

<b>NHS Greater Glasgow &amp; Clyde</b>	<b>Paper No. 20/50</b>
<b>Meeting:</b>	<b>Board Meeting</b>
<b>Date of Meeting:</b>	<b>27<sup>th</sup> October 2020</b>
<b>Purpose of Paper:</b>	<b>For Noting</b>
<b>Classification:</b>	<b>Board Official</b>
<b>Sponsoring Director:</b>	<b>Mrs Jane Grant, Chief Executive</b>

### **Paper Title**

#### **Queen Elizabeth University Hospital and Royal Hospital for Children Update**

#### **Recommendation**

The Board is asked to:

Note the update on the related work streams in respect of the Queen Elizabeth University Hospital (QEUH) and Royal Hospital for Children (RHC).

#### **Purpose of Paper**

To ensure the NHS Board is kept abreast of the varying issues relating to the QEUH and the RHC.

#### **Key Issues to be considered**

- The current position in respect of the escalation to Level 4 of the NHS Scotland Performance Management Framework.
- The position regarding the recommendations of the Independent QEUH Report
- The Public Inquiry into the Royal Hospital for Children and Young People in Edinburgh and the QEUH Campus.
- The position in relation to the pursuit of legal action for loss and damages in relation to the QEUH and RHC.
- The work the Board is progressing regarding the Health and Safety Executive investigation.

#### **Any Patient Safety/Patient Experience Issues**

Core to the work underway.

#### **Any Financial Implications from this Paper**

No defined costs at this stage however varying elements will be of significance over time.

#### **Any Staffing Implications from this Paper**

Nil specific

#### **Any Equality Implications from this Paper**

None

**Any Health Inequalities Implications from this Paper**

None

**Has a Risk Assessment been carried out for this issue? If yes, please detail the outcome.**

Not applicable

**Highlight the Corporate Plan priorities to which your paper relates**

Improving quality, efficiency and effectiveness.

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## Queen Elizabeth University Hospital and Royal Hospital for Children Update - October 2020

### 1.0 QEUH/RHC and Performance Escalation

1.1 NHS GGC remains on Level 4 of the NHS Scotland Performance Management Framework in respect of what was described as on-going issues around the systems, processes and governance in relation to infection prevention, management and control at the Queen Elizabeth University Hospital (QEUH) and the Royal Hospital for Children (RHC) and the associated communication and public engagement issues.

1.2 Board members will be aware that as part of that process an Oversight Board was established, chaired by Professor Fiona McQueen, with three sub groups reporting to the Oversight Board namely; Infection Prevention and Control Governance, Communication and Engagement and a Technical group.

1.3 Following a hiatus during the first wave of COVID-19, the work undertaken on behalf of the Oversight Board and the draft sub group and associated work stream reports has recommenced in the last few months. We continue to comment on the drafts received from the varying strands of work and final versions are awaited. An Oversight Board took place in September 2020 and a single Oversight Board Report will be prepared. The timescale for this to be confirmed but is anticipated to be during November 2020.

1.4 We continue to support the work of the casenote review which is considering all haemato-oncology paediatric patients from 2015 to 2019 who had a gram-negative bacterium identified in laboratory tests. This is being undertaken by an expert panel who are providing oversight and final analysis. Currently the panel are seeking broader information regarding systems and processes. Reporting timescales have yet to be finally confirmed.

1.5 Work continues on Wards 2A and 2B of the RHC, which were closed in September 2018. Timescales were updated when work began on the wards and the practicalities of addressing the range of works required were more fully understood.

1.6 Following receipt of the Independent Review report, which considered the Air Handling Units' operating parameters, a review was commissioned in relation to the existing 4 BMT and 4 PPVL rooms. This review considered the current operation of the system, and the potential lifespan of the existing plant, resulting in the decision that further works be undertaken in parallel with the current works, thus avoiding any further impact on the timescales for completion. This was approved by the Finance Planning and Performance Committee.

1.7 In addition, the work on 2A/B has been further impacted on by COVID-19 with cessation of activity for some weeks, and the programme plan now recognises that various mitigation measures need to be in place to ensure safe working, adherence to social distancing, PPE and the enforcement of these measures. The current timescale for completion is May 2021 but this is dependent on no further disruption due to the COVID situation.

1.8 Further work continues internally to address the issues associated with the Performance Escalation. An internal Oversight Board continues to meet regularly to overview progress with GP OOHs, Unscheduled Care and Scheduled Care. The culture and leadership work outlined in the papers to the February Board meeting is also continuing to develop. No further discussions have taken place in this regard with the Scottish Government although it has been indicated that further discussions will take place in the coming period.

