

# Core brief

## Report from October Board meeting

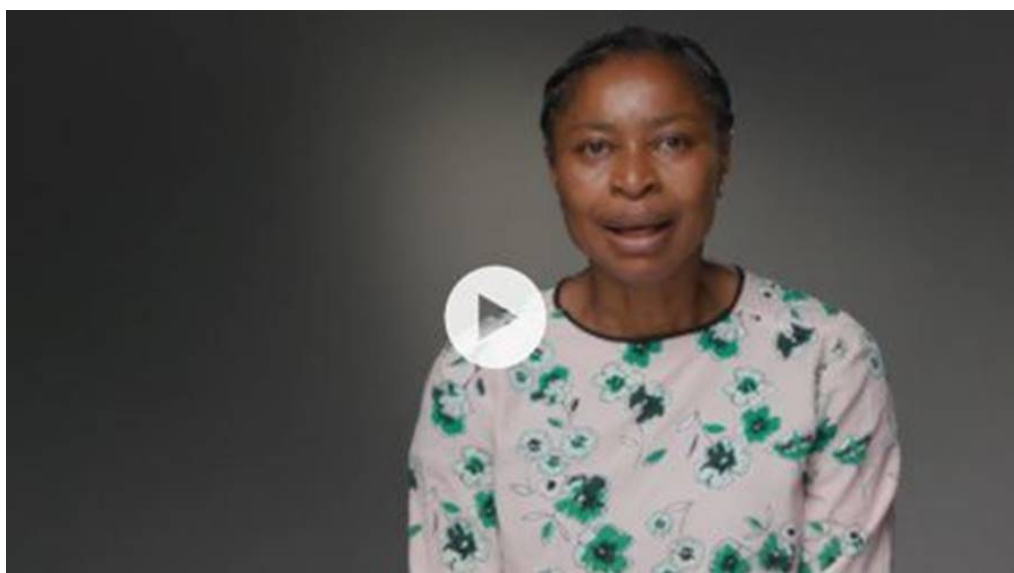
The Board met on 26 October 2021. The full set of papers for the Board are [available on our website](#).

Key items considered included scrutiny of the ongoing response to COVID, preparations for COP26 and the Board's remobilisation plan. The Board also received reports on performance, finance and infection control.

The Chairman, Professor John Brown, CBE advised that this Board meeting would be the last for Employee Director, Dorothy McErlan, who will retire in December. He took the opportunity to thank Dorothy for her contribution to the Board over the past five years and to wish her a happy retirement. The Chairman also paid tribute to former Director of Communications, Ally McLaws, who had recently passed away following a long illness.

## Patient Story

This month's patient story tells of how NHS Greater Glasgow and Clyde has worked with African communities living in the area to promote uptake of COVID vaccination, demonstrating a 'genuine desire to listen to what the community needed'. The video can be viewed [here](#).



## COVID-19 Update

Director for Public Health, Dr Linda de Caestecker, updated the Board on progress with the response to the pandemic. The Board heard how the organisation continues to experience increased pressure across health and social care services. Community rates have recently plateaued yet still remain relatively high. Hospital admissions also remain high. The Board noted that whilst there are currently less than 300 patients in hospital with a diagnosis within the past 28 days, in total there are more than at the peak of the first wave. On a positive note, the Board also observed the shorter lengths of stay for patients and the

better treatment options now available, with increasing numbers of patients now being admitted with COVID, rather than for COVID.

Dr de Caestecker also reported on the significant progress that continues to be made in rolling out the vaccination programme within NHS GGC. In total 1.8 million COVID vaccines have now been administered, including more than 113,000 booster jags and 150,000 flu vaccines. In total over the winter, the vaccination teams will deliver 700,000 flu and COVID first, second and booster vaccines. Board members recorded their thanks and congratulations to the team for the success to date in delivering the programme.

In closing Dr de Caestecker advised that the pandemic remains challenging and that people are still becoming unwell. She encouraged people to continue to come forward to get vaccinated when invited and to continue to observe social distancing and wear face coverings.

