



NHS LANARKSHIRE

COMMUNITY HEALTH PARTNERSHIPS

NORTH OPERATING MANAGEMENT COMMITTEE PERFORMANCE MANAGEMENT

**Notes of Meeting Held On Wednesday 6th December 2006
Committee Room 1, Strathclyde Hospital**

Present : Mr John Anning, Non – Executive Director (Chair)
Mr David Clark, Non- Executive Director
Mr Colin M Sloey, Director CHP North
Ms Mary Castles, Assistant Chief Executive, North Lanarkshire Council
Dr A Cook, Associate Medical Director – Mental Health
Mr John York, Deputy Director of Finance
Mrs Anne Armstrong, Divisional Director of Nursing (Primary Care)
Mr Kenneth Small, Director of OD & North CHP HR Representative
Mr Ian Ross, Director Acute Division
Mr Stephen Kerr, Acting Head of Planning and Performance
Mr David Boyd, Staff Side Representative
Ms June Vallance – Voluntary Sector Representative

In attendance: C Jack, C Brown, B Smith Airdrie & Villages Community Forum, F Mulholland Motherwell & District Community Forum.

1. APOLOGIES

Apologies were received from Mr J Dickie, Dr P McMenemy, M Taylor

2. MINUTES OF LAST MEETING

The notes of the meeting held on the 4th October 2006 were accepted as a true record.

3. MATTERS ARISING

Public Partnership Representation

Stephen Kerr introduced Bob Smith and Felix Mullholland to the Committee and advised that Bob and Felix were attending today as interim Public Partnership representatives pending a formal appointments process being concluded. Stephen advised of a recent meeting of all interested representatives where considerable progress had been made in engaging individuals with CHP business and in establishing a forum for future discussions. John welcomed both representatives to the committee and thanked Stephen for his help in progressing the issue of appropriate representation and engagement with North CHP. It was noted that it would take several weeks to conclude the election process. Discussion followed on identifying an appropriate level of resource to support the PFPI forum and for any individual elected as the OMC representative. It was agreed that Stephen should liaise closely with PFPI representatives to ensure adequate support to fully participate in CHP business.

Outcome: S Kerr to maintain close links with PFPI forum and advise of outcome of selection process.

4. FINANCE REPORT

John York was invited to give an overview of the Mid Year Finance report previously discussed at the last NHSL Board meeting. The overall NHS Lanarkshire position was noted and John went on to highlight the North CHP position for the period ending October 2006 where a further contribution of £1.7m had been identified to support the corporate position. John went on to highlight some of the current budgetary issues that continued to add pressures to North CHP position and these included a recent pressure around VAT on Stoma products and services that hadn't been anticipated and although it was a national issue, Lanarkshire in particular had been disadvantaged by the new arrangements. With reference to a question around the significant savings made against salaries. Colin advised of the proactive management of staff vacancies where these occurred opportunistically and it was noted that Locality General Managers regularly reviewed the vacancies they were holding in terms of impact on services and other staff whilst mindful of savings that required to be achieved.

Outcome: OMC noted the content of the Finance Report and acknowledged the contribution of North CHP to the overall NHSL financial position.

5. HUMAN RESOURCE REPORT

Workforce Planning

Kenny Small tabled papers from a recent meeting of the Workforce Development Group for information and advised that he would cover this issue in greater detail at a future meeting but in the meantime he highlighted the key issues facing NHSL and the North CHP in terms of planning for the future given the current profile of the workforce in terms of demographics and skills and the future likely needs of

the service in terms of known developments for example; the development of the mental health framework and the likely workforce requirements associated with delivering different models of care. Dr Cook advised of the position within the medical workforce where they were moving towards implementation of 'Modernising Medical Careers' whilst meeting the need for additional Consultant Psychiatrists and managing vacancies.

Sickness Absence

Kenny gave a brief overview of recent and renewed focus on sickness absence targets for each NHS Board in line with national targets. Kenny advised of the continued difficulties in collating accurate statistics and of the two methodologies for reporting on NHSL statistics that were currently producing slightly different results. Colin advised that he asked Locality General Managers to continue to produce local statistics as a benchmark between the North CHP localities and local action plans were being developed for particular areas of concern.

Industrial Relations Activity

The numbers of investigations and grievances were noted for information and Kenny advised that the comparatively low numbers reflected well on NHSL.

Redeployment

The numbers of staff both on the redeployment register and those who had been successfully redeployed in the previous quarter were noted for information. Colin explained the process in identifying staff who could potentially be redeployed in the future due to service changes and how this could lead to staff being on the redeployment register ahead of the time that they could be released for other posts. This process was essential for service planning but had led some people to assume erroneously that those on the register were not currently fully occupied which was not the case.

Outcome: K Small to prepare written report on above topics for future meetings. Separate agenda item on workforce planning to be scheduled for future meeting.

6. PERFORMANCE MANAGEMENT

Stephen made reference to his paper on a Performance Management process within the CHPs and highlighted the need to develop a methodology and reporting framework to support the requirement to accurately report activity against the range of CHP targets. The establishment of an NHSL Board Performance Committee was noted and Stephen advised that arrangements were in place to establish a CHP committee to ensure that the appropriate links were made between the Board's requirements for evidence against Heat Targets and the Local Delivery Plan and the CHPs.

