

NHSGG&C (M) 19/03
Minutes: 59 - 83

NHS GREATER GLASGOW AND CLYDE

**Minutes of the Meeting of the NHS Greater Glasgow and Clyde Board
held in the William Quarriers Centre, St Kenneth Drive, Glasgow, G51 4QD
on Tuesday 25th June 2019, at 10.00am**

PRESENT

Professor John Brown CBE (in the Chair)

Mrs Jane Grant	Mr Ross Finnie
Dr Jennifer Armstrong	Mr Mark White
Dr Linda de Caestecker	Prof Dame Anna Dominiczak
Cllr Jim Clocherty	Cllr Jonathan McColl
Mr Ian Ritchie	Ms Margaret Kerr
Ms Jeanette Donnelly	Ms Amina Khan
Mrs Audrey Thompson	Ms Anne Marie Monaghan
Ms Flavia Tudoreanu	Cllr Caroline Bamforth
Mr Simon Carr	Ms Dorothy McErlean
Mr Allan MacLeod	Dr Donald Lyons
Cllr Sheila Mechan	Dr Margaret McGuire
Mr John Matthews OBE	

IN ATTENDANCE

Ms Elaine Vanhegan	..	Head of Corporate Governance and Administration
Mr Graeme Forrester	..	Deputy Head of Corporate Governance and Administration
Mr Jonathan Best	..	Chief Operating Officer
Mr William Edwards	..	Director of eHealth
Ms Sandra Bustillo	..	Interim Director of Communications
Mrs Susan Manion	..	Chief Officer, East Dunbartonshire HSCP
Mr David Leese	..	Chief Officer, Renfrewshire HSCP
Ms Julie Murray	..	Chief Officer, East Renfrewshire HSCP
Mr Tom Steele	..	Director of Estates and Facilities
Mrs Anne MacPherson	..	Director of Human Resources and Organisational Development
Ms Jo Gibson	..	Head of Health & Community Care, West Dunbartonshire HSCP (On behalf of Ms Beth Culshaw, Chief Officer)
Mr John Cornett	..	Assistant Director, Audit Scotland (For item 82)
Ms Liz Maconachie	..	Audit Manager, Audit Scotland (For item 82)
Mrs Geraldine Mathew	..	Secretariat Manager (Minutes)

		ACTION BY
59.	WELCOME AND APOLOGIES	
	Board member apologies for absence were intimated on behalf of Ms Jacqueline Forbes, Mr Alan Cowan, Cllr Mhairi Hunter, Cllr Iain Nicolson, and Ms Susan Brimelow OBE.	
	Officer apologies for absence were intimated on behalf of Ms Louise Long, Ms Beth Culshaw and Ms Susanne Millar.	

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	<u>NOTED</u>	
60.	DECLARATIONS OF INTEREST	
	The Chair invited Board members to declare any interests in any of the agenda items being discussed. There were no declarations made. <u>NOTED</u>	
61.	MINUTES OF THE MEETING HELD 16TH APRIL 2019	
	On the motion of Ms Donnelly, seconded by Ms McErlean, the minutes of the NHS Greater Glasgow and Clyde Board Meeting, held on Tuesday 16 th April 2019 [Paper No. NHSGGC (M) 19/02], were approved and accepted as an accurate record, subject to the following amendment: Mr Best noted that he was in attendance at the meeting. <u>APPROVED</u>	
62.	MATTERS ARISING FROM THE MINUTES	
a)	ROLLING ACTION LIST	
	The Rolling Action List [Paper No. 19/28] was considered. Members agreed with the recommendation of the closure of 10 actions from the Rolling Action List. <u>NOTED</u>	
63.	CHAIR'S REPORT	
	Mr Brown provided an overview of recent engagements since the last meeting. Mr Brown attended a visit to the Revive Multiple Sclerosis (MS) Support Centre in Glasgow on 24 th April and noted the wide range of services provided for patients. He also gave a presentation to the Royal College of Physicians of Edinburgh (RCPE) Quality Governance in Health and Social Care Event held on 10 th May and attended a meeting with Dr de Caestecker on 21 st June, to meet with delegates from the Guidance and Training Centre in Bethlehem Mr Brown had also attended a number of NHSGGC Committee meetings including the Board Seminar; Finance and Planning Committee; and the Audit and Risk Committee. Other meetings Mr Brown attended included a quarterly meeting with colleagues from Audit Scotland; a meeting with the Queen Elizabeth University Hospital (QEUH) External Review Team; and a meeting of the Glasgow Health Sciences Partnership Oversight Board.	

