

NHS 24

Minutes of the Meeting of the NHS 24 Board held on Tuesday 18 August at 10am Boardroom, Lumina Building/MS Teams

20 October 2022 ITEM 3 FOR APPROVAL

PRESENT

Dr Martin Cheyne (in the Chair)

Mr Mike McCormick (Vice Chair)	Ms Carol Gillie
Mr Jim Miller	Ms Marieke Dwarshuis
Ms Anne Gibson	Ms Maria Docherty
Ms Liz Mallinson	Mr John Gebbie
Dr Laura Ryan	Mr Martin Togneri
Mr David Howe	Mr Alan Webb
Mr Kenneth Woods	

IN ATTENDANCE

Ms Anne Marie Gallacher		Chief Information Officer
Ms Jacqui Hepburn		Director of Workforce
Ms Stephanie Phillips		Director of Transformation, Strategy, Planning and
·		Performance
Ms Suzy Aspley		Chief Communications Officer
Mrs Geraldine Mathew		Board Secretary (Minute)
Mr Kevin McMahon		Head of Risk and Resilience (For Item 8.2)
Ms Janice Houston		Interim Director of Service Delivery
Ms Ann Campbell		Executive PA to the Board

		ACTION BY
01.	WELCOME, APOLOGIES AND INTRODUCTIONS	
	The Chair welcomed members present to the August 2022 meeting of the Board. There were no apologies noted.	
	<u>NOTED</u>	
02.	DECLARATIONS OF INTEREST	
	The Chair invited members to declare any interests in any of the items being discussed. There were no declarations made.	
	<u>NOTED</u>	
03.	MINUTES OF PREVIOUS MEETING OF 16 JUNE 2022	
	The Board considered the minute of the previous meeting held on Thursday 16 June 2022 [Paper No. Item 03] and were content to approve this as a complete and accurate record.	

		ACTION
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04.	MATTERS ARISING	
04.	MATTERS ARISING	
	There were no matters arising from the previous meeting.	
	NOTED	
25	NOTES ON ANY OTHER RUSINESS	
05.	NOTES ON ANY OTHER BUSINESS	
	Members had been invited to raise any other matters not otherwise included on the agenda by the Board Secretary, prior to the meeting. There were no matters raised.	
	NOTED	
06	CHAIR'S REPORT	
06.	CHAIR S REPORT	
	The Chair provided an overview of activities since the last meeting, and these were included as an appendix with the papers for information.	
	Discussion took place regarding planning which was underway to hold a Joint Board Meeting with Scottish Ambulance Service (SAS). This meeting aimed to provide mutual understanding of each of the organisations.	
	The Board were content to note the Chairs Report, and the activities undertaken since the last meeting.	
	NOTED	
07.	CHIEF EXECUTIVE'S REPORT	
07.	OTHER EXECUTIVE ONE! ON!	
	The Board considered the paper 'Executive Report to the Board' [Paper No. Item 07] presented by Mr Jim Miller, Chief Executive. Mr Miller noted that the report remained under development to enhance the look and feel of it. He provided an overview of the key topics within the report including the success of the Surviving Suicidal Thoughts work and the activities in relation to Staff Experience, particularly efforts to improve web content for new employees and creating a more interactive feel. Mr Miller was pleased to note that there had been an increase of 8% on the previous year of individuals undertaking the iMatter survey, with particular emphasis required on the visibility of the Board and its members. He encouraged all Board members to attend onsite for meetings, take part in walk rounds, and to meet with staff members.	
	Dr Cheyne thanked Mr Miller for the update.	
	Discussion took place about sustainability, and Dr Cheyne highlighted that the Scottish Government had recently begun an initiative across the whole NHS system. Executive Leads for sustainability had been appointed and each Board had been asked to appoint a Non-Executive Director of the Board as Sustainability Champion. Dr Laura Ryan had been appointed as Executive Lead, and Dr Cheyne was pleased to announce that Ms Marieke Dwarshuis had agreed to take on the role of Sustainability Champion. Dr Ryan and Ms Dwarshuis would discuss the requirements of the role.	
	The Board were content to note the report and the overview of progress on the high-level activities associated with the delivery of the NHS 24 2021/22 Remobilisation Plan and developing annual operating plan.	
	NOTED	

