

Core brief

Report from the February Board meeting

The NHSGGC Board met on Tuesday 22 February 2021. The full set of the papers for the meeting are available [here](#).

The topics covered included the Board's response to COVID-19, an update on the Queen Elizabeth University Hospital and Royal Hospital for Children and the regular Health Associated Infection report.

Reports by the Chairman and the Chief Executive

The Chairman's report included an update on membership of the Board, with new Board member, David Gould, welcomed to his first meeting. David joined the Board on 1st February, 2022, following the departure of outgoing members, Flavia Tudoreanu and Paula Speirs. He also highlighted that engagement with elected members continued, with the recent elected member briefings having taken place in February in addition to a series of ongoing meetings with senior politicians on issues raised in Parliament regarding the QEUH/RHC.

The Chief Executive informed the Board that COVID continued to bring challenge to services and that this combined with delayed discharges and usual winter demand meant that the focus of the Strategic Executive Group continued to be centred on managing current system pressures as well as service recovery.

The Chief Executive paid tribute to the staff working in the new Clydebank Health and Care Centre, whom she met during a recent visit to the new £21m facility.

The recruitment process for the post of Chief Operating Officer and Executive Nurse Director had concluded with William Edwards and Professor Angela Wallace confirmed respectively in post. Dr Emilia Crighton has been confirmed as interim Director of Public Health and Denise Brown as interim eHealth Director.

The Chief Executive closed with a reminder for Board members that the 2021 Chairman's Excellence Awards would be held virtually on Wednesday 23rd February.

COVID-19 Update

NHSGGC's Director of Public Health, Dr Linda de Caestecker, provided an update to the Board on the current COVID-19 situation, noting that while the number of cases in the local community had fallen by approximately half in recent weeks, that in the past week alone, there had been an upturn in numbers, thought to be a result of people returning to a traditional work environment. Case numbers show that prevalence is significant in the 29-50 year old age group and that there is currently between 1,200-1,600 cases being notified each day. The community prevalence, as of the 21st February, was 904/100,000 members of the population. In hospital too, numbers were beginning once again to increase. On the day of the Board meeting, 303 patients were in NHSGGC hospitals with a diagnosis within the past 28 days. In addition, 40 care homes had COVID-19 outbreaks.

Dr de Caestecker also delivered an update on vaccinations, informing Board members that 91.3% of people aged 18 years and over had now received their first dose of COVID vaccine. The Board is also beginning to plan for vaccinating 5-11 year olds in line with Scottish Government and JCVI guidelines. While NHSGGC is awaiting the final guidance, it is anticipated that vaccination of this age group will begin in March 2022. It was also noted that the flu vaccination programme had re-commenced.

The Board discussed the variable vaccination uptake rates in different areas and what more could be done to support uptake amongst those who find it hardest to engage with health services. Dr de Caestecker highlighted a number of measures that had been taken to engage with particular groups, including those experiencing addiction and homelessness.

Healthcare Associated Infection Report (HAIRT)

Professor Angela Wallace, Interim Director for Prevention and Control of Infection, led the discussion on the regular report on healthcare associated infection rates. The Board also welcomed Sandra Devine, interim Infection Control Manager to present the report. The Board noted the significant oversight in place to provide assurance on the important area of infection prevention and control with regular scrutiny through seven different governance levels – including the Board itself.

Overall, it was noted that performance remained stable and that Staphylococcus aureus bacteraemia (SAB), Clostridioides difficile infection (CDI) and E.coli bacteraemia (ECB) case numbers remain within control limits this period. The Board noted that urinary catheters remain a risk factor for ECB, and were associated with 9% of all healthcare associated cases in this period. The Board were assured on the actions being taken in response to this.

The Board agreed that they were assured that the organisation continued to achieve a good level of performance in infection prevention and control which was particularly impressive in the circumstances of the pandemic. The Board commended the implementation of the real-time dashboard which was available to all frontline teams and which provided real grip in managing infections. The Chairman offered his personal thanks to Professor Wallace, Sandra Devine and everyone working in hospitals to maintain very high standards of infection prevention and control.

A copy of the HAIRT report can be found [here](#).

Board Financial Report

The Director of Finance, Mark White gave an overview to Board members noting the current and projected financial position. The current position at Month 9 was a £12.5m overspend, however the Board was predicting an in-year break-even position. This was underpinned by the full amount of direct Covid spend (£105m) being funded by the Scottish Government and the excellent achievement of £30m savings through the Financial Improvement Programme. The Capital Resource Limit was also projected to be achieved at the 31st March 2022. The Board was also advised of an increase in the underlying deficit due to COVID, following several years of the deficit reducing, and reducing it was now the Board's primary financial objective.

A copy of the Finance Report can be found [here](#).

QEUH/RHC Update

The Chief Executive and Director of Estates and Facilities, Tom Steele, updated the Board on the position relating to the Queen Elizabeth University Hospital and the Royal Hospital for Children in respect of governance, legal claims and the Scottish Hospitals Public Inquiry.

The Board noted that a further meeting of the Advice, Assurance and Review Group (AARG) had taken place in December 2021. A review was undertaken of the outstanding issues from the overarching Action Plan developed to deliver the recommendations from the Oversight Board Report, the Case Note Review Report, and those of the Independent Review. It was reported that 96% were complete. The remaining action in the Independent Review and two within the Oversight Board report relate to ongoing discussion with Scottish

Government colleagues, with regards to the final structure of the IP&C in NHSGGC. The Associate Director of IPC will be recruited to shortly.

In relation to wards 2A/2B, Mr Steele reported that the capital scheme was nearing completion. The Board is in dialogue with the Scottish Government and NHS Assure to finalise assurance processes to enable the ward to move as early as possible in March. In the meantime, family and patient communications are being finalised to support patients in advance of the move back to the unit.

A copy of the full report can be found [here](#).

Closing remarks

Concluding the Board meeting, the Chairman paid tribute and formally thanked outgoing Chief Operating Officer, Jonathan Best, Director of Public Health, Dr Linda de Caestecker and Director of Nursing, Dr Margaret Mcguire for their service to NHSGGC and the wider NHS ahead of their retirements in the coming weeks.

Are your contact details up-to-date? [Click here](#) to check