of the refurbishment scheme. The Director of the Oral Health Directorate would contact Mr Bannon direct to let him know the background and changes of priorities in relation to the Dental Hospital.

The Chair asked if a future Performance Review Group meeting could receive a Fabric Report on the estate within NHS Greater Glasgow and Clyde. This was agreed.

**DECIDED:**

1. That the proposed allocation of capital funds for 2007/08 be approved.

2. That the Capital Planning Group be delegated authority to allocate the available capital funds for 2007/08 and submit a monitoring report to the Performance Review Group, be approved.

3. That the capital planning process for 2007/08 and submission at a later date of the 2008/09 and 2009/10 capital plan be noted.

19. **QUARTERLY PERFORMANCE REPORT**

There was submitted a paper [Paper No. 07/13] from the Director of Corporate Planning and Policy which set out the third Quarterly Performance Report covering October – December 2006.
Mr Walker took members through the report in detail and drew members’ attention to the fact that elements of ‘Clyde’ were still working from different data sources and some indicators were not yet capable of quarterly updating – in particular, the health status and health inequalities sections. These points were subject to consideration in order to identify additional and more appropriate proxy measures for performance reporting.

Mr Williamson enquired about clinical performance in relation to efficiency. The example of the targets for diagnostics and impact on services would be written up on a worked example to highlight issues for discussion.

The comments in the report on cancer wait times were noted and it was acknowledged that the validated figures had shown a significant improvement in this area over the last year. This could be highlighted in a future edition of Health News.

**NOTED**


There was submitted a report [Paper No. 07/14] from the Director of Finance which updated members on the progress with the development of a financial plan for NHS Greater Glasgow and Clyde for the 3-year period to 2009/10.

Mr Griffin advised that each Directorate/Partnership was currently in the process of submitting its priorities for new investments over the 3-year period: once received these submissions would be reviewed and converted into a single list of high priority proposals for new investment which would then be incorporated into the financial plan.

The Outline Financial Plan, with the exception of proposed new service commitments, was submitted and Mr Griffin highlighted specific areas from the commentary: in particular, an assumption on pay uplift for 2007/08; the carry forward of the proceeds of the disposal of the former Woodilee Hospital; the provision for the uplift in supplies and services costs; funding commitments where funding was set aside but the expenditure not fully under way; unavoidable service commitments and the Clyde cost savings plan. It was assumed that the SEHD would provide transitional funding to cover the ‘Clyde’ component of the deficit as it reduced over the 3-year period.

Discussions were at an advanced stage with NHS Highland on the finalisation of SLA values, following distribution of costs following the dissolution of the former NHS Argyll and Clyde Board.

A paper would be submitted to the NHS Board seeking approval of the financial plan for the 3-year period to 2009/10.

**NOTED**

21. **FINANCE REPORT TO 31 JANUARY 2007**

There was submitted a report [Paper No. 07/15] from the Director of Finance setting out the Financial Monitoring Report to January 2007.
Mr Griffin reported that the year-end forecast position was currently expected to be a surplus of £26m due to the impact of property disposals which were expected to be concluded at the end of the financial year. SEHD agreement had been granted to carry forward this benefit to 2007/08 and then utilised on a non-recurring basis to support the achievement of national waiting times targets by 31 December 2007.

Expenditure on acute services was broadly in line with budget; expenditure in the NHS Partnerships was also within budget and the financial out-turn for ‘Clyde’ remained closely in line with budget which meant that the ‘Clyde’ area continued to operate at an expenditure level some £28m to £30m in excess of available recurrent funds.

**NOTED**

22. **COMMUNICATIONS ISSUES: 17 JANUARY – 9 MARCH 2007**

There was submitted a report [Paper No. 07/16] from the Director of Corporate Communications covering communications actions and issues from 17 January – 9 March 2007.

Mr McLaws highlighted:-

1. The intense media management generated by car parking, winter pressures and allegations of manipulation of Availability Status Codes of orthopaedic patients.

2. The outcome of the ‘South Clyde’ Hospital Services Consultation - Inverclyde Royal and Royal Alexandra, Paisley.

3. The media tour of the new West of Scotland Beatson Oncology Centre and the resultant positive media coverage.

4. A substantial increase in the number of visitors to the re-designed NHS Greater Glasgow and Clyde website.

**NOTED**

23. **DATE OF NEXT MEETING**

The next meeting of the Performance Review Group would be held at 10.30 a.m. on Tuesday, 15 May 2007 in the Board Room, Dalian House, 350 St Vincent Street, Glasgow, G3 8YX.