		ACTION BY
8.1	PATIENTS STORY	
	Ms Maria Docherty, Director of Nursing and Care, provided members with an overview of a recent public protection referral. She described the circumstances which related to a young child and explained the actions taken by all the staff involved both within NHS 24 and within SAS and highlighted the key points of learning following this and the improvement actions being taken.	
	Dr Cheyne thanked Ms Docherty for the overview and wished to note thanks on behalf of the Board to all those involved in this.	
	Ms Docherty described a recent compliment received regarding the quick response of NHS 24 and SAS staff following a call received which resulted in a patient undergoing emergency surgery. The quick response of the staff involved ensured that the patient was in theatre within 3 hours of the initial call to NHS 24. Dr Cheyne thanked the family for sharing their story and noted thanks to the call handler, nurse, and colleagues at SAS for their swift response. He noted that the Board were assured that staff continued to undertake their duties thoroughly and to a very high standard.	
	<u>NOTED</u>	
8.2	CORPORATE RISK REGISTER	
	The Board considered the paper 'Corporate Risk Register Update' [Paper No. 8.2] presented by Dr Laura Ryan, Medical Director, and Mr Kevin McMahon, Head of Risk and Resilience. Dr Ryan noted thanks to Mr Togneri, Chair of the Clinical Governance Committee, for highlighting a discrepancy on the cover paper at the recent meeting of the Committee and assured the Board that this had been rectified. Mr McMahon provided an overview of the corporate risks scoring 10 or more. The Chair thanked them for the report and invited comments and questions from members. Discussion took place about Risk RPNG/04424 – and the associated Full Business Case and Ms Phillips, Director of Transformation, Strategy, Planning and Performance, noted that an update on this was recently presented to the Planning and Performance Committee. Whilst this was progressing, further work was required to develop the Full Business Case. Ms Phillips confirmed that, once further information was available, this would be presented to the Planning and Performance Committee, and, if required, to the Board, in due course. The Board were content to note the risks presented and were assured by the risk management process. NOTED	
0.2	NUC 24 DUTY OF CANDOUR ANNUAL REPORT 2024/22	
8.3	NHS 24 DUTY OF CANDOUR ANNUAL REPORT 2021/22	
	The Board considered the paper 'NHS 24 Duty of Candour Annual Report 2021/22' [Paper No. Item 8.3] presented by the Director of Nursing and Care, Ms Maria Docherty. The paper detailed key activities and developments relating to Adverse Event cases managed under the Duty of Candour legislation from 1 April 2021 to 31 March 2022. The report had been presented to and endorsed by the Clinical Governance Committee. Dr Cheyne thanked Ms Docherty for the report and invited comments and questions from members.	

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	Discussion took place regarding the possibility of benchmarking data. Ms Docherty agreed to consider other NHS boards and other organisations that could be used for benchmarking, and this would be discussed further at the Clinical Governance Committee.	Ms Docherty
	In summary, the Board were content to approve the Duty of Candour Report 2021/22.	
	APPROVED	
9.1.	STRATEGIC DEVELOPMENT UPDATE	
	The Board considered the paper 'NHS 24 Strategic Intent' [Paper No. 9.1] presented by Ms Stephanie Phillips, Director of Transformation, Strategy, Planning and Performance. The paper sets out the high-level timetable to develop the strategy. Ms Phillips noted that the paper had been fully discussed at the Planning and Performance Committee. She highlighted the key work ongoing including data work, horizon scanning and mapping the engagement framework. Ms Phillips described the development of a Strategic Planning Group, co-chaired by Mr Mike McCormick, which incorporated cross-Directorate representation. Dr Cheyne thanked Ms Phillips for the update and invited comments and questions from members. Discussion took place regarding engagement with other organisations and links to the Scottish Government, and Ms Phillips confirmed that the Statement of Intent had been shared with the Sponsorship Team and positive feedback had been received. In addition, this had also been shared with some other Boards and feedback had also been received following this. The Board were content to note the update provided and the progress made towards the development of a new NHS 24 Strategy.	
	NOTED	
9.2	NHS 24 STRATEGIC PRIORITIES 2022/23	
	The Board considered the paper 'NHS 24 Strategic Priorities 2022/23' [Paper No. Item 9.2] presented by Ms Stephanie Phillips, Director of Transformation, Strategy, Planning and Performance. The paper provided an update on the submission to Scottish Government which set out NHS 24 high level priorities for 2022/23. Dr Cheyne thanked Ms Phillips for the update. The Board were content to note the submission as requested by the Scottish Government	
	setting out NHS 24 high level priorities for 2022/23.	
	NOTED	
9.2	CHANGE PORTFOLIO UPDATE	
	The Board considered the paper 'PMO – Change Portfolio Update' [Paper No. 9.3] presented by Mr John Gebbie, Director of Finance. The paper provided a progress summary of the key programmes within the Change Portfolio, including several key programmes being at or nearing completion, including the Estates programme, the Connect programme, and the Mental Health programme.	
	The Chair thanked Mr Gebbie for the update.	