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	<p>Mrs Grant hosted a 2 day Health Improvement Scotland (HIS) visit in relation to the West of Scotland Cancer Network, to review the Clinical Quality Performance Indicators, across the region.</p> <p>Mrs Grant provided a presentation to delegates in attendance at the recent Decontamination Conference on some of the learning obtained following the temporary closure of the Cowlairs Decontamination Unit.</p> <p>Mrs Grant met with Scottish Government colleagues in relation to the Annual Operational Plan. She also attended a meeting with the Chair, Medical Director, Nurse Director, and Professor Dame Anna Dominiczak, in relation to clinical leadership.</p> <p>A number of visits took place to NHS Highland, NHS Lanarkshire and NHSGGC in relation to progress of the Best Start Programme. A range of excellent work was underway.</p> <p>Mrs Grant attended the NHS Scotland Event recently and the Scottish Leaders Forum, where there were a variety of presentations including the Big Noise, an initiative originated in Stirling; the Scottish Football Association; and Compassionate Inverclyde.</p> <p>The sod cutting of the new Greenock Health and Care Centre took place recently, and Mrs Grant attended with the Cabinet Secretary, along with Ms Louise Long, Chief Officer, Inverclyde HSCP, and Cllr Jim Clocherty.</p> <p>Mrs Grant recently met with Sir Lewis Ritchie and his team in relation to the Out of Hours Service, along with Mr David Leese, Chief Officer, Renfrewshire HSCP and Ms Anne Harkness, Director – South Sector. There was useful discussion on the progress being made and Sir Lewis and his team offered their assistance in the next period to maximise the potential of new models and to ensure swift progress towards a more sustainable model.</p> <p>On 14th June, Mrs Grant met with the Cabinet Secretary, along with Hospital Watch, Cllr Jackie Baillie, and members of the senior team, at the Vale of Leven Hospital. There was positive feedback received from members of Hospital Watch who were pleased with the improved communications with the Health Board which they felt had improved overall working relationships.</p> <p>An Area Partnership Development Session took place recently, to ensure partnership working was aligned to the delivery of the Boards corporate objectives.</p> <p>Mrs Grant also attended the Moving Forward Together Third Sector Event, which included a wide variety of organisations. Feedback from the event was positive.</p> <p><u>NOTED</u></p>	
65.	PATIENT'S STORY	
	<p>Dr McGuire, Director of Nursing, introduced a short film which featured a patient's recent experience of care received at the Royal Alexandra Hospital (RAH) following a neck of femur fracture.</p>	

