

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

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

**Note of a meeting held on Monday 21st July 2008 at 9.30 am in
the Boardroom, Beckford Street, Hamilton**

PRESENT:	Mrs Neena Mahal Mr A Lawrie Mr R Watts Ms M Samson Mrs M Nelson Ms Ruth Hibbert Mr J Mitchell Ms J Mouriki Mrs I Miller Mr Robert Anderson	Chair Director CHP South Head of Planning UNISON Non-executive Director Divisional HR Director PFPI Representative Voluntary Sector Representative PFPI Representative SL Carers Network
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In Attendance: Calvin Brown, Communications, Graeme Walsh, Patient Services Manager, Irene Barkby, Programme Manager, Deirdre McCormick, Service Development Manager.

Item	Action Notes	Action by
1	APOLOGIES Apologies were received from Councillor J Handibode, Fiona Porter, Jayne Miller, Judith Hope, Peter McCrossan, Frances Leckie, Harry Stevenson, Dr L Armitage, Dr G Smith,	
2	DECLARATIONS OF INTEREST There were no declarations of interest.	
3	MINUTES OF LAST MEETING (19TH MAY 2008) It was agreed that the title “Patient Representative” should be changed to that of “PFPI (Patient Focus Public Involvement) Representative” in order to ensure consistency with the North Lanarkshire CHP. The minutes of the last meeting were accepted as an accurate record.	

<p>4</p>	<p>MATTERS ARISING:</p> <p>4.1 Amended Constitution As Jayne Miller was not present it was agreed that the amended constitution to reflect the addition of Robert Anderson as a full member of the OMC would be brought to the September meeting for approval.</p> <p>ACTION: JM to bring amended constitution to September OMC meeting</p> <p>4.2 Practice Dissolution East Kilbride Alan Lawrie reported that there had been three expressions of interest in providing General Medical Services and that a meeting had been held with all panel members including three patient representatives selected from the local PPF. Interviews will take place on 3rd September. A letter has been sent updating all patients.</p> <p>4.3 Locality Reviews The Chair reported that she had attended some locality reviews and wished to acknowledge the hard work carried out by operational staff. In response to a query regarding the possible involvement of PPF / Voluntary Sector representatives in the locality reviews it was agreed that suggestions would come forward from those members present to Alan Lawrie and Roy Watts for consideration and discussion. It was, however, noted, that the locality reviews are not visits and are meetings where detailed performance data is reviewed with operational managers.</p> <p>ACTION: PFPI & Vol Sector representatives to consider the matter and bring forward proposals.</p> <p>4.4 Observer Irene Barkby (Programme Manager, Nurses & Midwifery Workload & Workforce Planning Project) was present at the meeting as an observer.</p>	<p>JM</p>
<p>5</p>	<p>PERFORMANCE</p> <p>5.1 Finance report YTD May 2008 AL spoke to Fiona Porter's paper in her absence. The overall Primary Care financial position showed an underspend of £250K. The South CHP position for the period to 31 May 2008 showed an underspend of £6K, reflecting an overspend of £33K in pay and an underspend in supplies of £39K.</p>	

	<p>The position in Camglen showed an overspend of £7.6K at the 31 May 2008 which was largely due to Agenda for Change pay assimilations.</p> <p>Overall the financial position was seen to be healthy.</p> <p>In response to a query regarding vacancies it was noted that staffing in certain areas were still under-establishment, but that vacancies had reduced significantly to around 5% of the establishment which is considered normal.</p> <p>It was further noted that proactive initiatives to recruit district nurses externally were underway.</p> <p>In response to a concern raised by Mary Samson regarding whether Band 5 and Band 6 vacancies are being filled correctly, it was agreed that AL & MS should discuss this outwith the meeting.</p> <p>The Chair noted the report.</p> <p>ACTION: AL & MS will discuss the filling of Band 5 and Band 6 vacancies.</p>	<p style="text-align: center;">AL/MS</p>
	<p>5.2 HR Reports</p> <p>Sickness Absence Performance RH discussed the above report and highlighted the key points.</p> <p>Locally collected sickness absence rates decreased by 1.7% between April 2008 and May 2008 to 4.2%.</p> <p>It was agreed that the Empower and SWISS figures would be shown in future reports and it was acknowledged that these figures are currently marginally higher than the locally collected data.</p> <p>The “Easy” project, which is a centralised attendance management system, is now being implemented in the East Kilbride locality. An update on its introduction will be provided at the next meeting.</p> <p>The Camglen figure for May 2008 was 1.71%. It was noted that this had been discussed with the general manager to identify reasons as to why this was the case. The ideas were felt to lie in the lower turnover rates and, possible, a stronger team identity.</p>	

