

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 7 April 2016 at 2.30pm**

**PRESENT**

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

Fiona Alexander	Chair, APsyc
Morven Campbell	Vice Chair, AOC
Audrey Espie	Vice Chair, APsyc
Audrey Thompson	Chair, APC

**IN ATTENDANCE**

Shirley Gordon	Secretariat Manager
Mark White	Assistant Director of Finance (for Minute No 18)
Lyndsay Lauder	Head of Workforce Planning (for Minute No 19)
Mags McGuire	NHSGGC Nurse Director (for Minute No 21)

**ACTION BY**

**14. APOLOGIES & WELCOME**

Apologies for absence were intimated on behalf of Andrew McMahon, David McColl, Julie Tomlinson, Samantha Flower, Kathy Kenmuir, Yas Aljubouri, Alastair Taylor, Jennifer Armstrong and John Brown.

Heather Cameron welcomed guest speakers in attendance and thanked them for taking the time to provide relevant updates to the Forum.

NOTED

**15. 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

**16. MINUTES OF PREVIOUS MEETING**

The Minutes of the meeting of the Area Clinical Forum held on Thursday 4 February 2016 [ACF(M)16/01] were approved as an accurate record pending the following correction:-

- List of those present – Morven Campbell – representing the AOC and not the ADC.

NOTED

## 17. MATTER ARISING

- Minute No 07 “Annual Review of ACF Constitution” – the Secretary was asked to seek from John Hamilton, Head of Administration, a timescale for the issue of the ACF Action Plan resultant from the HIS report about the Beatson Oncology Centre.

**Secretary**

NOTED

## 18. UPDATE ON FINANCES

Heather welcomed Mark White, in attendance to update on NHSGGC’s finances.

Mark began by outlining:-

- The latest assessment of the 2015/16 financial out-turn and the underlying financial position of the organisation.
- The forecast financial position across NHS Scotland and understanding NHSGGC’s relative position and the scale of the financial challenge in 2016/17 and beyond.
- The progress being made to identify savings and develop the Local Delivery Plan assisting the Executive Team to identify the further action required to close the remaining gap and finalise the 2016/17 Local Delivery Plan.

He summarised the following key elements in respect of NHSGGC’s 2015/16 financial out-turn:-

- The Acute Division had reduced monthly overspend to £0.5m per month.
- Corporate and Partnerships remained broadly in balance in-year.
- One-off gains from land sale (Woodilee £3m) and VAT rebate (£0.8m).
- Remainder of balance came from centrally held funds (£2m) and release of provisions (£3m).
- Break-even would be achieved.
- The Board was becoming increasingly reliant on non-recurrent monies to stay in financial balance.

Mark led the Forum through a draft financial overview for 2016/17 in NHS Scotland by explaining:-

- The 2016/17 savings targets for Territorial Boards ranged from 2.4% to 9.2%.
- For Special Boards, the range was from 1.3% to 14.2%.

- The most significant savings schemes accounted for £96m and related to use of the independent sector (£7.6m), reduction in locum costs (£18.2m), improved efficiency in relation to bank nurse (£12.6m) and prescribing efficiencies (£48.9m).
- Territorial Boards had identified £281.4m (3.1% of baseline) of savings with £174.9m (1.9% of baseline) left to identify.

He outlined some of the current work being undertaken by NHS Scotland's Directors of Finance in the *short to medium term* including:-

- Reducing Delayed Discharges and improving patient flows
- Lowering the use of the independent sector
- Non patient facing efficiencies, prescribing, supplementary staffing (locum, agency & bank usage)
- Productivity and Efficiency Programme - Shared Support Services, Pharmacy, Workforce, Service Redesign...
- Tax
- Assets
- Accruals

and in the *medium to long term* including:-

- Health and Social Care Integration
- Clinical Strategy, Mental Health Investment
- Primary Care Development
- Diagnostic and Treatment Centres, Cancer Plan
- Trauma Centres
- Supported by Transformational Change Fund
- National work with Institute for Healthcare Improvement
- Intermountain Healthcare (NHS Lothian), Virginia Mason (NHS Highland)
- Delivering value from healthcare spend

Mark ended by providing details of the progress being made to identify efficiencies and develop the Local Delivery Plan. He explained the 2016/17 Financial Planning Process in terms of “green and amber schemes” as well as “red schemes” and alluded to work ongoing to close the financial gap.

Members agreed that it was important to engage with staff on an ongoing basis in terms of their understanding of the financial situation and, in particular, how local efficiencies could be / would be made.

In concluding, members agreed it would be particularly useful if the CEO, Robert Calderwood, could attend the next ACF meeting, scheduled for 2 June 2016, to discuss, in further detail, the “red schemes”. *{Post meeting note – confirmed}*.

**Robert Calderwood**

NOTED

## **19. STAFF SURVEY RESULTS**

Heather welcomed Lyndsay Lauder, in attendance to update the ACF on NHSGGC's Staff Survey Results.