John advised that he was satisfied that progress was now being made in the right direction. Mary Castles agreed that it was often difficult to clearly demonstrate and evidence the things that were really making a difference as opposed to being

focused on producing more and more information that didn't often tell you anything meaningful. Mary suggested that once both organisations identified their own reporting frameworks that there was the potential for greater information sharing and amalgamation of systems and processes.

Discussion followed on the actual patient experience and how this could be measured and meaningfully reflected. It was noted that the complaints report, due at the next meeting, was one measure of patient satisfaction albeit that it concentrated on a small number of usually negative experiences.

It was agreed that this was an issue that could be developed further as engagement with user groups and PFPI developed.

Waiting Times Report

The waiting times report to September 2006 was noted for information and progress in some key areas was noted as follows:

- Physiotherapy and Podiatry – a range of waiting times was noted across the localities and an additional review of caseload management was to be undertaken. The recent appointments to the Heads of Services for AHPs would assist in this process.
- Paediatric – an action plan has recently been agreed to address the increase in waiting times as a result of increased referrals. Additional clinics had been set up and a referrals management process was being undertaken and seemed to be having a positive impact on reducing the numbers of those waiting to be seen.
- Dietetics – A review of actual caseloads was being undertaken to verify the accuracy of some of the figures previously reported and early indications suggested that the actual waiting times weren't as lengthy as originally reported via the PIMS IT system.

Outcome: OMC noted the content of the above reports and acknowledged progress in developing an accurate performance-reporting framework that would highlight genuine progress against the various targets.

7. DIRECTORS REPORT

Colin gave the following update on a range of recent issues being addressed within North CHP;

Keep Well Project

Colin gave a brief recap on the aims and objectives of the Project for the benefit of the new Committee members and it was noted that the Project Manager had now been appointed. The Project was progressing well since its official launch in October 2006 and in excess of 500 patients had now been seen and these numbers

would continue to increase as the other two areas (Wishaw and Airdrie) fully launch the project.

Gateway Protection Programme

The programme being led by North Lanarkshire Council involved a number of Congolese being housed in North Lanarkshire as part of an International Refugee Programme. Mary advised of extensive and lengthy planning process that had taken place to date and she expressed her disappointment at the recent negative publicity that had the project had attracted from one local newspaper. Colin advised of the health involvement and of the good level of cooperation between the services to support this initiative.

Capital Programme (Primary Care)

An overview of the various Capital Projects currently underway within Primary Care was noted and in particular the following developments within North CHP were highlighted:

- Airdrie Resource Centre – Potential sites currently being evaluated. Issues around availability and costs associated with car parking noted and the need to establish controlled parking was discussed.
- Coatbridge Resource Centre & Integrated Dental Centre - Amendments to the original Business Case to be noted at next Board meeting. An issue around the requirements to maintain the facade of the original building currently being reviewed.
- Learning Disabilities Assessment & Treatment Centre – A review of the accommodation schedule was being undertaken to bring the scheme back into line with funded allocation.
- Wishaw Health Centre – Development not due until 2010 however early work was to commence on scooping out the accommodation required and possible purchase of sites as they became available.
- Mental Health Service (Acute Service Re-provision) – Models of care and schedules of accommodation being developed for Monklands and Hairmyres sites however early technical advice on site/building feasibility was required.

Harthill GP Practice

Colin gave a brief overview of the background to the dissolution of the existing GP Partners and the process adopted to advertise for alternative providers. It was noted that three business cases had been submitted to date and an interview panel chaired by John Anning was due to meet in mid January 2007. Discussion followed on the consultation process that had taken place with particular reference to consultation with individual practice members and with the wider community. June gave some local feedback, which seemed to indicate that local people were of the opinion that the consultation process could have been better. Calvin advised of

numbers of people who had attended the open meetings and of the proposal to include local practice members to join the interview panel.

Outcome: OMC thanked Colin for his informative and up to date report on current issues.

8. MEDIA MATTERS

Calvin made reference to his report previously circulated that highlighted recent media coverage of North CHP issues and activities. It was agreed that this report was a useful reflection of the range of issues being addressed within the CHP and how these were being perceived and portrayed within the wider public. Forthcoming events noted included:

- Official opening of Sinclair Integrated Day Centre - Coathill
- Publication and Distribution of NHSL Annual Public Health Report
- Picture of Health – Update – Booklet to be widely distributed to staff and service users.

Outcome: OMC noted content of report and agreed that this should feature as a Standing agenda item at future OMC meetings.

9. REPORTS/MINUTES NOTED

The following minutes and reports were noted for information:

1. OMC Acute Division
2. OMC South CHP
3. Health & Care Partnership Board¹

10. DATE OF NEXT MEETING

The date of the next meeting was agreed as Wednesday, 7^h February 2007 in Committee Room 1, Divisional HQ, Strathclyde Hospital