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	<p>In summary, the Board were content to approve the proposal to create a Major Trauma Centre, Trauma Units, local emergency hospitals and a rehabilitation service. The Board noted that the Moving Forward Together Programme Board will manage implementation of the proposal and identify and manage any associated risks. Board members would anticipate regular updates to the Finance Planning and Performance Committee. The Committee were asked to give consideration to the frequency of Board updates.</p> <p><u>APPROVED</u></p>	<p>Dr Armstrong</p>
<p>68.</p>	<p>NHSGGC ANNUAL OPERATIONAL PLAN</p>	
	<p>The Board considered the paper ‘NHSGGC Final Draft 2019-20 Annual Operational Plan’ [Paper No. 19/30] presented by the Director of Finance, Mr Mark White. Members were asked to agree the submission of the Final Draft 2019-20 Annual Operational Plan to the Scottish Government, subject to final confirmation of Waiting Times Funding. The Final Draft Plan was presented to the Finance Planning and Performance Committee at the meeting in June, and was approved for presentation to the Board. The Plan outlined how NHSGGC will deliver expected levels of operational performance to provide foundations for delivering the Cabinet Secretary’s priorities. Mr White noted that guidance on completion of the Plan was issued in February 2019, with an initial first draft submitted to the Scottish Government in March 2019. An initial assessment of the trajectory required to achieve improvements in the waiting times performance was provided, however further discussion was ongoing with Scottish Government colleagues to confirm funding arrangements and agree performance trajectories.</p> <p>Mr Brown thanked Mr White for the update and invited questions and comments from Board members.</p> <p>Members noted that the Plan described an ambitious programme, which, given the challenges, would require significant effort, ingenuity and creativity to achieve the required performance. The Chair commended the work of the Senior Executive Team.</p> <p>In summary, the Board were content to approve the Final Draft Annual Operational Plan 2019-20, for submission to the Scottish Government and would anticipate presentation of the final Annual Operational Plan to the Finance, Planning and Performance Committee Meeting in August, for final approval.</p> <p><u>APPROVED</u></p>	<p>Mr White</p>
<p>69.</p>	<p>ACUTE SERVICES COMMITTEE UPDATE</p>	
	<p>The Board considered the draft minutes of the Acute Services Committee meeting held on 21st May 2019 [Paper No. ASC (M) 19/03].</p> <p>Mr Ross Finnie, Chair of the Acute Services Committee, provided an overview of the key areas of discussion, including a discussion on performance and consideration of the factors influencing the increased demand in Emergency Departments. Mr Finnie suggested that the outcomes of, and the actions recommended by, the Review of Capacity and Flow at Queen Elizabeth University Hospital (QEUH), may apply to other hospital sites and departments.</p>	

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	<p>Mr Finnie assured members that robust examination of the reported performance was undertaken by the Committee.</p> <p>Mr Brown thanked Mr Finnie for the update.</p> <p><u>NOTED</u></p>	
70.	NHSGGC INTEGRATED PERFORMANCE REPORT	
	<p>The Board considered the paper ‘NHSGGC Integrated Performance Report’ [Paper No. 19/31] presented by the Director of Finance, Mr Mark White.</p> <p>Mr White noted that improvements to the content and presentation of the report had been made, however work continued to review and redevelop the report, with the aim of improving transparency. Mr White noted the inclusion of GP Out of Hours (OOH) Services activity within the report.</p> <p>Mr White highlighted the areas meeting or exceeding target including, smoking cessation; alcohol brief interventions; access to drug and alcohol services; access to IVF Treatment; and access to Psychological Therapies. In addition, Mr White added that the new financial year had begun positively, with a number of the key waiting times and access targets including number of new outpatient appointments waiting > 12 weeks and TTG (Treatment Time Guarantee) patients waiting > 12 weeks, were within the provisional planned position for the reporting period. He noted that the April position of the number of new outpatients waiting > 12 weeks for a new outpatient appointment represented a 20% reduction on the same month of the previous year. Mr White assured members that a programme of work was underway to ensure delivery against the planned milestones throughout the year.</p> <p>Furthermore, a number of actions were being taken to address the 10 measures currently rated as red due to a variance of >5% against target/trajectory. These were detailed within the exception reports. Mr White highlighted the areas which remained challenging, those being Emergency Department 4 hour waits; delayed discharges and bed days occupied; 18 Week Referral to Treatment; patients waiting >6 weeks for a key diagnostic test; suspicion of cancer referrals (62 days); MRSA/MSSA; percentage of Freedom of Information requests (FOI) completed within 20 working days; percentage of complaints responded to within 20 working days; and sickness absence. Mr Best described the range of initiatives being undertaken to address these including the development of a recovery strategy; review process established with service managers; and the development of sector recovery plans. Mr Best highlighted the Review of Capacity and Flow being undertaken at QEUH as part of the Internal Review, and was confident that the North East Commissioning Support Team would be in a position to report by the end of July in respect of patient processes, capacity and flow and potential improvements to the model. He also noted that Mr David Leese, Chief Officer, Renfrewshire HSCP and Ms Anne Harkness, Director – South Sector, continued to work in partnership with NHS24 to address the challenges associated with the GP Out of Hours Service.</p> <p>Mr Brown thanked Mr White and Mr Best for the update and invited comments and questions from Board members.</p>	

