

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

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

**Note of a meeting held on Monday 21st January 2008 at 9.30 am in
The Boardroom, Calder Ward, Udston Hospital.**

PRESENT:	<p>Mrs N Mahal</p> <p>Mr A Lawrie</p> <p>Ms J Miller</p> <p>Ms F Leckie</p> <p>Dr L Armitage</p> <p>Mrs F Porter</p> <p>Mrs M Nelson</p> <p>Ms Ruth Hibbert</p> <p>Mr J Mitchell</p> <p>Mr H Stevenson</p> <p>Cllr J Handibode</p>	<p>Chair</p> <p>Director CHP South</p> <p>Support Services Manager</p> <p>Acting Divisional Nurse Director</p> <p>Consultant in Public Health Medicine</p> <p>Deputy Director of Finance</p> <p>Non-executive Director</p> <p>Divisional HR Director</p> <p>Patient Representative</p> <p>Director of Social Work, SLC</p> <p>South Lanarkshire Council</p>
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In Attendance: Tom Wilson, UNISON, Robert Anderson, SL Carers Network, Helen Biggins, EKPPF, Calvin Brown, Communications, Maria Reid, Health Promotion, Graeme Walsh, Patient Services.

Item	Action Notes	Action by
1	<p>APOLOGIES</p> <p>Apologies were received from Dr Shiona Mackie, Roy Watts, Mary Samson, Irene Miller, Peter McCrossan, Joyce Mouriki and Judith Hope.</p>	
2	<p>DECLARATIONS OF INTEREST</p> <p>There were no declarations of interest.</p>	
3	<p>MINUTES OF LAST MEETING (12TH NOVEMBER 2007)</p> <p>Accepted as an accurate record.</p>	

<p>4</p>	<p>MATTERS ARISING:</p> <p>Item 6.2 Locality Risk Registers AL advised that further work had been done on the Locality Risk Registers and they were now much improved. The Registers, together with the Locality Action Plans will be submitted to the OMC in March 2008.</p> <p>ACTION: JM to bring Locality Risk Registers and Action Plans to the March OMC</p> <p>Membership Robert Anderson, South Lanarkshire Carers Network, attended the meeting as an observer and will join the committee as a full member on 1st April 2008. The Scheme of Delegation will be formally amended to reflect this. A similar process is ongoing in the NLCHP.</p>	<p>JM</p> <p>AL/JM</p>
<p>5</p>	<p>PERFORMANCE 5.1 Financial Position to 30th November 2007</p> <p>FP discussed her report which showed an underspend to date for South Lanarkshire CHP of £578k. Figures for Cambuslang and Rutherglen were also included within the report and showed an underspend of £5.3k.</p> <p>The underspend is predominantly due to the higher than expected level of vacancies in the system. In addition the prescribing budget was benefiting from significant price reductions on generic medicines so producing a large in year underspend on drugs.</p> <p>AL advised that significant effort is being made to fill vacancies, especially in the Hamilton Locality, and that monies were also being used on a non-recurring basis on minor capital schemes to improve the estate.</p> <p>The chair asked what impact the level of vacancies was having on the system and AL advised that this was being kept to a minimum by using bank staff wherever possible.</p> <p>The committee also asked for some narrative around the Cambuslang and Rutherglen figures in order to fully understand the financial position.</p> <p>ACTION: FP to bring further detail to the March OMC.</p> <p>The committee noted the report and the good progress being made generally.</p>	<p>FP</p>

