

GREATER GLASGOW AND CLYDE NHS BOARD

**Minutes of a Meeting of the  
Area Clinical Forum  
held in Meeting Room A, J B Russell House, Corporate Headquarters,  
Gartnavel Royal Hospital,  
1055 Great Western Road, Glasgow, G12 0XH  
on Thursday 3 October 2013 at 2.30 pm**

**PRESENT**

Heather Cameron - in the Chair (Chair, AAHP&HCSC)

Nicola McElvanney	Chair, AOC
Val Reilly	Chair, APC
Jacqui Frederick	Joint Chair, ADC
Stephen Dewar	Joint Vice Chair, APC
John Ip	Chair, AMC
Samantha Flower	Vice Chair, AAHP&HCSC
Kathy Kenmuir	Vice Chair, ANMC
Johanna Pronk	Vice Chair, APsychC
Kenneth Irvine	Joint Vice Chair, APC

**IN ATTENDANCE**

Shirley Gordon	Secretariat Manager
Jennifer Armstrong	NHS Board Medical Director
Patricia Mullen	Head of Planning and Performance (For Minute No 63)
Ian Reid	Director of HR (For Minute No 60)
Andrew Robertson	Chair, NHSGGC Board

**ACTION BY**

**56. APOLOGIES**

Apologies for absence were intimated on behalf of Andrew McMahon, Fiona Alexander, Rosslyn Crocket and John Hamilton.

Heather Cameron welcomed Kathy Kenmuir and Johanna Pronk to their first ACF meeting.

NOTED

**57. DECLARATION(S) OF INTEREST(S)**

No declaration(s) of interest(s) were raised in relation to any of the agenda items to be discussed.

NOTED

**58. MINUTES OF PREVIOUS MEETING**

The Minutes of the meeting of the Area Clinical Forum held on Thursday 1 August 2013 [ACF(M)13/04] were approved as an accurate record.

NOTED

**59. MATTERS ARISING**

- a) In relation to Minute Number 44a, Johanna Pronk reported that the Area Psychology Committee now had full membership status of the ACF and was now one of the NHS Board's recognised professional advisory committees. This allowed for the potential of the Committee to take more strategic and policy issues from the ACF and discuss them and feed back with a distinctive view from psychology. Ms Pronk thanked ACF members for their support in taking this piece of work forward.

NOTED

- b) In relation to Minute Number 51, Nicola McElvanney reported that primary care contractors were being engaged in the NHS Board's work in redrawing Health Board boundaries as announced by the Health Secretary in early June 2013. This was being led by Nic Zappia. John Ip reported that GPs had met on 12 October to put together a Position Statement for both NHS Lanarkshire and NHSGGC as there continued to be some uncertainty regarding the arrangements from 1 April 2014 onwards. Those GP practices affected by the redrawing of the boundaries faced a period of uncertainty at the moment and sought stability. He would keep the ACF informed as this moved forward.

**John Ip**

NOTED

**60. NHS Lothian Report**

Heather Cameron welcomed Ian Reid, in attendance, to update on NHSGGC's local actions since publication of the Lothian Report.

Ian Reid referred to the already circulated Staff Governance Committee report which reviewed the Lothian Report's issues. This was presented to the Staff Governance Committee at its meeting on 20 August 2013 and described the process taken by NHSGGC's Corporate Organisational Development Group to consider the review of NHS Lothian and, in particular, its management culture. Mr Reid explained that this process included engagement with key advisory committees whose comments he summarised. He reported that the Staff Governance Committee approved the report and its associated activities and actions to move forward.

Mr Reid highlighted comments provided previously by the ACF and led members through some of the related activities and actions being progressed to address these either through the review of the Lothian Report, FTFT or the Francis recommendations as well as some actions being progressed by Human

Resources locally. He thanked the ACF for their useful comments at that time.