## **2.0 Independent Review – Update**

2.1 Work continues to review the actions arising from the report of the independent review of infection control concerns at the Queen Elizabeth University Hospital and the Royal Hospital for Children by Dr Andrew Fraser and Dr Brian Montgomery.

2.2 The Report made 63 recommendations in total. The recommendations are wide-ranging and relate to both NHS Greater Glasgow and Clyde and to wider national agencies and professional organisations.

2.3 Of the 63 recommendations in the report, 40 require to be addressed directly within NHS Greater Glasgow and Clyde. A number of the recommendations have already been addressed during the course of the Review, including some of those requiring revised controls relating to Capital Planning and Infection Control in the Built Environment.

2.4 This is being progressed in accordance with the action planning methodology recommended by the Scottish Government. A specific template has been used to create a detailed action plan for reporting and monitoring the actions required to address each of the recommendations. Progress is being monitored by an executive group with input from appropriate Directors. Once finalised, through the CMT, progress will be presented to the relevant governance committees.

## **3.0 Scottish Hospitals Public Inquiry**

3.1 Board members will be aware that the Scottish Hospitals Public Inquiry was launched in August 2020. The Inquiry Chair, Lord Brodie, has been holding a series of introductory stakeholder meetings with a number of interested parties and core participants. Key members of the Executive Team met with Lord Brodie and the Secretary to the Inquiry in early September. This was a useful and positive session in understanding perspectives and requirements for working together moving forward. Further meetings will be undertaken into October considering some practicalities regarding information transfer and establishing systems and processes for communication.

3.2 We continue to work with the dedicated team from the Central Legal Office on all issues connected to the QEUH/RHC currently focusing on the Inquiry and the HSE Appeal. Supported by the CLO, NHS GGC has now instructed both Senior Counsel and 2 Junior Counsel to act on the Board's behalf throughout the Public Inquiry.

3.3 The Programme Management Office (PMO) continues to manage the day to day requirements of the Public Inquiry in terms of administration and document flow. As a formal process is established by the Inquiry Team, the resources required are likely to increase to ensure we respond in a timely manner. The Executive Oversight Group is being established to ensure effective and transparent decision making across the process at this stage. As previously advised, some of the issues under consideration are related to those detailed in the legal claim (update below), and hence oversight of both elements is critical moving forward.

## **4.0 Legal Proceedings**

4.1 Further to the approval of the Board in December 2019 to raise Court Proceedings against the parties responsible for delivering the QEUH/RHC construction project, the Board engaged MacRoberts LLP to act on its behalf. Court summons were served on the main contractor for the hospital project, Multiplex, and the Health Board's advisors, Currie & Brown UK Limited and Capita Property and Infrastructure Limited.

4.2 The Board continues to engage with the appointed legal team within MacRoberts. The process of seeking expert opinion against the 11 Heads of Claim is underway in order that the Board is able present a robust claim in court by early 2021. A number of site visits have taken place and preliminary reports from the independent experts are expected to assist on the question of liability.

Following a recent meeting, a detailed plan is being developed to define the relevant process to ensure that all timescales are met and relevant governance committees and the NHS Board are fully informed in due course.

## **5.0 HSE Investigation**

5.1 Board members will be aware that on the 24 December 2019, the Health and Safety Executive (HSE) served on NHS GGC an Improvement Notice in relation to the ventilation system for Ward 4C. Legal advice was sought and we appealed the Improvement Notice on the grounds that there was no basis in fact for the Improvement Notice to have been served.

5.2 After an initial hearing in the Employment Tribunal relating to the Board's appeal against the HSE Improvement Notice, it was agreed that the legal representatives of the HSE and Board would meet. Due to COVID-19 there was a suspension of activity earlier in the year. We have re-engaged with the HSE through the CLO and legal teams from both sides met on 20 August. A continued procedural hearing in the Employment Tribunal will be scheduled at a later date. Substantive hearings may be fixed thereafter and this will depend on the outcome of discussions between the legal teams.

## **6.0 Summary**

6.1 The many issues described in this paper represent a significant amount of work over the coming months, and indeed years in respect of the Public Inquiry. In addition, the focus now required on scaling up our response to COVID 19 is significant. The resource requirements of the senior leadership team and supporting elements, such as the PMO, remain under constant review.

The senior leadership team are committed to support the programmes of work described, ensuring swift action and implementation of recommendations with robust action plans. A process is being established to ensure a monitoring framework is created to track progress and ensure any required improvements are realised.