	<p>5.2 HR Reports</p> <p>Sickness Absence Performance RH discussed the above report and noted the key points.</p> <p>Sickness levels have reduced from 6.4% in October 07 to 5.6% in November 07. This compares favourably to the 8.2% reported to the OMC in November 2006.</p> <p>RH also advised the committee that the 4% target had now been extended to March 2009. Significant work still needed to be done to further reduce the current headline figures. RH reported upon a raft of measures that were being developed to further aid localities address this target, including fast access to physiotherapy, development of a conditions management approach to sickness and further use of family friendly policy awareness.</p> <p>For clarification, RH advised that short term absence was anything up to 28 days, and long term absence was over 28 days.</p> <p>The committee noted the excellent progress being made in this area.</p>	
	<p>5.3 Performance Management Reports</p> <p>Performance Monitoring Report AL discussed the Monitoring Report for November 2007 (note the report states September but should read November).</p> <p>The four red areas are:</p> <ul style="list-style-type: none"> • Sickness absence • Medical Paediatrics • CAHMS • Emergency readmissions <p>AL advised the committee as follows:</p> <p>Sickness absence – detailed discussion had taken place in the previous item and it was noted that the target date has now been extended to March 2009</p> <p>Medical Paediatrics – this referred to one patient that had breached in October 2007 and the target has now been reached</p> <p>CAHMS – The service has been unable to produce detailed performance reports for three months due to IT system conversion. The trend in September was positive but this cannot be confirmed until new figures are produced in January 2008. Therefore flagged as a potential RED.</p>	

	<p>Emergency Readmissions – NHSL was not hitting the target, however, SLCHP was performing well against it. Information is now coming through “live” making it much easier to interpret as well as giving the reason for admission. This will allow the Localities to undertake very targeted work on admission avoidance measures on top of those already being operated such as care management.</p> <p>AL advised that ongoing work is taking place with NHS GG & C to provide further detailed information on Camglen for future reports.</p> <p>The committee were asked to note that CHI compliance in the community was improving steadily and that the appropriate targets for case records and referrals should therefore be reached by 31st of March 2008.</p> <p>The report included the final evaluation statement for JPIAF which was very positive.</p> <p>MN asked what was being done around the target to reduce levels of antidepressant prescribing and AL confirmed that GPs across NHSL now had increased access to counselling and were also being asked to target repeat prescribing in this area.</p> <p>There followed a discussion around the delayed discharge monies (£3.1 million for Lanarkshire) which in the past was allocated to Health and would now be allocated to North and South Lanarkshire Councils and AL advised that he would bring further information to the OMC once discussions with partners had been held.</p> <p>The Chair also asked for information on the review of Children’s Services to be brought to a future meeting.</p> <p>ACTION: RW to provide report on the Review of Children’s Services to a future OMC</p> <p>The Chair noted the excellent progress on JPIAF.</p> <p>Waiting Times Monitoring Report</p> <p>AL discussed the above report which showed an improving position for the main AHP specialties and for those services hosted within SLCHP.</p>	<p>AL</p> <p>RW</p> <p>AL/RW</p>
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<p>6</p>	<p>PLANNING</p> <p>6.1 JHIP Consultation/Final Production</p> <p>Maria Reid, Health Promotion Manager, attended the meeting to discuss the progress to date. She advised that the consultation period had ended just prior to December and responses to the consultation were currently being collated to inform the final Joint Health Improvement Plan which should be available later this year.</p> <p>A public leaflet is being prepared for distribution by the end of February.</p> <p>The committee noted that the 5 areas for joint action were:</p> <ul style="list-style-type: none"> • Nutrition • Physical Activity • Smoking • Alcohol • Mental Health and Wellbeing <p>Included in these areas would be an overarching look at inequalities, as well as taking into consideration the new Health and Local Authority Targets.</p> <p>JMitchell noted the need to explore the role of the PPF in delivering the plan and this was fully supported by the committee.</p> <p>The Chair thanked Maria for the update and looked forward to receiving the full report.</p> <p>6.2 Better Health Better Care</p> <p>The Local Delivery Plan (LDP)</p> <p>AL discussed the report provided by RW which outlines the new HEAT targets. There are now 30 targets and 33 measures in place of the previous 28 targets and 31 measures. There is considerable change and only 5 of last year's targets remain unchanged.</p> <p>The draft Local Delivery Plan for NHSL has to be submitted to the Scottish Government by 18th February 2008.</p>	<p style="text-align: right;">RW</p>
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Better Health Better Care Action Plan

AL discussed the paper which had been prepared by NHSGG & C which outlines the main themes of the action plan. It was noted that the plan presents some important challenges to CHPs to deliver Better Health Better Care.

