

**NHS LANARKSHIRE
& NHS GREATER GLASGOW & CLYDE**

**SOUTH LANARKSHIRE CHP OPERATING MANAGEMENT
(PERFORMANCE MANAGEMENT) COMMITTEE**

**Note of a meeting held on Monday 7th June 2010 at 9.30am in
Board Room, Calder Ward, Udston Hospital**

PRESENT:	Mrs N Mahal	Chair
	Dr L Armitage	Consultant in Public Health
	Mr J Bolton	South Lanarkshire PPF
	Mr C Cunningham	Head of Planning, South Lanarkshire CHP
	Mr J Ferguson	Vice Chair - South Lanarkshire PPF
	Miss J Halyburton	Secretariat
	Cllr J Handibode	Non Executive Director NHS GG&C / South Lanarkshire Council
	Ms R Hibbert	Divisional HR Director
	Mr A Lawrie	Director, South Lanarkshire CHP
	Miss F Leckie	Associate Director of Nursing
	Dr C Mackintosh	Associate Medical Director
	Mr C McKay	Communications, South Lanarkshire CHP
	Ms F Porter	Deputy Director of Finance
	Mr H Stevenson	Executive Director of Social Work SLC
	Mr G Walsh	Complaints Manager, South Lanarkshire CHP

**In Attendance: Jordan McKenzie – Chair, Young Carers Network Forum
 Nicole Wilson – Young Carers Service**

Item	Action Notes	Action by
1	<p>APOLOGIES</p> <p>Apologies were received from Marion Mark, Jayne Miller, Margaret Nelson, Mary Samson, Robert Anderson, Joyce Mouriki, Irene Miller and Peter McCrossan.</p> <p>The Chair welcomed Mr J Ferguson and Mr J Bolton to the meeting. Mr Ferguson will now be attending the OMC, having replaced Mr J Mitchell as vice chair of the South Lanarkshire PPF. The Chair took the opportunity to thank Mr Mitchell for all of his contributions to the OMC. Mr Bolton was deputizing for Mrs Miller who was on annual leave.</p>	
2	<p>DECLARATIONS OF INTEREST</p> <p>The Chair declared that her husband, Dr Pali Mahal, had been appointed as Clinical Director in the South Lanarkshire CHP as part of the CHP restructuring. She stated</p>	

	<p>that this had been discussed with the Chair of the Board and in the event of there being any topic which may lead to a conflict of interest, it was agreed that Mrs Nelson would take over the role of OMC Chair, for that item.</p>	
3	<p>MINUTES OF LAST MEETING (29th March 2010)</p> <p>The minutes were approved as an accurate record.</p>	
4	<p>UPDATE ON PREVIOUS ACTIONS & MATTERS ARISING</p> <p><u>a) Winter Bed Planning – Debrief Paper</u></p> <p>Mr Cunningham reported on the positive performance over the winter period (2009/10) in terms of winter planning. This was due to multi-agency planning, monitoring, delivery and effective communication.</p> <p>It was also noted that a National Winter Planning event was being held on 15th June to examine the data from this year across all NHS Boards and any lessons learned would be incorporated in the 2010/11 plan.</p> <p>As in previous years, a Winter Planning group will be established to develop the winter plan for 2010/11 which would take cognisance of those areas highlighted identified in the debrief.</p> <p>The Chair thanked Mr Cunningham for his report and congratulated staff on their efforts.</p> <p>b) CHP Reorganisation</p> <p>Mr Lawrie stated that the papers attached outlined the management structure of the new organisation. He explained that the Units have also now been named i.e. South West Unit covering Cambuslang/Rutherglen and East Kilbride and South East Unit covering Hamilton, Blantyre and Clydesdale.</p> <p>The Chair stated that it would be useful to include a report on the other CHP CRES actions at a future meeting of the OMC.</p> <p>c) Optometry Services</p> <p>Mr Cunningham confirmed he had contacted Rosemary Lyness (Director of Acute Services) to ensure that the leaflets which are made available to patients are being reviewed.</p> <p>Action: Mr Lawrie to include a report on CHP CRES actions at the August meeting.</p>	AL/JH
5	<p>PRESENTATION</p> <p>5.1 South Lanarkshire Young Carers Presentation</p> <p>The Chair welcomed Nicole Wilson and Jordan McKenzie to the meeting and invited Jordan to share her experience as a young carer with the OMC members.</p>	

