

Moving Forward Together.

Action Note Programme Board

(Friday 6 December 2019, Boardroom JBRH)

Attendees:

- David Leese, Chief Officer, Renfrewshire (DL)
- Jennifer Armstrong, Medical Director (JA)
- Garry Fraser, Regional Director West, SAS (GF)
- Fiona MacKay, Associate Director of Planning (FMac)
- Anne MacPherson, Director of HR & OD (AM)
- Rachel Fishlock, MFT Programme Manager (RF)
- John Barber, Patient Experience & Public Involvement Lead, MFT (JB)
- Dorothy McErean, Employee Director (DM)
- Neil Ferguson, Head of Planning (NF)
- Julie Murray, Chief Officer East Renfrewshire / Older Peoples workstream
- Beth Culshaw, Chief Officer West Dunbartonshire / Planned Care Workstream
- Marjorie Johns, Planning Lead, MFT (MJ)
- Audrey Thompson, Chair of Area Clinical Forum (AT)
- Claire Ritchie, AHP Director (CR)
- Marie Farrell, Director Clyde (MF)
- Jackie Britton, Planning Manager (JBr)
- Pamela Ralphs, Planning Manager (PR)

Apologies:

- Jane Grant, Chief Executive, NHSGGC (JG)
- Chris Deighan, Deputy Medical Director (CD)
- Gail Caldwell, Director of Pharmacy (GC)
- Linda de Caestecker, Director of Public Health (LdC)
- Susan Manion, Chief Officer East Dunbartonshire (SM)
- Jonathan Best, Chief Operating Officer (JBe)
- Mark White, Director of Finance (MW)
- Margaret McGuire, Director of Nursing (MM)

Attending:

- Claire Primrose, Administrator, MFT

Item No	Details	Action
1	<p>Apologies and Introductions</p> <p>David Leese, Chief Officer welcomed everybody to the meeting.</p> <p>Apologies noted above.</p>	
2	<p>Minutes from Previous Meeting &RAL</p>	

	<p>Agreed as an accurate record. Rolling action list updated and closed actions have been removed.</p> <p>Matters Arising</p> <p>NF presented a brief update to the Programme Board on the Unscheduled Care Workstream. They have reflected on and updated the workstream priorities. ED Attendance is being taken forward by the unscheduled care steering group and therefore not appropriate for MFT. Care Homes will now sit with Local Care Workstream as agreed at MFT Executive Group. Details are in Unscheduled Care Update report paper MFT 19/61</p> <p> MFT 1961 Unscheduled Care Up</p>	
3.	<p>Programme Director Update</p> <p>FM informed the Programme Board that a second Programme Manager has been appointed with an expected start date of February 2020. The Programme Management Office will use learning from the FIP process going forward.</p> <p><u>Appendix A: MFT Assurance Framework</u></p> <p>As agreed at both Executive Group and Programme Board the language has been changed to read “The Three Levels of Assurance” and the PMO have also added a ‘just do it’ governance procedure.</p> <p>Discussion followed and it was agreed this version was clear and easy to follow. The decision will be with the workstream if this is major service change or not. It was noted that it might be useful for staff engagement to be mentioned separately rather than to be including in general stakeholders.</p> <p><u>Appendix B: EQIA Framework</u></p> <p>FM informed the group that the planning team would be trained in EQIA and will work closely with the MFT Stakeholder Reference Group. This will ensure all cases for change are equally assessed at an early stage.</p> <p><u>Appendix C: MFT Risk Register</u></p> <p>The PMO have updated the risk register and scoring of the risks. Currently this is the high level programme risks that have been identified. Workstreams will retain their own risk register and will escalate specific issues to the Programme Management Office if required.</p> <p>JA commented on processes and when workstreams are likely to deliver tests of change following a FIP approach. It was noted that finance risk needs to be highlighted and detailed in the risk register. The workstream plans should highlight what they are doing for tests of change and the status of delivering on time.</p> <p><u>Appendix D: Workstream Dates</u></p> <p>As previously requested the Programme Management Office has shared the schedule of all MFT meetings.</p> <p><u>Appendix E & F: Workstream Plans</u></p> <p>RF has been working on Planned Care and Older Peoples Workstream plans and has provided an early first draft to the Programme Board. It shows actions and target dates</p>	

	<p>from key points within highlight reports along with benefits realisation that demonstrates what the impact will be.</p> <p>The plans will be owned and updated by the workstreams.</p> <p>JA noted that ACRT is making good progress and will make an impact.</p> <p>ACTION: All workstream plans to be drafted for February Programme Board</p>	
4.	<p>Workstream Update Presentations</p> <p><u>Planned Care</u></p> <p>PR & BC gave a progress presentation on the Planned Care Workstream.</p> <p>Bloods and monitoring service discussions for emerging care & treatment – PR is looking at whether services can be delivered in the community with responsibility being held with Acute Leads.</p> <p>Gastroenterology and ACRT models, impact and types of patients involved to be identified. Consultants are looking at potential nurse led approach, other areas are already doing this.</p> <p>Leaflet drop to patients for opt in / out information will have a high cost involved, suggestion to speak with eHealth on digital platforms similar to Sandyford.</p> <p>GF advised that Scottish Ambulance Service are happy to engage alongside MFT workstreams.</p> <p><u>Older People</u></p> <p>CR, JM & JBr presented an update from Older Peoples workstream.</p> <p>Discussion was held about generating reports in the future from Trakcare that shows the source of admission (e.g. Care Homes, GP, SAS) MF noted that it is still early days with AHP Consultant in post but will be beneficial in the long run. Pharmacy to work alongside AHP Consultants on the ward mixing the skill levels.</p> <p>AMac advised that there is a Strategic Event with Regional colleagues to look at new roles. Need to scope the scale of resource and workforce alongside funding.</p> <p>Both presentations were well received at the Programme Board to progress further.</p> <p>Action: PMO to put out Agenda for presenting updates to the Programme Board</p>	
5.	<p>Workforce Update</p> <p>Due to time constraints, AMac asked that papers submitted to be noted by the Programme Board.</p>	
6.	<p>Future of the Beatson</p> <p>FM gave a brief presentation on the future of the Beatson paper that was submitted.</p> <p>The Programme Board noted and endorsed the following</p> <ul style="list-style-type: none"> • Note the identified options for the future of the Beatson West of Scotland Cancer Centre and endorse the need for an options appraisal of the remaining options which were not specifically ruled out by the group. • The appointment of a senior GGC Clinical Lead to chair an options appraisal process which includes representatives of both GGC Clinical specialities and RCAG. 	

	<ul style="list-style-type: none"> • The need for the Options Appraisal to address two separate streams: • An immediate solution to improve clinical services • A longer-term strategic direction for the future of cancer service delivery and organisation in GGC alignment with RCAG aspirations <p>The Programme Board endorsed the Future of the Beatson paper and the progression to identified next steps.</p>	
7.	AOCB	
8.	<p>Date and location of next meeting:</p> <p>Tuesday 11 February 2020, 3pm, Boardroom, JBRH</p>	

FOR DISCUSSION