6.3 Long Term Conditions Update

FL discussed the previously circulated report which highlighted the responses to the Audit Scotland Report and subsequent Action Plan. The report summarises the key issues for the Long Term Conditions Action Team and outlines the actions for the service which include the continuation of the self assessment toolkit, implementation of the Diabetes and COPD Self Management Programmes, and the development of Telehealth/Telecare for COPD patients.

The Chair noted the very good progress made in this area.

6.4 Communications Report

Calvin Brown, Communications Manager, attended the meeting to discuss the report which he tabled.

The report covered positive press coverage over the previous quarter together with media enquiries and controversial issues. He advised that full copies of any articles could be provided to OMC members if required via his office.

JMitchell welcomed the appointment of a new member of staff to the Communications Team who will promote health issues to the media. The PPF are keen to be more involved in this area.

ACTION CB to liaise with PPF to set up a more formal link

CB/JM

The Chair thanked Calvin for the report.

6.5 Cambuslang and Rutherglen Update

AL advised that himself and Catriona Renfrew from NHSGG & C have been having discussions with independent contractors and staff on how to achieve integration of Cambuslang and Rutherglen into the South Lanarkshire CHP.

A final report will be going to the NHSGG & C Board imminently which advises that Optometrists, Dentists and Pharmacists cannot be transferred into NHSL but that detailed

	<p>discussion has taken place with GPs around potential transfer.</p> <p>Some concerns have been expressed around access, finance etc and these are currently being worked through.</p> <p>ACTION: AL to keep OMC informed of progress.</p> <p>6.6 Director of Public Health’s Annual Report</p> <p>LA gave a short presentation which outlined the main themes of the report. Full copies of the report are available from the Department of Public Health at Beckford Street.</p>	
7	<p>GOVERNANCE</p> <p>7.1 HMIE Inspection on Child Protection</p> <p>FL confirmed that the inspection team will arrive in Lanarkshire on 25th February to begin looking at the case records and other documentation and evidence. They will then return on 7th March to commence the field work.</p> <p>Work has been ongoing on the integration of records and an interagency audit on case records is currently being carried out. Where there are areas for improvement, action plans are in place to ensure that the system is as prepared as possible for the inspection.</p> <p>7.2 Complaints Report</p> <p>Graeme Walsh attended the meeting to discuss the quarterly complaints report.</p> <p>Whilst it was noted that NHSL was the best in Scotland in terms of responding timeously to complaints in 2006/7 (NHSL was 14% higher than the next best board), GW reported a drop in the rate recently, mainly due to issues of immediate access to OOH sessional doctors to respond to OOH complaints.</p> <p>7.3 Lanarkshire Data Sharing Partnership</p> <p>AL advised that these notes were shared with the committee for information and would now come to the OMC on a regular basis.</p> <p>7.4 Staff Partnership Forum Minutes</p> <p>These were noted by the committee and they also acknowledged the inclusion of minutes from the Health and Safety Committee.</p>	

	<p>7.5 South Lanarkshire PPF Minutes</p> <p>JMitchell tabled these minutes and advised that copies of the Annual Report and the report on the Training Seminar were available to committee members if required.</p> <p>AL advised that an event had taken place to discuss how in cases of dissolution of GP practices, the PPF could input into the subsequent awarding of GP contracts. A report on this would be sent to the OMC.</p> <p>ACTION: Report on event to next OMC.</p>	JM
8	<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 Joint CHP Strategy Development and Implementation Committee</p> <p>These were noted by the committee.</p> <p>8.4 Health and Care Partnership Minutes</p> <p>None available, however a meeting is due to take place on Friday 25th January 2008.</p>	
9	<p>AOCB</p> <p>The committee were asked to note that the revised No Smoking Policy is currently out for consultation.</p>	
10	<p>DATE OF NEXT MEETING</p> <p>The date of the next meeting is Monday 17th March 2008 in the Boardroom at Calder Ward in Udston Hospital.</p>	