	<p>Jordan explained that she is the Chair of the South Lanarkshire Young Carers Network Forum which met monthly. The Forum seeks to influence local/national policies. She then went on to explain how the Network had made an impact on her life.</p> <p>The Chair thanked Jordan for sharing her experience with the OMC.</p> <p>She then went on to ask Jordan if there were any areas where the respective agencies could do more to assist Young Carers. Jordan explained that there were still several areas where Young Carers experienced problems such as difficulties with catching up on school work. She felt that teachers required more of an understanding of what a young carer is. She also explained that GP Practices required more of an understanding of the young carers register and subsequently of the issues faced by Young Carers.</p> <p>Mr Lawrie stated that it was helpful to have feedback where Practices are unaware of this so that it can be followed up. Nicole Wilson stated that a Health Care Worker had been employed to assist in raising awareness.</p> <p>Dr Armitage asked if there was reluctance from young people to come forward as young carers. Jordan agreed that this is the case and often young people don't realise that they are young carers.</p> <p>Jordan explained to the OMC that the Young Carers Event included Young Carers from all over Scotland meeting for an overnight which included both fun and also time to discuss serious issues. Young Carers also had the opportunity to put questions to the Executive Directors of the Social Work who attended for one of the sessions. The next festival was scheduled for the 21st and 22nd August 2010.</p> <p>The Chair thanked Nicole and Jordan for attending and stated that OMC members would be keen to hear about any updates.</p> <p>It was also noted that the next Young Carers Network event would be held on 21st July at 5.30pm in the Banqueting Hall at South Lanarkshire Council.</p> <p>Action: Mr Lawrie to follow up awareness and the issues of GPs, relating to Young Carers.</p>	AL
6	<p>PERFORMANCE</p> <p>6.1 Financial Performance to 31st March 2010</p> <p>The final overall financial position for 2009/10 within the CHPs, reflected a total overspend of £3.472m. This reflected an underspend of £1.687m within pays, an overspend of £0.688m within non pays, an overspend of £4.893m in Prescribing, an underspend within Family Health Services of £0.358m and an over recovery of Income of £0.064m.</p> <p>The final financial position for the South Lanarkshire CHP reflected a total underspend of £182k, comprising underspends of £161k for pays and £21k for non pays.</p>	

	<p>Dr Armitage queried why East Kilbride Locality is under spending with regard to Diabetic Retinal Screening. FP explained that funding was initially identified for premises areas however this was later not required. The under spend has no reflection on patient activity and would in fact constitute part of the CRES programme for 2010/11.</p> <p>Mr Lawrie noted that the Cambuslang/Rutherglen financial transfer had worked out satisfactorily when taken as a whole including the money associated with the transfer of HQ services.</p> <p>a) Travel Issues</p> <p>Mrs Porter referred to the paper previously circulated which showed that travel costs had increased over the past 2 years. This was, in the main, due to an increase in the rates reimbursement level. All localities have been asked to monitor their expenditure across all areas of travel. Moreover, travel costs were required to be reduced by 10% in 2010/11 as part of the CRES proposals. This equated to £183k for the South Lanarkshire CHP.</p> <p>The Chair asked what plans had been put in place to make the 10% savings. AL stated that the introduction of a new car leasing policy and monthly monitoring at locality level to look at top mileage users would assist in meeting the target. In addition, revising travel arrangements, teleconferencing and tighter controls would all assist in this respect.</p> <p>In response to a question from Cllr Handibode, Mrs Porter stated that the current payout per mile is depended on the engine size of the car, however it can be between 24p – 50p per mile. Leased car owners were paid 11p per mile. These were nationally agreed rates.</p> <p>The Chair thanked FP for the report. She emphasised that Prescribing is a key issue along with travel reductions. OMC members would be kept informed of progress.</p>	
	<p>6.2 Workforce Planning</p> <p>Mrs Hibbert reported that sickness absence in the South Lanarkshire CHP had reduced from 4.17% in February 2010 to 3.9% in March 2010. She stated that this has since increased to 4.12% in April. There were seven members of staff from South Lanarkshire CHP on the redeployment register. There were also four investigatory hearings and one disciplinary hearing in the South Lanarkshire CHP over the last reporting period.</p> <p>The Chair asked if this new format of report would be the same that goes to all other OMC meetings. Mrs Hibbert agreed that they were all very similar. The Chair also asked if there could be more detail given around the different localities. Mrs Hibbert stated that this could indeed be broken down and a narrative added to give more information around specific locality issues.</p> <p>The OMC noted the report and it was agreed that the new format be continued.</p> <p>Action: Mrs Hibbert to add in more analysis around ‘hotspot’ issues in Localities.</p>	<p>RH</p>