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72.	HEALTHCARE ASSOCIATED INFECTION REPORT	
	<p>The Board considered the paper 'Healthcare Associated Infection Report' [Paper No. 19/32] presented by Dr Jennifer Armstrong, Medical Director.</p> <p><u>Cryptococcus Neoformans</u> Dr Armstrong noted that over 1,800 air samples had been taken since sampling began. Small numbers of Cryptococcus albidus/species were detected in 10 air samples since 31st January 2019. No evidence of any isolates of C.Neoformans was found in any of the air samples done so far. There have been no further cases of C.Neoformans infection in patients since the identification of two cases in late November/early December 2018.</p> <p><u>Staphylococcus aureus Neonatal Intensive Care Units (NICUs)</u> Dr Armstrong noted that extensive screening had been undertaken for 4 weeks and no further cases had been identified since 13th May 2019.</p> <p><u>Carbapenem Resistant (CRO) Acinetobacter baumannii</u> Dr Armstrong provided an update on identification of cases of Carbapenem Resistant (CRO) Acinetobacter baumannii at QEUH and Inverclyde Royal Hospital (IRH) Renal Units. No further cases had been reported since 24th April 2019.</p> <p>Mr Brown thanked Dr Armstrong and the work of the Infection Control Team and invited comments and questions from Board members.</p> <p>There was discussion in relation to the ongoing requirement to ensure a high level of cleaning compliance on all sites. Mr Steele advised of a range of current actions including maximising the recruitment and retention of the workforce, given the competitive workforce environment. Efforts also continued to reduce absence rates.</p> <p>Mr Brown welcomed the range of actions being undertaken to address this issue and requested that a further paper be presented to an appropriate Committee in due course.</p> <p><u>NOTED</u></p>	Mr Steele
73.	AREA CLINICAL FORUM UPDATE	
	<p>The Board considered the approved minute of the Area Clinical Forum Meeting [Paper No. ACF (M) 19/02] which took place on 4th April 2019. Mrs Thompson highlighted an amendment to the minute under Item 19a. She clarified that a Chief Officer from Greater Glasgow and Clyde had been invited to attend meetings of the Area Clinical Forum to establish close links with HSCPs. Ms Beth Culshaw, Chief Officer, West Dunbartonshire HSCP, attended the Area Clinical Forum meeting in June to represent local Chief Officers. Mr Alan Hunter, Director of Access also attended the meeting to provide an update on the Waiting Times Improvement Plan. The Forum also received an update on the QEUH/RHC Internal Review; and an update on the Sturrock Review. Given Mr David Williams new role within Scottish Government as Director of Delivery for Health and Social Care Integration, Forum members discussed and agreed to invite Mr Williams to a future meeting.</p>	

