

# Core brief

Tuesday, 21 August 2018

## Introduction

The Board of NHS Greater Glasgow and Clyde met today, Tuesday 21 August 2018.

Here is a summary of key items discussed at today's meeting:

[All the Board papers are available on our website](#)

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## Big six to improve health

Greater Glasgow and Clyde Board approved an ambitious public health strategy today which endorses six priority areas for action.

Dr Linda de Caestecker, Director Public Health, presented the strategy which sets out how the NHS must work closely with local authority partners, third sector partners and the voluntary sector to help prevent disease and address the fundamental causes of ill-health.

The strategy: "Turning the tide through prevention", sets out the direction the board will take over the next 10 years to accelerate health improvement and reduce health inequalities.

Board members gave their full support to the strategy.

Public Health Strategy - [Click here to read the full release Board Paper 18/36](#)

## Technology key to health

Digital technology will be increasingly central to the effective delivery of healthcare. E-Health director William Edwards set out NHSGGC's aims to transform healthcare using digital technology at today's board meeting highlighting the potential for innovation to improve lives and enhance patient care.

Glasgow and Clyde is already leading the way with the development of electronic health records in Scotland and aims to further develop its use of technology to support all areas of healthcare delivery including mental health, acute hospital services and in the community.

Digital Strategy - [Click here to read the full release](#)

### **Performance progress and challenges**

There has been a third consecutive month of improvements to performance against the A&E wait target with the June 2018 position of 93.6per cent being seen, treated, admitted or discharged within four hours across NHSGGC acute hospitals.

The performance report at today's board meeting also detailed positive progress to a range of services including drug and alcohol treatment; alcohol brief interventions; psychological therapies and IVF treatment all meeting or exceeding target.

The national cancer 31 day waiting time target was also met for the second consecutive month.

Smoking cessation services were also highlighted as a real success story. A total of 2,015 successful smoking quits reported across the board's 40 per cent most deprived areas between April and March this year. The board heard that smoking rates had fallen significantly and that many of those our services were now trying to support to quit were "the most addicted smokers".

Areas for improvement and action in the months ahead include our performance against the 62 day wait for suspicion of cancer referrals and also the 12 week TTG (Treatment Time Guarantee). The overall number of delayed discharges and associated bed days lost also continues to be a challenge.

See press release on "more smokers than expected quit thanks to Board support" - [Click here to read the full release](#)

See the full performance report (which includes commentary on plans to address challenges). [Board Paper 18/37](#)

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