	<p>6.3 Performance Management Report</p> <p>CC gave an update on some of the key areas within the performance management report.</p> <p><u>Breastfeeding</u> South Lanarkshire CHPs performance was close to the trajectory at 21.7%. There had been a significant increase in the Cambuslang/Rutherglen area and work was ongoing to understand why this was the case in order that any lessons might be introduced NHS Lanarkshire wide.</p> <p><u>48HR Access/Advanced Booking</u> The initial results of the 2009/10 survey showed that NHSL had achieved 93.1% around access to appointments within 48 hours. There was however still room for improvement around advanced booking where NHS Lanarkshire had a 79.3% performance. It had been agreed that in the first instance support would be offered to the ten lowest performing Practices.</p> <p><u>Waiting Times</u> Mental health waiting times were now managed by Jim Wright, Unit General Manager for Mental Health Services, however it continued to be important for performance against these targets to be monitored in South Lanarkshire CHP.</p> <p>Cllr Handibode queried why Clydesdale and Cambuslang/Rutherglen's dental registration figures were significantly less than other areas. AL stated that parents of 3-5 year olds were being encouraged to register and that with recent appointment of a Child Smile Coordinator in that area, improvement was anticipated. There continued to be ongoing problems for patients gaining access to a dentist in the Clydesdale area.</p> <p>Mr Ferguson informed OMC members that the First Steps Programme had been really well received in the local Hamilton communities.</p> <p>The Chair asked what particular actions had helped us to meet the breastfeeding trajectory. Mr Lawrie stated that the reasons were multi-factional and accordingly, he would ask Maria Reid to provide a report for a future OMC which would allow a more informed discussion.</p> <p>Action: Mr Lawrie to get feedback around breastfeeding results from Maria Reid for next meeting.</p>	AL
	<p>6.4 OMC Workplan 2010/11</p> <p>CC explained that each formal committee of NHS Lanarkshire was now required to produce an annual Workplan as well as Terms of Reference.</p> <p>An additional two meetings of the OMC had been scheduled for 2011 which members were asked to note in their diaries:</p> <p>Monday 31st January 2011 at 9.30am in Board Room, Udston Hospital Monday 28th March 2011 at 9.30am in Board Room, Udston Hospital</p>	

	<p>The Workplan outlined a range of standing items, regular reports and topical issues which would take place throughout the year. There would also be reports on hosted services throughout the year.</p> <p>The Chair stated that once the Workplan was endorsed by OMC members, it would be submitted to the Board meeting in June. It was emphasised that although the Workplan had been produced, members could still come forward with additional items that they wished to have included in future agendas.</p> <p>Mr Stevenson suggested the addition of Early Years Intervention e.g. in the form of the First Steps programme to be included in the Workplan.</p> <p>Action: OMC members to diarise two additional meeting dates for 2011.</p> <p>Action: Mr Cunningham to add Early Years Intervention/First Steps to Workplan.</p>	<p>ALL</p> <p>CC</p>
	<p>6.5 Revised Terms of Reference</p> <p>The Terms of Reference had been updated to reflect issues raised at the previous meeting and now included details of when they were reviewed and by whom. Mr Cunningham noted that he required to amend the names of the PPF members to take account of recent changes. A final version would then be submitted to the meeting of the NHS Lanarkshire Board in June.</p> <p>Action: Mr Cunningham to amend names of PPF members.</p>	<p>CC</p>
<p>7</p>	<p>PLANNING</p> <p>7.1 Review of CHPs/Joint Working</p> <p><u>a) Blake Stevenson Review of CHPs</u></p> <p>Mr Lawrie provided the Committee with a brief resume of the Report and specifically referred members to pages 50 and 51 which listed some useful sections to consider and it was important that the items contained therein were addressed prior to the Audit Scotland report. CC and Stephen Kerr had been tasked to answer the questions therein and bring this back to the respective OMCs.</p> <p>Mr Anderson, in absentia, had noted that the reference on page 43 in relation to carers, had been as a direct result of the good practice identified in South Lanarkshire CHP and this was being used as the benchmark. Mr Anderson was in discussion with the national carers forum in this respect.</p> <p>Action: Mr Cunningham to bring back report to a future OMC on benchmark of South Lanarkshire CHP against Blake Stevenson areas for consideration.</p> <p><u>b) Audit Scotland Review of CHPs</u></p> <p>Mr Lawrie reported this was a more focused piece of work than the Blake Stevenson Review. The 9 main priorities of the Review were outlined at page 3 of the project brief.</p>	<p>CC</p>