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	<p>Mr Brown thanked Mrs Thompson for the update and invited questions and comments from Board members.</p> <p>Ms Monaghan was pleased to note progress made in respect of the feedback received from the Annual Review in relation to further training for staff treating patients with a learning disability.</p> <p>NOTED</p>	
74.	FINANCE PLANNING AND PERFORMANCE COMMITTEE UPDATE	
	<p>The Board considered the draft minute of the Finance Planning and Performance Committee Meeting of 4th June 2019 [Paper No. FP (M) 19/03]. Members noted that a range of topics were discussed including the GP Out of Hours Service; the West of Scotland Region – Improving Healthcare and Forensic Medical Services; an update on the Internal Review of QEUH and RHC; the Clydebank Hub Update; Trauma Network Clinical Model; and the MSG Review of Progress with Integration – Overview of Board Self-Assessment.</p> <p>Dr Donald Lyons highlighted an amendment which required to be recorded at the next meeting of the Finance Planning and Performance Committee, that being that Dr Lyons had given his apologies in advance of the meeting.</p> <p>NOTED</p>	
75.	AUDIT AND RISK COMMITTEE UPDATE	
	<p>The Board considered the approved minute of the Audit and Risk Committee Meeting of 4th June 2019 [Paper No. AR (M) 19/02]. Mr MacLeod, Chair of the Committee, provided an overview of the subjects discussed including the Internal Audit Plan. Mr MacLeod noted that substantial improvements were required in respect of performance management and payroll, and these were accepted by senior management and would feature in the governance statement. He also noted discussion on the Annual Accounts. The Committee also considered and accepted the Internal Audit Plan for 2019/20; updated the Corporate Risk Register and accepted the proposal to consider new risks as the year progressed. Mr MacLeod noted that the Audit Plan and the Corporate Risk Register would be circulated to Board members for information.</p> <p>Mr Brown thanked Mr MacLeod and colleagues of the Audit and Risk Committee. There were no questions noted.</p> <p>NOTED</p>	
76.	NHSGGC REVENUE AND CAPITAL OUTTURN REPORT 2018/19	
	<p>The Board considered the paper ‘Revenue and Capital Outturn Report 2018/19’ [Paper No. 19/33] presented by the Director of Finance, Mr Mark White.</p> <p>Mr White reported that as at 31st March 2019, the Board reported expenditure levels £0.3m under budget (subject to the external audit process). This compared to a £2.5m overspend reported at Month 11 and demonstrated the</p>	

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	<p>positive achievements made. This resulted in the Board achieving a reduction in the underlying recurring deficit from £68m to £50m.</p> <p>Furthermore, the Financial Improvement Programme (FIP) for 2018/19, began with a financial challenge of £93m. The FIP Tracker reported projects which totalled circa £56.4m on an FYE (full year effect) and £42.3m on a CYE (current year effect). Mr White advised that an exercise was underway to finalise the FIP achievements and determine the initiatives to be rolled forward to 2019/20.</p> <p>Mr White noted that a total of £55.8m non-recurring relief had been factored in to support the financial position, and highlighted positive steps to reduce the use of non-recurring support.</p> <p>There was significant effort to stabilise both the senior medical pay position and the nursing pay position, and these were a key focus for cost containment initiatives. Mr White was pleased to report that these areas of spend had reduced throughout the year.</p> <p>Mr White noted the capital outturn position and confirmed that the final year end capital resource limit allocation amounted to £42.7m.</p> <p>Mr Brown thanked Mr White for the update and was pleased to note the reduction in the overall recurring deficit; and the high level of efficiency savings achieved through the Financial Improvement Programme. Mr Brown commended Mr White, his team and all colleagues in NHSGGC for their contribution to achieving the financial position for 2018/19.</p> <p>The Board were content to note the report.</p> <p>NOTED</p>	
77.	GOVERNANCE STATEMENT 2018/19	
	<p>The Board considered the paper ‘Governance Statement 2018/19’ [Paper No.19/34] presented by Mr Allan MacLeod, Chair of the Audit and Risk Committee.</p> <p>Mr MacLeod noted that the Statement formed an integral part of the Annual Accounts and provides assurance of the system of internal control in place. The Audit and Risk Committee reviewed the Internal Auditor Annual Report at the Committee meeting on 4th June 2019. The Annual Report highlighted significant issues in relation to two areas; those being performance and payroll. In addition, the report also noted improvements required in relation to sickness absence.</p> <p>Mr Brown thanked Mr MacLeod and members of the Audit and Risk Committee for their efforts. There were no questions noted.</p> <p>In summary, the Board considered, and were content to approve, the Governance Statement for 2018/19, for signature by the Chief Executive.</p> <p>APPROVED</p>	
78.	ANNUAL REPORT AND CONSOLIDATED ACCOUNTS FOR 2018/19	