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	The Board were content to note progress in respect of the key work programmes and were assured by the information provided.	
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9.4	PROCUREMENT STRATEGY 2022 – 2024	
	The Board considered the paper 'Procurement Strategy 2022 – 2024' [Paper No. Item 9.4] presented by Mr John Gebbie, Director of Finance. NHS 24 was required to produce and publish both a Procurement Strategy and an Annual Report, with the 3-year Strategy being updated on a yearly basis. The Strategy had been presented to and endorsed by both the Planning and Performance Committee and the Audit and Risk Committee.	
	Dr Cheyne thanked Mr Gebbie for the report and invited comments and questions from members.	
	Discussion took place about delegation of the Procurement Strategy to one governance Committee going forward and it was suggested that this should be delegated to the Audit and Risk Committee. Whilst there was support for this proposed way forward, Dr Cheyne agreed that this matter should be discussed further at the next Integrated Governance Committee meeting prior to formal adoption.	Board Secretary
	The Board were content to approve the Procurement Strategy and Annual Report for publication.	
	APPROVED	
10.1	CORPORATE PERFORMANCE REPORT	
	The Board considered the paper 'Corporate Performance Report July 2022' [Paper No. Item 10.1] presented by Ms Stephanie Phillips, Director of Transformation, Strategy, Planning and Performance. The paper provided an overview of key points in relation to July 2022 performance, including the number of calls offered 165,085 which although consistent with the previous 4 months, was the busiest since January 2022, with July being the first month since March where there have been no national public holidays. Ms Phillips noted that referrals to the Flow Navigation Centres (FNC) continued to increase, up to 10.1% of urgent care outcomes, the highest proportion of FNC referrals since the pathway launched. Work was underway to explore abandoned calls and some interesting data was emerging from this. Further work in this area would be reported to the Planning and Performance Committee.	
	Dr Cheyne thanked Ms Phillips for the report and invited comments and questions from members.	
	Discussion took place about the number of abandoned calls and if there was evidence that callers had taken the advice offered via the IVR. Ms Phillips explained that some analysis had been done on this matter, and additionally, callers to the service were asked about the reasons they had abandoned calls. Over 30% go on to contact their GP Practice, which indicated that callers were following the advice received via the IVR. Ms Houston explained the processes in place regarding high call volumes from specific callers. Ms Phillips also noted that consideration was being given to callers with complex needs, to ensure appropriate management and better outcomes for the individual.	
	The Board were content to note the Corporate Performance Report for July 2022 and were assured by the information provided in respect of the quality and performance of services provided for the period ended 31 July 2022.	
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10.2	FINANCIAL PERFORMANCE REPORT	
10.2	THANGIAL FERT CRIMANCE REFORM	
	The Board considered the paper 'Financial Performance Report to 30 June 2022' [Paper No. 10.2] presented by the Director of Finance, Mr John Gebbie. The paper provided an overview of NHS 24 financial performance for the period April 2022 to June 2022. Mr Gebbie noted that NHS 24 reported an underspend position of £22k against the forecast position. The full year forecast was anticipating a break-even position, and this was subject to funding assumptions in relation to the Redesign of Urgent Care (RUC), Menta Health Hub, and the Agenda for Change pay uplift outcome being fully funded.	
	The Chair thanked Mr Gebbie for the report and invited comments and questions from members.	
	Discussion took place regarding the new format of the report and members were pleased with the improvements made. Following a request to add tables to include the actuals, budget and variance, Mr Gebbie agreed to include these as an appendix to the report going forward.	Mr Gebbie
	The Board were content to note the report and the NHS 24 financial performance to 30 June 2022.	
	<u>NOTED</u>	
10.3	QUARTERLY WORKFORCE PERFORMANCE REPORT QUARTER 1	
	The Board considered the paper 'Quarterly Workforce Performance Report Quarter 1 – April to June 2022' [Paper No. Item 10.3] presented by Ms Jacqui Hepburn, Director of Workforce. The report provided an overview of key areas including key workforce information, transforming ways of working and planning, developing the organisation and culture, supporting the workforce through improved people services, and skills sets. Ms Hepburn noted that the draft Workforce Strategy had been submitted to Scottish Government and feedback was expected in September. The Strategy would be discussed at the additional Staff Governance Committee meeting scheduled in October 2022, and thereafter presented to the Board in October 2022.	Ms Hepburn
	It was noted that significant improvement had been made in respect of absence rates, and Ms Hepburn noted that this had now dropped to 6% as of this week. Furthermore, significant improvement had been made to increase statutory and mandatory training compliance and the Board noted thanks to all staff who contributed to the improvements.	
	Dr Cheyne thanked Ms Hepburn for the update and invited comments and questions from members.	
	Discussion took place regarding several key priorities, including the coaching model framework, mentoring, and links between the attrition rate and appraisal rate. Ms Hepburn assured the Board that work was ongoing in respect of each of these matters with monitoring through the Staff Governance Committee.	
	The Board were content to note the Quarterly Workforce Performance Report for Quarter 1 – April to June 2022 and were assured by the information provided that work continued to progress the key matters.	
	<u>NOTED</u>	
10.4	NHS 24 ANNUAL REVIEW	
	The Board considered the paper 'NHS 24 Annual Review 2020/21' [Paper No. Item 10.4] presented by the Board Chair, Dr Martin Cheyne. The paper included the Cabinet Secretary's	