	<p>It was agreed that WTE staffing numbers should be included in future reports.</p> <p>ACTION: Next report to include Empower/SWISS statistics, an update on the “Easy” project and WTE staffing numbers.</p>	<p>RH</p>
	<p>5.3 Performance Management Reports</p> <p>Performance Monitoring Report</p> <p>Roy Watts discussed the monitoring report for May 2008.</p> <p>The three red areas remain the same as the last report and are :-</p> <ul style="list-style-type: none"> • Sickness absence • Child & adolescent mental health services (CAMHS) • Emergency re-admissions <p>Sickness absence had decreased in May 2008 and it is anticipated that the ‘Easy’ project will impact on sickness rates in East Kilbride.</p> <p>CAMHS should be included on the PIMS system for information and recording within the next two months and in the meantime information services and local staff continue to monitor activity and performance manually.</p> <p>Emergency re-admissions remain red and a programme of action to address this has already been endorsed by the OMC at its meeting in March. Data on re-admissions during June – September 2007 is being examined in order to improve insights into the reasons for re-admission, their avoidability and what services or interventions could have made a difference.</p> <p>Waiting times for AHP services over 9 & 18 weeks are reducing significantly due to “Invest to Save” and management action in physiotherapy.</p> <p>With respect to GG&C, discussions are pending to review the schedule of information required for performance management for Camglen. Locality meetings had been useful in highlighting difficulties in getting timely information.</p> <p>An updated summary of HEAT targets and measures was discussed. The new targets on smoking and dental services are included in the updated performance management framework.</p>	

	<p>There was a discussion regarding the target of 0% increase to the prescribing of anti-depressants and the availability of other interventions such as counselling which should help this. The success of offering patients alternatives to anti-depressants will be reviewed at the end of the year and the project will be extended if successful, subject to financial considerations around pump priming.</p> <p>Concern regarding the accuracy of the AHP waiting time data was raised and it was agreed to look into the individual case in question.</p> <p>ACTION: AL to provide further update on initiatives to reduce the prescribing of anti-depressants in March 2009.</p> <p>AL will discuss the particular case in question with Peter McCrossan.</p> <p>Waiting Times Monitoring Report</p> <p>Roy Watts reported that podiatry was the only service managed in the CHP with waiting lists over 18 weeks. Remedial action has already been agreed and will be followed up at the next meeting.</p> <p>Medical paediatrics is operating within the national 18 week guarantee.</p> <p>The capacity plan for paediatric audiology has been provided and issues regarding affordability are being scrutinised.</p> <p>The committee endorsed the report and noted the issues of affordability and recruitment which will be picked up in more detail in September.</p>	<p>AL</p>
<p>6</p>	<p>PLANNING</p> <p>6.1 PPF Progress Report and Action Plan for 2008/09</p> <p>John Mitchell spoke to the progress report and action plan for 2008/09. The action plan highlighted five aims; to continue to build the capacity of SLPPF; to ensure greater publicity for PPFs; to improve communication, to engage more fully with NHSL work programmes, voluntary sector organisations and the general public; to monitor and review the progress of SLPPF and identify development steps.</p>	

	<p>Irene Miller voiced her appreciation of the work carried out by John Miller as Chair of the SLPPF and raised concerns regarding succession planning and the volume of his work.</p> <p>The Chair also endorsed Irene Miller’s appreciation of the work carried out by SLPPF and of the excellent action plan.</p> <p>ACTION: AL & RW to pick up the two particular issues regarding finance and development support and report back to the OMC.</p> <p>PPF matters to be included on future OMC agendas rather than the OMC just noting the minutes of PPF minutes.</p>	<p>AL/RW</p> <p>JM</p>
	<p>6.2 Children and Maternity Services Improvement Board – progress report on the implementation of “Delivering a Healthy Future”</p> <p>Deirdre McCormick, (Service Development Manager) spoke to the paper which had been previously presented to the CMT. The report, entitled “Delivering a Healthy Future”, was published in February 2007 and detailed implementation requirements for children’s services at national, regional and Board level.</p> <p>A number of issues were raised, including accessing good practice from other Boards and also concerns regarding child health records.</p> <p>It was acknowledged that good progress was being made in several areas and that the action points were both numerous and challenging. It was noted that there was a clear performance management / monitoring system in place to ensure that actions were being delivered through the Service Improvement Board structures.</p> <p>The Chair thanked Deirdre for the interesting report and it was agreed that a further update should be provided in six months time.</p> <p>ACTION: JM to invite Deirdre McCormick to the January 2009 OMC meeting.</p>	<p>JM</p>
	<p>6.3 Communications Report</p> <p>Calvin Brown, (Communications Manager) provided an update on communications activity regarding the CHP throughout May and June.</p>	