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	<p>The Board considered the paper ‘Annual Report and Consolidated Accounts for 2018/19’ [Paper No. 19/35] presented by the Director of Finance, Mr Mark White.</p> <p>Mr White highlighted that the Board had achieved both the revenue resource limit and the capital resource limit for the year ended 31st March 2019, subject to the external audit process. Mr White advised that the Audit and Risk Committee were informed at their meeting of 18th June 2019, of Audit Scotland’s intention to issue an unqualified opinion in respect of the regularity of income and expenditure and on other prescribed matters.</p> <p>In accordance with the Scottish Public Finance Manual, the accounts had not yet been laid before Parliament, and therefore were not currently available for circulation or publication on the NHS Board website.</p> <p>Mr Brown thanked Mr White and invited questions and comments from Board members.</p> <p>In response to questions from Board members in relation to the inclusion of numbers of employees with a disability, Mrs MacPherson advised that this data is reported through the Staff Governance Committee.</p> <p>Following comments from Board members, Mr White advised that the duplicate information on Emergency Department performance detailed on page 18, would be removed before final submission to Parliament.</p> <p>In summary, the Board agreed to adopt and approve the Annual Report and Consolidated Accounts for the year ended 31st March 2019, for submission to the Scottish Government Health and Social Care Directorates (SGHSCD). The Board instructed the Chief Executive to sign the Performance Report and Accountability Report; and that both the Chief Executive and the Director of Finance sign the Consolidated Balance Sheet.</p> <p><u>APPROVED</u></p>	
79.	STAFF GOVERNANCE COMMITTEE UPDATE	
	<p>The Board considered the draft minute of the Staff Governance Committee meeting of 7th May 2019 [Paper No. SGC (M) 19/02]. Mrs McErlean provided an update on the topics discussed including a quarterly report on Workforce Statistics; a report on Medical Education; and a report on Organisational Culture.</p> <p>Mr Brown thanked Mrs McErlean for the update. There were no questions noted.</p> <p>The Board were content to note the draft minute of the Committee meeting.</p> <p><u>NOTED</u></p>	

80.	THE STURROCK REVIEW – NHSGGC RESPONSE	

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	<p>The Board considered the paper ‘Scottish Government Response to Sturrock Review’ [Paper No. 19/37] presented by the Head of Corporate Governance and Administration, Ms Elaine Vanhegan.</p> <p>The Cabinet Secretary, Ms Jeane Freeman MSP, recently wrote to NHS Boards with regards to the publication of the outcome of Mr John Sturrock QC’s Review of cultural issues in NHS Highland. A number of points were raised and the Cabinet Secretary sought assurance from NHS Boards in respect of the actions being undertaken following the recommendations of the report. NHSGGC have established a Short Life Working Group to gather information in preparation for the submission date of 28th July 2019. Ms Vanhegan described the wealth of work underway following the findings of the Review and noted a positive response from all colleagues. Ms Vanhegan sought the views of Board members in relation to the findings, and agreed to circulate the response to the Cabinet Secretary to Board members. It was agreed that the Staff Governance Committee would consider and discuss the response to the Cabinet Secretary in the first instance, at the next meeting in August, with a further report to be presented to the Board meeting in October.</p> <p>Mr Brown thanked Ms Vanhegan for the update and invited comments and questions from members. There were no questions or comments noted.</p> <p><u>NOTED</u></p>	<p>Ms Vanhegan</p> <p>Ms Vanhegan</p>
81.	ANNUAL REVIEW OF GOVERNANCE	
	<p>The Board considered the paper ‘Governance Framework Review – Phase 1 2019’ [Paper No. 19/38] presented by Ms Elaine Vanhegan, Head of Corporate Governance and Administration.</p> <p>The report detailed the first phase of work undertaken to review the governance framework across NHSGGC ahead of the publication of further national guidance in respect of the Blueprint for Good Governance and any further actions arising from the recent Ministerial Strategic Group’s report on increasing the pace of Integration of Health and Social Care.</p> <p>Ms Vanhegan provided an overview of the combined governance framework which included the Code of Conduct for members of NHSGGC; the NHS Board Standing Orders, including Decisions Reserved for the NHS Board; the Standing Financial Instructions; the Scheme of Delegation; Standing Committee Terms of Reference; and templates for use by all Standing Committees of the Board including agendas, minutes, rolling action logs, papers for submission, Committee Annual Reports and Committee Chairs Reports. Ms Vanhegan noted the governance process by which each of the documents had been reviewed.</p> <p>Mr Brown provided an overview of the work ongoing in respect of the national Blueprint for Good Governance, and noted that each NHS Board had submitted an Action Plan to identify the key themes and consider best practice. It was anticipated that this work would be complete by October, with the final outcomes of the national work anticipated by early 2020.</p> <p>Mr Brown thanked Ms Vanhegan for the update and invited questions and comments from Board members.</p>	