Lyndsay led the Forum through the Staff Survey Results Analysis for NHSGGC.

She provided an overview of the key points highlighting some recommendations to tackle the main areas for improvement. She summarised the following:-

- The top 5 2015 Staff Survey Scores
- The most improved NHSGGC scores from 2014
- The bottom 5 2015 scores
- NHSGGC values

Lyndsay alluded to iMatter and the local iMatter Steering Group that was taking forward the continuous improvement model being rolled out within all directorates and Partnerships. This encouraged staff involvement in developing team improvement actions alongside acknowledgment of team strengths. Lyndsay agreed to forward Heather a copy of the Steering Group membership list.

**Lyndsay Lauder**

In response to a question, Lyndsay explained, in more detail, how iMatter worked and the benefits of looking locally at team results and what local services took from these. Lyndsay was due to present a work-in-progress report to the Area Partnership Forum in August looking at how teams were learning from their iMatter results so far. On that point, whilst members acknowledged vital importance of engaging with Staffside, they considered it pertinent that the NHS Board review its method of engaging with clinical staff more broadly.

Once iMatter had been rolled out further, it was agreed that Lyndsay be invited back to the ACF to provide an update of progress.

**Secretary /  
Lyndsay Lauder**

NOTED

## **20. HEALTH CENTRE SECURITY SCREENS**

A briefing paper from Alastair Taylor on the current situation regarding discussions taking place with the NHS Board on the issues of the reception desk security in the new Health and Care Centre was noted. As Alastair had since submitted his apologies, it was agreed that Heather would contact him direct to discuss the concerns further.

**Heather Cameron**

NOTED

## **21. PROFESSIONAL REGULATION**

Mags Mcguire explained that recent NHS Board discussions had taken place regarding the registration of the Healthcare Science workforce who were not covered by statutory regulation. She explained the context for accredited regulation of this workforce and the benefits to NHSGGC and to patients in assuring fitness to practice of non-statutory Healthcare Science staff.

Members agreed that it was important, particularly in terms of professional governance, to have a clear line of accountability for all clinical staff groups and this had resulted in NHSGGC taking stock of where it was at the moment and what it was going to be doing in the future in this regard. Were there other patient facing professions in a similar situation?

Mags explained the currently lines of accountability to the NHS Board as follows:-

- AHPs, nurses and midwives – to the Nurse Director
- Doctors, dentists and pharmacists – to the Medical Director

In terms of going forward with the Healthcare Scientists staff group, discussions would take place to see where the best “fit” lay professionally in NHSGGC.

She also added that David Keating, Scientific Director, Clinical Physics, had been appointed as lead for NHSGGC’s healthcare scientists and it would be useful to invite him to a future ACF meeting to discuss how best to take forward their regulation.

**David Keating**

Fiona Alexander summarised the local accountability for psychologists where, although they had a professional lead, there also was, in existence, a link to the NHS Board. She agreed to establish if a local database for this staff group existed for the purpose of ensuring professional regulation.

**Fiona Alexander**

Members thanked Mags for bringing this matter to their attention and looked forward to working with her to address the issues in the future. It was especially important as Regulation was there to protect patients but also to ensure staff were able to raise concerns.

NOTED

**22(a) UPDATE FROM THE NHS BOARD CHAIR ON ONGOING BOARD BUSINESS**

In John Brown’s absence, Heather summarised NHS Board discussions from the Seminar held on Tuesday 5 April 2016 including:-

- Financial Update
- HIV Drug Injectors – Update
- IJB Members – sharing of insights / intelligence
- Board Effectiveness Review

NOTED

**22(b) UPDATE FROM THE ACF VICE CHAIR ON NATIONAL ACF BUSINESS**

Fiona Alexander reported that she had attended the last national meeting in Heather’s absence. She summarised the topics of discussion as follows:-

- A Presentation on the National Clinical Strategy
- The national ACF Work plan
- IJBs and their progress across NHS Scotland
- Health Promoting Health Service (HPHS) and the use of e-cigarettes

NOTED

**23. AREA CLINICAL FORUM – 2015/2016 MEETING PLAN AND FORWARD PLANNING**

Members were asked to note the ACF Meeting Plan for 2016. It was reported that, so far, a date had not been received from the SGHD for the NHS Board's Annual Review 2016.

NOTED

**24. BRIEF UPDATE FROM EACH ADVISORY COMMITTEE ON SALIENT BUSINESS POINTS AND APPROVED MINUTES TO NOTE**

Members were asked to note salient business items discussed recently by the respective Advisory Committees as well as their most recent approved set of minutes.

NOTED

**25. ANY OTHER BUSINESS**

No other business items were raised.

NOTED

**26. DATE OF NEXT MEETING**

Date: Thursday 2 June 2016

Venue: Meeting Room A, J B Russell House

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

**2:30 – 5:00pm** Formal ACF Business Meeting