[Click here to read the full paper.](#)

### **COP 26 Update**

Dr Linda de Caestecker updated the Board on our preparations for the COP26 UN Climate Conference being hosted in Glasgow.

The Board heard how planning and exercising for the event – one of the largest ever held in Scotland – is well developed. All services have assessed any likely impact from the conference to their service based on previous COP conferences. We do not anticipate much demand for inpatient services, however our Minor Injuries Units, the Scottish Ambulance Service and community pharmacies are all prepared for demands on their services.

The Board also heard that, as a result of the COP26 programme and associated road closures, and given the expected disruption, the decision was taken not to run any face to face clinical services from the West Ambulatory Care facility at Yorkhill on 1 November. As a result of early planning, there should be minimal impact on patient appointments, with only a small number rescheduled or located to other sites.

NHS GGC has worked closely with event partners, including the Scottish Government and Glasgow City Council, to communicate anticipated disruption to both staff and patients, to ensure that they can plan ahead.

[Click here to read the Board Paper.](#)

### **Remobilisation Plan and Winter Update 2021-22**

Dr Jennifer Armstrong, Medical Director, reported to the Board on the Remobilisation Plan (RMP4) and the Winter Plan for NHS GGC covering the period to March 2022.

The focus for the foreseeable future will remain on urgent and emergency care needs, with detailed plans for the ongoing recovery of other planned and elective care.

Key priorities identified within the Remobilisation Plan include:

- Staff health and wellbeing: Direct support has been offered to 624 staff from the last mental health check-in. Rest and Relaxation hubs have been refreshed. An Occupational Health Long COVID service has been established for those who may need it.
- Elective Programme: In the coming months there will continue to be challenges in delivering the elective programme due to pressures within staffing, the impact of winter, the continuing need for infection control measures and separate pathways in acute settings to support elective patient testing and requirements for specific specialties eg ENT, Oral Health. Within this environment our approach to planned elective care over the autumn and winter period will have emphasis on coordinated and flexible service delivery across NHS GGC to maximise surgical and outpatient activity.

- Primary Care: Primary Care activity across the contractor groups is reported to have increased in numbers and complexity since the beginning of this year. Remobilisation has stepped up, whilst the need for COVID Community Pathways has continued. From October to March, primary care will focus on chronic disease management, unscheduled care and support for the elective remobilisation programme.
- Mental Health Care: Mental health priorities will include CAMHS waiting lists and expansion of service to age 25.

The Redesign of Urgent Care roll-out continues with a number of new pathways expected to go live before the height of winter demand.

[Click here to read the Board Paper.](#)

### **Whistleblowing Annual Report**

The Board received the annual report on whistleblowing activity for 2020/21. Much of the reporting period has been spent preparing for the launch of the new National Whistleblowing Standards launched in April 2021. The report also highlights:

- The volume of cases received has been greater in this reporting period than in the previous two years;
- There has been learning and action from whistleblowing cases to improve services;
- A review undertaken by the Board's Whistleblowing Standards has offered a further opportunity to learn, take action, and improve the whistleblowing function.

[Click here to read the Board Paper.](#)

### **Healthcare Associated Infections report**

The Healthcare Associated Infection Reporting Template (HAIRT) is a mandatory reporting tool for the Board to have oversight of healthcare associated infection (HAI) targets, incidents and outbreaks and all other HAI activities across NHSGGC for the July and August 2021 period.

Professor Angela Wallace, Executive Director, Infection Prevention and Control, highlighted a number of areas from the report:

- The Board's performance against HAI national targets for the two month period was within normal limits with demonstrable improvement over time.
- The whole system infection prevention and control quality improvement network has been established and is making good progress.
- There is significant interest from other Boards in a number of NHSGGC innovations in infection control e.g. the infection control dashboard created by eHealth.

Professor Wallace paid tribute to the infection prevention and control team and operational colleagues who were working together to manage cases of infection and also collaborating on the programme of improvement.

[Click here to read the full paper.](#)

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