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	<p>In response to comments from Board members in relation to the Scheme of Delegation and the Remit of the Committees, Ms Vanhegan agreed that there was a need to further cross reference the Scheme of Delegation with the Standing Committees Terms of Reference to ensure consistency.</p> <p>Following discussion about the approval of Complaints Policies and Procedures, Ms Vanhegan highlighted that approval of Complaints Policies and Procedures remained within the remit of the Clinical and Care Governance Committee.</p> <p>In summary, the Board were content to approve the key elements of the governance framework, subject to further requirements following the outcome of national review of governance. The Board would anticipate an update on the national review of governance, as this work progressed.</p> <p><u>APPROVED</u></p>	<p>Ms Vanhegan</p>
<p>82.</p>	<p>ANNUAL REPORT FOR THE BOARD OF NHSGGC AND AUDITOR GENERAL FOR SCOTLAND 2018/19</p>	
	<p>The Board considered the paper ‘Audit Scotland’s Annual Report on the 2018/19 Audit’ [Paper No. 19/36] presented by the Assistant Director, Audit Services, Audit Scotland, Mr John Cornett. The report summarised the findings from the 2018/19 audit of NHSGGC. Mr Cornett noted the key messages from the report in relation to financial management; financial sustainability; governance and transparency; and value for money. Some issues were highlighted, however Mr Cornett noted that these were not unexpected for the type and size of the organisation and did not demonstrate any cause for concern. Mr Cornett did note an unexpected discrepancy which had arisen in respect of East Dunbartonshire HSCP outturn. A £500k differential in outturn was observed, however Mr Cornett did not consider this to be material to the overall outturn report. Nevertheless, this required investigation and rectification. Mr Cornett apologised that this was not included within the report presented today, however assured Board members that extensive discussions had taken place with colleagues to investigate the causes of this discrepancy and identify appropriate solutions.</p> <p>Mr Cornett went on to note the key successes of the organisation, particularly in relation to the Financial Improvement Programme and the achievements made to deliver the £93m financial challenge. Mr Cornett also recognised the achievements made in areas relating to systems, processes and strategies in place; continued work with colleagues to address the performance and financial challenges and achieve best value for money. Governance and transparency systems were comprehensive, however it was noted that consideration may be given to holding more governance committee meetings in public.</p> <p>Overall, Mr Cornett noted a positive report, which reflected the achievements made and highlighted the challenges.</p> <p>Mr Brown thanked Mr Cornett for the report and invited questions and comments from Board members.</p> <p>In response to questions from Board members in relation to the £500k discrepancy, Mr White advised the Board that this was an issue which emerged</p>	

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	<p>in Month 12 of the financial year. After investigation, the cause was attributed to accounting delays associated with the processing of care packages. Mr White and Mrs Grant met with the Chief Officer, Mrs Susan Manion and the Chief Executive of the Local Authority in East Dunbartonshire, Mr Gerry Cornes, to gain an understanding of the position. Whilst the discrepancy was not material to the overall outturn position of the Board accounts and of East Dunbartonshire HSCP accounts, it was unfavourable at this stage of the financial year. Mrs Grant highlighted that audit activity to improve processes and prevent reoccurrence had been agreed. Mrs Manion noted thanks to Ms Grant, Mr Cornes and Mr White for their assistance to resolve this matter.</p> <p>Mr Brown noted thanks to Mr Cornett, Mr White, Mr Peter Ramsay, Assistant Director of Finance, for their continued support and assistance.</p> <p>NOTED</p>	
83.	DATE OF NEXT MEETING	
	<p>Tuesday 20th August 2019 9.30am William Quarriers Centre, 20 St Kenneth Drive, G51 4QD</p> <p style="text-align: center;">The meeting concluded at 2.50pm</p>	