	<p>A number of positive press articles had been published including the carer’s seminar in East Kilbride, the 60th anniversary family fun day in Strathclyde Park and the smoking ban in the grounds.</p> <p>The chair acknowledged the hard work that had gone into the organisation of the family fun day and thanked all those involved.</p>	
	<p>6.4 South Lanarkshire Joint Services Management Group Extended Local Partnership Agreement</p> <p>AL summarised the contents of the Extended Local Partnership Agreement for South Lanarkshire which had been revised to reflect the changing environment in which the partnership is working.</p> <p>It was noted that the Risk Management section is still being developed and the remit of the locality groups requires further refinement.</p> <p>The report will be presented to the Joint Services Management Group in September. Comments on its content are welcome until 5th August.</p> <p>The committee endorsed the approach described and it was agreed that Alan Lawrie would provide further feedback at the next meeting.</p> <p>ACTION: AL to provide further update at the next meeting</p>	<p>AL</p>
	<p>6.5 Integrated Substance Misuse Services – proposal</p> <p>Roy Watts described the proposal which had been approved by the South Lanarkshire Joint Services Management Group in March. The proposal provides for the implementation of an integrated model of service provision for the NHS L Alcohol & Drugs team and South Lanarkshire Council Substance Misuse teams.</p> <p>The proposal had been developed with staff from the partnership organisations, including the voluntary sector. It was noted that there were concerns regarding whether service users had been involved from the initial stages of the development of the proposal and it was agreed that Roy Watts should discuss with Joyce Mouriki the extent to which service users had been engaged in the process.</p> <p>The committee approved the proposal.</p>	

	<p>ACTION: RW to discuss service user involvement with Joyce Mouriki and RW to report back the outcome of the Social Work Committee's forthcoming consideration of the proposal.</p>	<p>RW</p>
	<p>6.6 Rutherglen & Cambuslang Progress Report</p> <p>AL provided a verbal update.</p> <p>The project board has met twice and includes representatives from various areas. Six workstreams have been established and formal reports will be submitted to both GG&C and NHSL Boards in September 2008 & January 2009.</p> <p>Some complex issues remain to be resolved, including GP contracts, service level agreements where services will continue to be provided by GG&C and funding issues in the Northern Corridor.</p> <p>ACTION: AL will bring the first of the draft Board reports to the next OMC.</p>	<p>AL</p>
	<p>6.7 Performance Report on Community Care 2007/08</p> <p>Roy Watts reported on the submission made by the South Lanarkshire Partners to the Scottish Government in response to guidance issued in January 2008 and further updating and clarification of this received in May. Seven early implementer partnerships are leading the further development of the Outcomes Framework. South Lanarkshire Partnership submitted its dataset on time to the Scottish Government and will submit its dataset regarding Measure 13 of the Outcome's Framework (number of people over 65 admitted twice or more as an emergency who have not had an assessment of their health and social care needs) by the end of July, again within the required timescale. This will be reported to the next meeting of the OMC.</p> <p>The Chair endorsed the report and noted that feedback would be provided on the Scottish Government's visit at the November OMC.</p> <p>Mary Samson raised the issue of older people's services and it was noted that we are currently engaged in a strategy for reviewing these service in NHS L.</p> <p>ACTION: Roy Watts to provide feedback on the next stages at the November OMC.</p>	<p>RW</p>

<p>7</p>	<p>GOVERNANCE</p> <p>7.1 Lanarkshire Data Sharing Partnership Minutes</p> <p>These were noted by the Committee.</p> <p>7.2 Staff Partnership Forum Minutes</p> <p>These were noted by the Committee along with the inclusion of the minutes from the Health & Safety Committee.</p> <p>7.3 South Lanarkshire PPF Minutes</p> <p>These were noted by the Committee.</p> <p>7.4 Health & Care Partnership Minutes</p> <p>These were noted by the Committee.</p> <p>7.5 Complaints Report</p> <p>Graeme Walsh summarised the Complaints Report for the period January to March 2008. He also described the key points contained in the Scottish Public Services Ombudsman Complaint Investigation report regarding complaints against a NHS 24 Advisor and GP. There was a discussion regarding the role of the Independent Advice & Security Service (IASS) and the Citizen’s Advice Bureau.</p> <p>It was noted that there remained some problems with the Out of Hours Service in relation to responding to complaints within the required timescale. It was further noted that there had been some improvement in this area following Dr Liz Duncan’s involvement.</p> <p>The Chair thanked Graeme Walsh for the report and noted its contents.</p>	
<p>8</p>	<p>FOR INFORMATION</p> <p>8.1 North Lanarkshire CHP OMC Minutes</p> <p>These were noted by the Committee.</p> <p>8.2 Acute OMC Minutes</p> <p>These were noted by the Committee.</p>	

	<p>8.3 Health & Wellbeing Profiles 2008 South Lanarkshire CHP</p> <p>This item was deferred to the next September OMC.</p> <p>ACTION: Jayne Miller to ensure this is included on Agenda for September.</p>	JM
9	<p>AOCB</p> <p>There was no further business</p>	
10	<p>DATE OF NEXT MEETING</p> <p>The date of the next meeting is 22 September @ 9.30am in the Boardroom, Udston Hospital.</p>	

CHP - (S) COMMITTEE: m-omc-21 July 08