

NHS GREATER GLASGOW AND CLYDE

**Minutes of the meeting of the
Performance Review Group held at 9.30 a.m.
on Monday, 14 January 2008 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 D Sime
Mr P Daniels OBE	Mrs E Smith
Ms R Dhir MBE	Mrs A Stewart MBE
Mr P Hamilton	Cllr. D Yates

OTHER NHS BOARD MEMBERS IN ATTENDANCE

Mr T A Divers OBE	Mr D Griffin
Mr G McLaughlin	

IN ATTENDANCE

Ms H Byrne	...	Director of Acute Services Strategy, Implementation and Planning
Mr R Calderwood	...	Chief Operating Officer – Acute Services Division
Mr B Clark	...	Audit Scotland
Mr J Davidson	...	Audit Scotland
Mr J C Hamilton	...	Head of Board Administration
Mr A McLaws	...	Director of Corporate Communications
Ms J Quinn	...	Head of Performance and Corporate Reporting
Mr I Reid	...	Director of Human Resources

ACTION BY

1. **APOLOGY**

An apology for absence was intimated on behalf of Cllr. D Mackay.

2. **MINUTES**

On the motion of Ms R Dhir and seconded by Mr P Hamilton, the Minutes of the Performance Review Group meeting held on 20 November 2007 [PRG(M)07/06] were approved as an accurate record.

3. **MATTERS ARISING**

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

In relation to Minute 44(b) – New South-Side Hospital and Children's Hospital: Update – Ms Byrne advised members of the ongoing work in pulling together all aspects of the Outline Business Case (OBC) for the preferred option and the affordability issues which would be discussed in more detail at the NHS Board Seminar following this meeting.

The bed model would be based on 2005/06 activity levels, although more in-depth work would continue on the 2006/07 activity levels and on benchmarking against comparable services elsewhere in the UK.

ACTION BY

The Gateway Review had been conducted and it had resulted in five ambers (areas requiring more detail and information before the next Gateway Review) and one green light. The Project Team was pleased that there had been no red lights (areas which would have required immediate action) and would now work towards providing the additional information sought.

The Outline Planning Application would be considered by the City Council's Planning Committee on 15 January 2008; members would be advised of the outcome.

DASSIP

Liaison was being maintained with NHS Lothian on its development of a new Children's Hospital to ensure consistency of approach.

A report, including the socio-economic benefits and impact on the local area, would be submitted to the NHS Board meeting on 22 January and the OBC would be submitted to the February 2008 NHS Board meeting for approval.

DASSIP

NOTED

b) **Scottish Consumer Council: Call for Improvement**

In relation to Minute 53(a) – Scottish Consumer Council: Call for Improvement – there was submitted a paper [Paper No. 08/01] from the Director of Human Resources providing members with a copy of the remit and membership of the Working Group tasked with reviewing and improving customer care standards across the NHS Board area.

The Working Group had met on two occasions already and had planned to submit a full report on the implementation of the Action Plan to the Performance Review Group meeting in May 2008.

Members raised a number of points which Mr Reid agreed to consider further, including the possible involvement of Health Information and Technology staff and external involvement on the Working Group – including patients with long term conditions who are in regular contact with NHS services; how a change of culture will be brought about and the targeting of frontline staff with training in customer care standards.

DECIDED:

1. That the remit and membership of the Working Group and timetabled Action Plan be noted.
2. That a full report on the implementation of the Action Plan be submitted to the May 2008 meeting.

**Director of
Human Resources**

c) **Property Sub-Committee**

In relation to Minute 60 – Property Sub-Committee Minutes – the Chair asked that a progress report on the disposal of the former Broomhill Hospital and an update on the preparation of the Premises Review be submitted to the next meeting of the Performance Review Group.

DECIDED:

That as part of the next Property Committee minutes, Progress Reports on the disposal of the former Broomhill Hospital and the Premises Review be submitted to the next meeting.

**Director of
Finance**

4. **LOCAL DELIVERY PLAN GUIDANCE AND HEAT TARGETS: 2008/09**

There was submitted a paper [Paper No. 08/02] from the Head of Performance and Corporate Reporting enclosing the Summary of Guidance on the HEAT Targets and measures for 2008/09 which had been extracted from the Local Delivery Plan guidance received from the Scottish Government Health Directorate.

The guidance sets out Minister's key operational targets and measures for the NHS and described the work in progress to develop performance measures further in future.

Ms Quinn highlighted the principal changes from the 2007/08 HEAT targets in relation to a re-balancing between primary and community care, mental health, acute care and the introduction of new health improvement targets.

Mr Daniels advised that there were 23 changes from the current year (7 new health improvement targets, 7 efficiency and governance targets, 7 access targets and 2 treatment targets) and this made measuring progress very difficult to achieve. This was recognised: however, as the performance framework evolved there would inevitably be changes in the early years to some targets. Mr Divers stated that it would be important to agree local trajectories for each of the targets and helpful work in this area had been commenced at a recent corporate session with the Centre for Population Health.

A number of targets were developmental and 2 targets – health care experience and older people with complex needs receiving care at home – have not yet been clearly defined.