		ACTION BY
	outcome letter received by the Board Chair and the Chief Executive, following the NHS 24 Annual Review 2020/21 meeting. Dr Cheyne was pleased to note the complimentary letter from the Cabinet Secretary which reflected the outstanding performance of the organisation during an extremely challenging time. Furthermore, the organisation had underwent extensive growth and implemented new pathways such as the COVID-19 helpline at pace.	51
	Mr Jim Miller, Chief Executive, noted that there was recognition that National Boards play a unique part in the healthcare system and provided opportunities to work more closely.	
	The Board were content to note the NHS 24 Annual Review 2020/21 outcome and were pleased to note the exceptional performance of the organisation during a very challenging period.	
	NOTED	
11.1	CLINICAL GOVERNANCE COMMITTEE	
	The Board considered the approved minute of the Clinical Governance Committee meeting of 26 May 2022 [Paper No. 11.1a] and the Highlight Report of the meeting of 8 August 2022 [Paper No. 11.1b] and were content to note these.	
	NOTED	
11.2	STAFF GOVERNANCE COMMITTEE	
	The Board considered the approved minute of the Staff Governance Committee meeting of 12 May 2022 [Paper No. 11.2a] and the Highlight Report of the meeting of 28 July 2022 [Paper No. 11.2b] and were content to note these.	
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11.3	AUDIT AND RISK COMMITTEE	
	The Board considered the approved minute of the Audit and Risk Committee meeting of 7 June 2022 [Paper No. 11.3a] and the Highlight Report of the meeting of 11 August 2022 [Paper No 11.3b] and were content to note these.	
	NOTED	
11.4	PLANNING AND PERFORMANCE COMMITTEE	
	The Board considered the approved minute of the Planning and Performance Committee meeting of 16 May 2022 [Paper No. 11.4a] and the Highlight Report of the meeting of 4 August 2022 [Paper No. 11.4b] and were content to note these.	
	NOTED	
12.1	BOARD AND COMMITTEE COMPOSITION UPDATE	
	The Board considered the paper 'Board and Committee Composition Update' [Paper No. Item 12.1] presented by the Director of Finance, Mr John Gebbie. The paper provided an update on current Board and Committee Composition following the recent reconfiguration of the Executive Management Team. Further amendment would be made on appointment of the new Director of Service Delivery and to include the Sustainability Champion appointment. Dr Cheyne thanked Mr Gebbie for the report and invited comments and questions from	
	members.	