	<p>The fieldwork for this report was occurring at present however formal feedback of this report was not expected until January/February 2011.</p> <p><u>c) Joint Working SLC/South Lanarkshire CHP – 23rd April 2010</u></p> <p>The Chair noted that this had been an extremely valuable event. So far, informal feedback has been very positive. An action plan would be devised as an output from the event and this would form the basis of a work plan for Units/Localities over the next 2-3 years. A paper from the event would be taken to the Joint Services Management Group initially and then brought to a future OMC.</p> <p>The Chair thanked AL and HS for their effort in organising this event.</p> <p>Action: Formal written report and action plan from even to be brought to future OMC.</p> <p><u>d) Health & Care Partnership Paper</u></p> <p>The previously circulated paper outlined where the Health & Care Partnership began and details options available to us in combining the roles of the Partnership and OMC. Mr Cunningham and Michele Dowling have been carrying out work in this regard and a detailed paper would be brought to the OMC in October. Cllr Handibode agreed that this was an important piece of work and OMC members noted the report.</p> <p>Action: The Chair highlighted that prior to the final report, meetings could be set up with Cllr Handibode and Mr Stevenson to work through some of the details.</p> <p>Action: Formal paper to be brought to a future OMC.</p>	<p>CC</p> <p>AL/CC/NM</p> <p>CC</p>
	<p>7.2 Corporate Objectives</p> <p>Mr Lawrie informed OMC members that the Corporate Objectives have now been approved by the Board and have since been cascaded to CHP Directors and Unit General Managers. The South Lanarkshire CHP management team was currently working on the actions from these and a Unit Delivery Plan would ensure clarity about who is responsible for each area.</p> <p>Action: Unit Delivery Plans to be brought to August or October OMC.</p>	<p>AL/CC</p>
	<p>7.3 Clinical Governance Including NHS Scotland Quality Strategy</p> <p>Dr Mackintosh provided a suite of papers for OMC members' approval. Dr Mackintosh went on to explain how, taken together, the various indicators provided a range of material which might satisfy OMC members that the various governance arrangements were in place that not only ensured systematic approach to service delivery, but also an early warning in the event of any risk areas being identified.</p> <p>Dr Mackintosh then spoke about the Healthcare Quality Strategy for Scotland and noted priority areas for action. He explained that it was important for the Clinical Governance Committee to focus on these issues but that the CHP needed to align</p>	