The meeting ended at 10.55 a.m.
24. **WELCOME**

The Chair welcomed Mr Peter Daniels, Non-Executive Director, Mrs Sandra Bustillo, Head of Communications – Acute, and Ms Jo Quinn, Head of Performance Management and Corporate Reporting to their first meeting of the Performance Review Group.

25. **MINUTES**

On the motion of Mr P Hamilton and seconded by Mr R Cleland, the Minutes of the Performance Review Group meeting held on 20 March 2007 [PRG(M)07/02] were approved as an accurate record.

26. **MATTERS ARISING**

a) **New South-Side Hospital and Children’s Hospital: Update**

In relation to Minute 15 – New South-Side Hospital and Children’s Hospital: Update – Ms Byrne advised that work was progressing to finalise the Outline Business Case (OBC). In particular, she focused on the areas of the bed model, affordability, re-design work with the West of Scotland NHS Boards on service changes, bringing two maternity services into one model and liaison with the University of Glasgow over a Clinical Research facility, Academic Centre, Education Centre requirements and other areas of joint interest.
A paper would be submitted at a later date to the Performance Review Group on the range of discussions with the University.

Mr P Daniels had declared an interest and had withdrawn from the meeting during the discussions on the matters relating to the University of Glasgow.

Mr Seabourne, Project Director, New South-Side Hospital, advised members that the outline planning application for the Southern General site had been submitted to Glasgow City Council on 12th April 2007. Invitations were being prepared to submit to potential tenderers for this work and work was ongoing in developing the Public Sector Comparator.

The OBC would be further discussed at the June NHS Board Seminar with the intention of submitting the OBC to the June NHS Board meeting for approval.

**NOTED**

b) **Barrhead Health Centre – Outline Business Case**

In relation to Minute 17 – Barrhead Health Centre – Outline Business Case – Mr Griffin reported that the Capital Investment Group, Scottish Executive Health Department (SEHD) had approved the Outline Business Case and preparation was now under way to pull together the Final Business Case by May 2008.

**NOTED**

c) **Renfrew Health and Social Care Centre**

In relation to Minute 14(a) – Renfrew Health and Social Care Centre – Mr P Hamilton enquired about the arrangements and negotiations on the possible exchange of land and shared occupancy. Mr Griffin advised that both issues would be taken forward as part of the development of the Final Business Case.

**NOTED**

27. **TECHNICAL ADVISER FEES AND INCREASED SCOPE OF PROJECT – NEW SOUTH GLASGOW AND CHILDREN’S HOSPITALS DEVELOPMENT AND NEW LABORATORY**

There was submitted a paper [Paper No. 07/17] from the Director of Acute Services Strategy, Implementation and Planning, which set out the background to the current Technical Adviser’s appointment and the advice received in relation to the additional work to be included in this project at the next stages.

Mr Seabourne took members through the paper and explained that the Project Team were now embarking on the development of stages two to six for both the new adult and new Children’s Hospitals and now the inclusion of the new Laboratory development. An extension of the current Technical Adviser’s commission to take account of the significant increase in fees would incur breaking European procurement rules and the Board’s Standing Financial Instructions. Advice had also been received from the Legal Advisers which supported the need to re-tender the Technical Adviser’s contract.
Mr Seabourne set out the risks associated with re-tendering, in particular, the possible slippage in the project of approximately 3 months.

Mrs Smith advised that the Audit Committee would support re-tendering this contract and Sir John received clarification that other possible developments on the site would be treated separately in terms of professional and technical advice/support.

**DECIDED:**

That the re-tendering of the Technical Adviser’s role for the new major projects at the Southern General Hospital (Adult and Children’s Hospitals and the new Laboratory) be approved.

**UPDATE OF REVIEW OF PERFORMANCE FRAMEWORK**

There was submitted a paper [Paper No. 07/18] from the Head of Performance Management and Corporate Reporting which provided the outcome of the review with key stakeholders on the performance framework for 2006/07. The aims of the review were to assess the CH(C)P performance management framework in light of experience, any new requirements and new developments and to agree any changes in the 2007/08 performance arrangements and identify the work to be advanced in 2007/08.

The review took the format of a session covering Glasgow City Council and a separate review for the full area covered by NHS Greater Glasgow and Clyde.