		ACTION BY
	Discussion took place about the Committee composition, and the tenure of the current Board Vice Chair. Dr Cheyne agreed to meet with the Board Vice Chair and the Board Secretary to discuss plans for the Board and Committee compositions. The Board were content to approve the updated Board and Committee Composition and would anticipate further updates in due course.	Board Secretary
	<u>APPROVED</u>	
12.2	REVIEW OF COMMITTEE TERMS OF REFERENCE 2022	
	The Board considered the paper 'Review of Committee Terms of Reference 2022' [Paper No. Item 12.2] presented by Mr John Gebbie, Director of Finance. The paper provided an overview of the annual review of Terms of Reference by standing committees, with minor amendments recommended. A further minor amendment not included in the paper was proposed for approval in relation to oversight of whistleblowing. This was within the Audit and Risk Committee remit, however, as the Clinical Governance Committee received monitoring reports in respect of whistleblowing, it was proposed that this was removed from Audit and Risk Committee remit and included in Clinical Governance Committee remit.	
	Action: Terms of Reference to be added to the next Agenda for Clinical Governance Committee.	Ms Docherty
	Dr Cheyne thanked Mr Gebbie for the report.	
	The Board were content to approve the Review of Committee Terms of Reference, along with the proposal to move whistleblowing from Audit and Risk Committee to Clinical Governance Committee, subject to discussion and formal homologation by the Clinical Governance Committee at its next meeting.	
	APPROVED	
12.3	NHS 24 WHISTLEBLOWING ANNUAL REPORT 2021/22	
12.3	NH3 24 WHIST LEBLOWING ANNUAL REPORT 2021/22	
	The Board considered the paper 'NHS 24 Whistleblowing Annual Report 2021/22' [Paper No. Item 12.3] presented by the Director of Nursing and Care, Ms Maria Docherty. The report was virtually approved by the NHS 24 Board in June 2022 and was presented for formal homologation.	
	Ms Mallinson, Whistleblowing Champion, highlighted preparations were underway in relation to the upcoming "Speak Up Week" planned for 3 October to 7 October. Ms Mallinson noted that the week would provide opportunities to increase messaging more broadly and she encouraged members to consider if they would be available to take part in activities during this week. A filming day had been scheduled to take place on 8 September 2022, and members were asked to contact the Board Secretary if they wished to take part on 8 September or if they had availability to take part at another time. Ms Mallinson noted that the Whistleblowing Champions Network continued to meet regularly and had its first in person meeting planned for 23 September 2022.	
	Dr Cheyne thanked Ms Docherty and Ms Mallinson for the update.	
	The Board noted the update provided on Whistleblowing activities and were content to formally note approval of the Whistleblowing Annual Report 2021/22.	
	APPROVED	

13.1	NHS 24 BOARD ACTION LOG	
	The Board considered the paper 'Rolling Actions Log' [Paper No. 13.1] and were content to approve the recommendation that five actions were closed. The Board noted that three actions remained ongoing.	
	APPROVED	
13.2	AOB	
	Future Board Meetings Following discussion, the Board agreed that future Board meetings, including those with a Reserve Session, would commence at 10am.	Board Secretary
	1:1 Meetings with Board Chair and Non-Executive Board Members Dr Cheyne advised members that the Board Secretary would shortly be in touch to arrange some 1:1 meetings with the Board Chair and Non-Executive Board Members, in due course.	Board Secretary
	Valedictory Dr Cheyne noted that Mr Graham Revie would shortly be retiring from NHS 24. Mr Revie had previously served as the Employee Director within NHS 24, a position he held for 12 years. Mr Revie had dedicated a great deal of time and effort to support NHS 24 and Dr Cheyne wished to note thanks on behalf of the Board to Mr Revie.	
	The Board formally wished Mr Revie and very long, happy, and healthy retirement.	
	NOTED	
	DATE OF NEXT SCHEDULED MEETING	
	Thursday 20 October 2022, 10am	
	The meeting concluded at 12.13pm.	