	<p>operational decisions within the Quality Strategy framework.</p> <p>The OMC noted the reports and agreed that the suite of papers were acceptable.</p>	
	<p>7.4 Nursing Update Report</p> <p><u>HAI</u></p> <p>Ms Leckie noted that the HAI inspection had been carried out at Hairmyres Hospital. Work was also continuing with regard to walk rounds which assisted in identifying good practice and gave support to sites where corrective action might be required.</p> <p><u>Hand Hygiene</u></p> <p>It was noted that there had been some slippage in the fitting of new Hand Hygiene products and dispensers in community premises, there being more sites/locations than originally identified.</p> <p><u>HMIe Child Inspection</u></p> <p>Work was ongoing in preparation for the Inspection. The case records which would be inspected have now been identified and staff were currently working through these to ensure that these were up to date. The first meeting of the Chief Inspectorate has now taken place and at that meeting it had been evident that there will be a very different approach taken to previous Inspections.</p> <p><u>Integrated Care Management</u></p> <p>581 patients were currently being actively care managed. The final evaluation was currently being prepared however there had been issues in relation to extracting information from certain Practices.</p> <p>The Chair asked that when the final report had been completed, that it be brought to a future meeting of the OMC.</p> <p>The OMC noted the report.</p> <p>Action: Ms Leckie to bring updated report regarding Integrated Care Management to a future meeting.</p>	<p>FL</p>
	<p>7.5 Communication Report</p> <p>Mr Brown informed OMC members that NHS Lanarkshire was now on Facebook with 298 fans. It was noted that this could be the way forward for engaging more efficiently with young people.</p> <p>CRES and finance issues continued to be the main areas of press interest.</p> <p>There had been 140 FOI requests between January – March. It was noted that there were 432 FOI requests in 2009/10 with a wide range of subjects. The communications department response rate had increased to 94%.</p>	

	<p>As an action from the last meeting it had been agreed that Craig McKay would confirm if holding letters were sent out to members of the public. Mr Brown stated that this was not a regular occurrence however he will follow this up.</p> <p>Action: Mr Brown to follow up issue regarding holding letters for FOI requests.</p>	CB
	<p>7.6 Prisoner Healthcare</p> <p>Mr Lawrie provided a report for OMC members to note. Ms Miller was project managing this along with Mr Lawrie. Progress reports would be brought back to a future meeting.</p> <p>Action: AL/JM to bring progress report to future meeting.</p>	JM/AL
8	<p>8.1 Staff Partnership Forum Minutes</p> <p>It was noted that the Divisional Partnership Forum would now meet separately from the Health & Safety meeting and would meet on a quarterly basis.</p> <p>The OMC noted the minutes.</p>	
	<p>8.2 South Lanarkshire PPF Minutes</p> <p>Mr Ferguson stated that the PPF Induction Handbook which John Mitchell had produced had now been completed.</p> <p>The Chair noted that she would meet with the Chair and Vice Chair of the South Lanarkshire CHP PPF at various points throughout the year.</p> <p>Mr Bolton thanked Mr Cunningham for his valued input to South Lanarkshire CHP PPF meetings.</p> <p>The OMC noted the minutes.</p> <p>Action: Meeting to be set up with South Lanarkshire PPF after the Summer.</p>	NM/CC/ AL/JF/IM
	<p>8.3 Health & Care Partnership Minutes</p> <p>The OMC noted the minutes.</p>	
	<p>8.4 Lanarkshire Data Sharing Partnership Minutes</p> <p>The OMC noted the minutes.</p>	
	<p>8.5 Information Governance Minutes</p> <p>The OMC noted the minutes.</p> <p>Action: Mr Lawrie noted that an update report on such matters across NHSL will be brought to a future meeting.</p>	AL

	<p>8.6 Complaints Report</p> <p>Mr Walsh stated that there were 34 complaints for the South Lanarkshire CHP between January – March.</p> <p>GW stated that reports from the Ombudsmen were routinely sent to Tim Davison prior to being sent to the Patient Services Department for further distribution across the organisation to ensure any learning points were shared appropriately.</p> <p>Action: GP complaints document to be included on the next agenda.</p>	GW/JH
9	<p>FOR INFORMATION</p> <p>9.1 North Lanarkshire CHP OMC Minutes</p> <p>It was noted that Mrs Nelson has requested to become an observer as part of the complaints process.</p> <p>The OMC noted the minutes.</p>	
	<p>9.2 Acute OMC Minutes</p> <p>The OMC noted the minutes.</p>	
10	<p>AOCB</p> <p>The Chair formally noted her thanks on behalf of the OMC to Dr Armitage for her Public Health Input and wished her well for the future. A replacement representative from the Public Health Department would be formalised within the next few weeks.</p>	
11	<p>DATE OF NEXT MEETING</p> <p>The next meeting will be held on:</p> <p>Monday 23rd August 2010 at 9.30am Board Room, Udston Hospital</p> <p><u>Future OMC Dates for 2010</u></p> <p>18th October 2010, Board Room, Udston Hospital, 9.30am 6th December 2010, Board Room, Udston Hospital, 9.30am</p>	