Members were asked to provide any comments on the draft Action Plan to Ms Quinn, who would thereafter meet with Acute and Partnership colleagues to finalise the plan and submit it to the Group’s next meeting for final endorsement.

Members asked that the role of carers be added to the third action in the Action Plan in relation to engaging with service users and carers on developing performance reporting, annual reviews and development plans.

**DECIDED:**

That the process for confirming and monitoring the Performance Framework Action Plan be approved.

**PREPARATION FOR ANNUAL REVIEW**

There was submitted a paper [Paper No. 07/19] from the Head of Performance Management and Corporate Reporting setting out the arrangements for the NHS Board’s annual Review with the Scottish Executive Health Department.

A provisional date of 14 August 2007 had been set and Ms Quinn explained the preparations under way, including updating the progress against last year’s Action Plan, reviewing progress against all Local Delivery Plan trajectories in 2006/07 and preparing for the annual self-assessment submission.

**NOTED**

There was submitted a paper [Paper No. 07/20] from the Director of Finance setting out the Financial Plan for 2007/08 – 2009/10.

Mr Griffin advised that a draft Financial Plan had been submitted as required to the SEHD and he was now seeking approval to the finalised Financial Plan. The total budget for 2006/07 was £2,448m and was forecast to increase to £2,765m during the 3-year period to 2009/10.

He went on to highlight the assumptions which underpinned the Financial Plan, specifically in terms of the anticipated general funding uplift and general pay uplift. The costs saving plan was concentrated on the requirement to address the £30m gap which existed between recurring funding and expenditure related to Clyde. £7m saving was targeted in a cost saving plan in 2007/08 and a further £4m from non-recurrent savings was forecast. Discussions continued with the SEHD on how the residual funding gap of £19m might be bridged in this and the subsequent financial year.

Mr Griffin highlighted the move to create a clearer relationship between planning and resources and the Board’s Policy, Planning and Performance Group’s consideration of the outputs from this year’s planning process and an agreed approach to funding new service developments. It had been agreed to allocate £2m recurrent provision in 2007/08 for addressing inequalities and priorities identified on disability, substance misuse and vulnerable children.

In addition, it had been planned to make available a further £2m of non-recurrent funding in 2007/08 for proposals which either re-designed key service priorities or delivered medium term cost reductions.

There was discussion about the assumptions and the key areas of risk which could impact on the Board’s ability to achieve financial break-even on a recurring basis. The main challenges affecting the Board’s ability to achieve its financial targets had been set out in the first four sections of the paper and section 5 covered the Risk Assessment.

Mrs Stewart asked about the National Shared Services Initiative and Mr Griffin advised that National Services Scotland were considering plans for foundation/core activities and pathfinder activities and he would report further on the outcome once finalised.

**DECIDED:**

1. That the Financial Plan – 2007/08 to 2009/10 be approved.  
   **Director of Finance**

2. That the process to be followed by the Planning, Policy and Performance Group to allocate available funding to proposed new service commitments in 2007/08 – 2009/10 be approved.  
   **Director of Finance**

31. **COMMUNICATIONS ISSUES: 10 MARCH – 4 MAY 2007**

There was submitted a report [Paper No. 07/21] from the Director of Corporate Communications covering communications actions and issues from 10 March – 4 May 2007.
Mrs Bustillo highlighted the following:-

1. The period covered by the Report incorporated the Guidance issued on Elections and this guidance was followed during the handling of media enquiries and Freedom of Information requests.

2. The launch of the Teenage Cancer Trust ward handover by Roger Daltrey at the new West of Scotland Cancer Centre at Gartnavel.

3. BBC’s Frontline Scotland planned to run a programme on radiation issues some time soon and members would receive prior notification of this programme.

4. The next ‘Our Health’ event would be in conjunction with NHS 24 and would be held on 14 June 2007 at the Royal Concert Hall.

Ms Dhir was disappointed that the media had not highlighted the green issues in relation to the Car Parking Policy and encouraged the continued enforcement of the Board’s No Smoking Policy.

Mrs Bustillo highlighted that Sir John would perform the official opening of Rowanbank Clinic (Medium Secure Clinic) on 22 June 2007.

NOTED

32. **DATE OF NEXT MEETING**

The next meeting of the Performance Review Group would be held at 9.30 a.m. on Tuesday, 3 July 2007 in the Board Room, Dalian House, 350 St Vincent Street, Glasgow, G3 8YX.

The meeting ended at 12.05 p.m.