In response to a question concerning the national staff survey results, Mr Reid reported that he expected these to be released in November 2013. NHSGGC had had a 20% return rate which equated to around 7,000 members of staff. Given the schedule of ACF meetings, he suggested that he come to the ACF meeting arranged for 5 December 2013 to present on the outcomes. This was greatly welcomed. *{Post meeting note – Ian Reid’s attendance is now confirmed for the 5 December ACF meeting}.*

**Ian Reid**

The Forum discussed many of the associated activities and actions being taken forward locally and the following points were raised:-

- In respect of exit interviews, Mr Reid clarified that these were only undertaken for leavers, not candidates who moved around NHSGGC. Furthermore, feedback was sought from Bank staff when they left their various placements. “Leavers” included those who had retired. Work ongoing to address the Francis recommendations and the NHS Board’s updated Whistleblowing policy helped staff to feel more confident about speaking up. The ACF thought it would be useful to have feedback from staff who moved on to new roles but still within NHSGGC. Mr Reid regarded this as being part of the recruitment of staff rather than necessitating an exit interview. In terms of identifying areas where there may be poor leadership locally, the ACF mused on whether staff turnover was a proxy indicator and reiterated that staff feedback would be useful if they moved on to another area within NHSGGC. Mr Reid agreed to explore this further perhaps being done locally by managers when the member of staff moved on.
- There was a limit to what the NHS Board could do with anonymous information. Often it was malicious and was difficult for the organisation to respond or to conduct any thorough investigation into the issues raised. Mr Reid reported that anonymous complaints/issues raised by/about staff were forwarded on to either the member of staff concerned or local management.
- There was a concern that many clinical staff were willing to engage in the work ongoing to meet the Francis recommendations but not in FTFT. There were many reasons for this but FTFT appeared to be a top-down approach which felt, on the ground, like a tick-box exercise or as if it was being imposed. Mr Reid explained that this was not the intention but that FTFT was about managing change and providing the tools and techniques to do this successfully. This point was acknowledged and members agreed that some of the tools and principles were, in fact, helpful but that it may now need rebranding to engage further with staff and to bring down barriers bringing people together working better as teams. There was also the criticism that it was a very timely process for staff to go through many of the materials on Staffnet to use as a method of leadership training but also acknowledgment that, if the time and effort was put in, it could result in a more efficient and effective team.

**Ian Reid**

Mr Reid thanked the ACF for the full and frank discussion and agreed to feed the ACF’s comments to the Corporate Management Team.

**Ian Reid**

## **61. FRANCIS REPORT - UPDATE**

Jennifer Armstrong reported that the initial review of the Francis Report suggested, for those recommendations which were applicable locally, that NHSGGC had robust arrangements in place with further improvements planned. The remaining actions centred around ensuring that these arrangements were universal and visible at all levels and ensuring that the underlying culture, leadership and clinical engagement were optimal to promote the provision of the highest quality, safe and patient-centred services.

Themes and suggested actions were considered at a validation exercise (a consultation event for senior managers and clinical leaders from across the organisation). Generally the report was well-received and endorsed by those who attended with a few amendments.

This GAP analysis and the report from the consultation event on 4 July were considered by the Board's Corporate Management Team on 19 September when it was agreed that it would be helpful to launch this at a similar time to the Person-Centred Care launch in November. Meantime, a Core Brief would be issued at the end of October for all staff. This would give the ACF an opportunity to look at what had been done so far (and remained to be done).

Heather Cameron reported that this was a worthwhile piece of work with what appeared to be an innovative approach taken to looking at how best to implement recommendations from another area. It had been clinically driven and engaging which had been useful to challenge the current ethos, culture and leadership.

The ACF looked forward to receiving this information and providing feedback in due course.

NOTED

## **62. CLINICAL SERVICES REVIEW UPDATE**

Jennifer Armstrong reminded Forum members that one of the next key stages for the Clinical Services Review was to establish a development programme in one area of NHSGGC which would be an opportunity to test out major elements of the service models and interface working across primary, community and hospital services to demonstrate the impact this could have for a defined population.

She described how this would be taken forward over the next few months and how local clinical leadership would be key to its success. She described a mapping session that had taken place looking at three potential localities and a model used in Aberdeen where lessons learned would be included. She set out the position on all of the criteria established for the three potential development localities. She described how the programme would need to be supported by robust programme management and evaluation and much of this would be undertaken via the establishment of a Steering Group to develop the work programme led by identified clinical leads and including the existing clinical leads for the chronic disease, older people and emergency clinical services review groups.

In terms of a timetable going forward, Dr Armstrong hoped that the preferred site would be identified by the end of September 2013. Thereafter, clinical leads and the establishment of the Steering Group would take place in October 2013 with a detailed work plan ready by early 2014.

The ACF welcomed this development and looked forward to being involved as the pilot got up and running.