Mr Hamilton spoke about the recent sessions within CHCPs on Glasgow Centre for Population Health comparative data and Mr Divers would be happy to engage with these sessions. The Director of Public Health's Annual Reports, the completion of the Constituency Profiles shortly and their impact on CH(C)P Development Plans would require careful consideration. Ms Quinn would take that forward and keep members appraised of progress and also ensure they receive a copy of the finalised Local Delivery Plan.

DECIDED:

1. That the guidance on the HEAT targets and measures for 2008/09 be noted.
2. That members provide comments on the guidance to the Head of Performance and Corporate Reporting by 21 January 2008 and that the finalised guidance be passed to members following its completion thereafter.

**Members
Head of
Performance and
Corporate
Reporting**

5. **FINANCIAL MONITORING REPORT FOR 8-MONTH PERIOD TO 30 NOVEMBER 2007**

There was submitted a paper [Paper No. 08/03] by the Director of Finance setting out the NHS Board's financial performance for the 8-month period to 30 November 2007 and the results of the mid-year review of financial performance against the NHS Board's Financial Plan – 2007/08.

Mr Griffin advised that the report showed that the NHS Board and its operational divisions were reporting overall expenditure within £2.7m of budget for the first eight months of the year.

The NHS Board continued to implement the 3-year cost savings plan for addressing the recurring deficit within the Clyde area. Discussions continued with Scottish Government Health Directorate (SGHD) colleagues to conclude arrangements for addressing the residual funding gap for 2007/08 not covered by Cost Savings Plans or transitional funding currently set aside by the SGHD. In response to a member's question, Mr Griffin advised that of the £30m recurring deficit, NHS Highland were responsible for £4m of that figure.

Mr Cleland asked about the £76.8m of funds allocated to expenditure commitments not yet under way. Mr Griffin indicated that this sum would cover pay inflation including Agenda for Change, waiting time and other approved commitments and would be transferred to Directorates when expenditure commitments were incurred.

On the mid-year review, Mr Griffin advised that it was reasonable to continue to forecast that the NHS Board would manage its total expenditure within available resources in 2007/08. This, however, was dependent upon the timing of expenditure against further ring-fenced funding allocations received between now and 31 March 2008. There could be a possible impact of a year end surplus of up to £5m. Members noted this point.

In terms of capital expenditure, Mr Griffin advised there was an additional in-year slippage of £10.2m and agreement had been reached with the SGHD that the total sum of £38.6m (£28.4m had already been agreed as a carry forward to 2008/09) could be carried forward to 2008/09. This had been as a result of a general increase in the level of capital funding and the withdrawal this year of the facility to vire a proportion of capital funding into revenue.

NOTED

6. **AUDIT SCOTLAND – OVERVIEW OF SCOTLAND'S HEALTH AND NHS PERFORMANCE – 2006/07**

There was submitted a paper [Paper No. 08/04] from the Chief Executive enclosing a copy of the Audit Scotland – Overview of Scotland's Health and NHS Performance in 2006/07 prepared for the Auditor General for Scotland and issued in December 2007.

In the role of the watchdog for ensuring propriety and value for money in spending public funds, the Auditor General published an Annual Report into the overview of Scotland's health and performance and was responsible for ensuring that public bodies adhere to high standards of financial management.

Mr Divers took members through the report and highlighted NHS Greater Glasgow and Clyde performance, particularly in relation to uptake of measles, mumps and rubella (MMR) at 24 months; the sickness absence note; wait times targets for all cancers combined; number and percentage of patients with Availability Status Codes; the use and cost of bank and agency nurses; NHS QIS assessments of NHS Board performance against clinical governance and risk management standards and NHS Boards underlying recurring deficit/surplus for 2006/07 and forecasts for 2007/08.

ACTION BY

Members welcomed this report and the helpful overview and comparative information it contained.

NOTED

7. **COMMUNICATION ACTIONS/ISSUES: 20 NOVEMBER 2007 – 14 JANUARY 2008**

There was submitted a paper [Paper No. 08/05] from the Director of Corporate Communications covering Communication actions and issues from 20 November 2007 to 14 January 2008.

Mr McLaws highlighted the following:-

- Completion of the new Gartnavel Royal Hospital and the widespread national media coverage it attracted following the media tours of the new facility.
- The launch of the Smokefree Service – bringing together existing smoking related projects under one single new brand identity.
- The development of plans to celebrate the 60th Anniversary of the NHS on 5 July 2008, in conjunction with Radio Clyde and the Evening Times.
- The intention to theme the next edition of Health News – ‘Promises Delivered’ – focusing on the delivery of new centres, hospital and key health plan commitments such as waiting time targets.
- The planning for the next ‘Our Health’ event which would focus on mental health.

Mr Calderwood advised that in relation to the recent publicity on the suspension of heart transplants at the Scottish National Heart Transplant Unit, he was pleased to let members know that a full review had been undertaken of cases and no evidence was found which highlighted any concerns about clinical practice. Heart transplants would therefore re-commence shortly at Glasgow Royal Infirmary.

NOTED

8. **DATE OF NEXT MEETING**

The next meeting of the Performance Review Group would be held at 9.30 a.m. on Tuesday, 18 March 2008 in the Board Room, Dalian House, 350 St Vincent Street, Glasgow, G3 8YZ.

The meeting ended at 11.05 a.m.