NOTED

### **63. ANNUAL REVIEW PREPARATION – 2013**

Members were asked to note the SGHD guidance regarding the ACF slot on 18 November at the NHS Board's Annual Review. Patricia Mullen briefly described the background to the day and led the ACF through the outline agenda that the Minister wished to explore in terms of the Forum's contribution in NHSGCC.

Heather Cameron reported that members had discussed this matter earlier at its informal session and had agreed that, given that various approaches had been taken over the years, this year, broad themes would be agreed and each advisory committee would bring up a topic that fitted in with these themes. Each advisory committee had highlighted some topics earlier and it was agreed that the following four broad themes would be the ones used on the day:-

- Communication (including IT within Acute and Primary Care);
- Leadership – clinical and professional;
- Workforce Planning (and associated capacity issues);
- Targets (including HEAT targets, local targets and other targets).

It was important to demonstrate positive areas of work being undertaken in NHSGCC that fitted in with these themes as well as highlighting any challenges that remained. It was agreed that all advisory committees produce a summary of the topic they wished to raise under the themes and email this to Heather Cameron, identifying what they wished to highlight and what theme it related to as well as its impact, positive implications to date and ongoing challenges. These should reach Heather by no later than Friday 11 October 2013. Heather would then form a document for submission to Patricia Mullen by 14 October 2013 as all documentation relating to the Annual Review had to be submitted to the Chief Executive, Robert Calderwood by 17 October and, thereafter, to the Scottish Government by 21 October at the latest.

**All members/  
Heather Cameron**

In terms of members who wished to attend the event, it was previously the case that there was one representative from each advisory committee in attendance. Heather suggested that, this year, this be opened up to include any Chair/Vice Chair who may wish to come along. As such, the following 9 members were agreed:-

- Val Reilly
- Nicola McElvanney
- Fiona Alexander
- Samantha Flower
- Jacqui Frederick
- John Ip

- Heather Cameron
  - Kathy Kenmuir
- Sandra McNamee

Finally, Heather Cameron reported that, following discussion with her National Chair Group colleagues, NHSGGC was the only NHS Board who tended to also have Board members at the ACF's slot with the Minister. Previous years had seen Jennifer Armstrong and Rosslyn Crocket both in attendance. Members discussed this and it was agreed that the slot should be for *ACF members only*.

In terms of timing for the one hour slot, Heather Cameron reiterated the importance of respecting everyone's wish to speak so it would be important to use the one hour slot wisely.

NOTED

**64. AREA CLINICAL FORUM – 2013/14 MEETING PLAN AND FORWARD PLANNING**

Members were asked to note the ongoing ACF Meeting Plan 2013/14 and were encouraged to make suggestions for forward planning of ACF activities.

DECIDED

- That Ian Reid be added to the December agenda to discuss the Staff Survey results.
- That Catriona Renfrew be invited to the December meeting to update on the integration agenda.

**Secretary**

**Secretary**

**65. OVER ORDERING OF MEDICINES**

John Ip submitted a paper raising concerns about the issue of the actual, or perceived over ordering of patients' repeat medication.

Val Reilly explained that providing a repeat prescribing service was not a contracted service for community pharmacy. There were a raft of issues involved in this problem and she wondered whether a solution would be for GPs and pharmacists to work together on this to learn lessons and decide how best to proceed particularly as patients valued having the service. John Ip agreed that this would be a good way forward and, as such, it was agreed that John and Val form a short life working group to look at the issues and offer solutions.

**John Ip/Val Reilly**

NOTED

**66. UPDATE FROM THE ACF CHAIR ON ONGOING BOARD/NATIONAL ACF BUSINESS**

Heather Cameron reported on the most recent NHS Board meeting and topics discussed at the NHS Board Seminar. She agreed to circulate any relevant papers to members.

**Heather Cameron**

- The health and social care integration agenda;
- Patient-centred care;

- National Care Standards being reviewed;
- NES Postgraduate structure and training.

NOTED

**67. BRIEF UPDATE FROM EACH ADVISORY COMMITTEE ON SALIENT BUSINESS POINTS**

Members were asked to note salient business items discussed recently by the respective advisory committees.

NOTED

**68. DATE OF NEXT MEETING**

Date: Thursday 5 December 2013

Venue: Meeting Room A, JB Russell House

Time: **2 - 2:30pm** Informal Session for ACF Members only

**2:30 - 4:30pm** Formal ACF Business Meeting