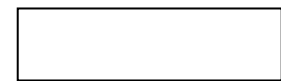


**MINUTES OF A MEETING OF THE
ACUTE OPERATING MANAGEMENT COMMITTEE
HELD ON THURSDAY 24TH APRIL 2008 AT 1:30 PM
IN THE BOARDROOM, HAIRMYRES HOSPITAL**



Present: Mr. T. Currie, Non-Executive Director (Chairman)
Mr A. Dalby, General Manager, Surgical and Critical Care Services
Mrs. J. James, Divisional Nurse Director
Mr A. Goor, Deputy Director of Finance
Mr R. Garscadden, Head of Planning, Acute Division
Mr D. Hume, General Manager, Emergency and Medical Care Services
Ms J. Miller Staff Side Representative
Ms J. Hope, General Manager, Women's, Cancer and Diagnostics Services
Mr T. Sim, Support Services Manager
Mrs L. Khindria, Deputy Director of Human Resources
Dr B. Vallance, Divisional Medical Director
Mr D. Clark, Non- Executive Director
Mrs M Kelly Cancer Services Manager, For Ms S. Kilpatrick, Head of Cancer Services
Mrs M. Nelson, Non- Executive Director

In Attendance-

1. WELCOME AND APOLOGIES

Apologies were received on behalf of Mr. C Sloey, Director of CHP North, Ms S. Kilpatrick, Head of Cancer Services, and Mrs R. Lyness Director of Acute Services.

2. MINUTES FROM PREVIOUS MEETING

The minutes of the Acute Operating Management Committee meeting held on 21st February 2008 were approved as a correct record.

3. MATTERS ARISING

3.1 Surgical and Critical Care Division Year end Report

Mr Dalby reported that this was covered in the Surgical and Critical Care update in the Divisional Report.

3.2 Respiratory (Special Interest Item)

It was agreed that this item would come to the Operating Management Committee meeting in June.

4. ITEMS FOR CONSIDERATION

4.1 Sickness Absence.

Mrs Khindria presented the report and informed the OMC that the national HEAT target for reducing sickness absence to 4% would come into effect from March 2009. In order to meet this target NHS Lanarkshire has been undertaking a significant amount of work, both in management training programmes, and in refining the data collection process. Mrs Khindria outlined a proposal for a centralised management service, which would proactively support employees and managers throughout NHS Lanarkshire in reducing the sickness absence rate.

There was some discussion following Mrs Khindria's presentation, and a question was raised around whether the funding identified for the proposed centralised management service was sufficient.

Action: Mrs Khindria agreed to contact Dr Macdonald at SALUS and update at the next meeting

4.2. Unscheduled Care Performance.

Mr Hume gave a verbal update on this and highlighted that performance against this target was slightly below the target of 97%. Mr Hume also informed the OMC that there has been a sustained increase in the number of emergency medical patients. Mrs James and Dr Vallance have been conducting point prevalence studies at each of the three acute hospital sites in order to establish consistency, and establish the principle reason for patient's being in hospital. Recommendations following their visits will be presented shortly.

Following a short discussion, Mr Currie enquired if Mrs Lyness would be raising this at an NHS Board meeting.

Action: Mr Hume agreed to contact Mrs Lyness on her return

4.3 Better Cancer Care

In the absence of Ms Kilpatrick, Mrs Kelly provided the OMC with a paper, which outlined the background, the consultation process in NHS Lanarkshire and some initial feedback from the consultation sessions. The consultation period ran for 12 weeks between 12th February 2008 and 5th May 2008, and that a draft response would be going to the NHS Lanarkshire Board later in the month. Mrs Kelly also informed the OMC that the final strategy would be published in mid 2008, and will be the national framework, which will determine the future direction of cancer services across Scotland.

5. CORE AGENDA ITEMS – REPORTED BI-MONTHLY

5.1 FINANCE REPORT

The financial report on the Acute and Corporate Division for the period to 31st March 2008 was tabled by Mr Goor, who advised that the Division has achieved a break even position, contributing to the overall achievement of the NHS Lanarkshire

desired outturn. The key pressure areas continue to be Theatres, Labs and A&E Mr Goor said and these areas still represent a challenge with the tightening of future allocation increases.

On behalf of the OMC Mr Currie acknowledged the contribution that all those the within NHS Lanarkshire have made to achieving the current financial position.

5.2 WAITING TIMES/ DELAYED DISCHARGE REPORT

The Waiting Times and Delayed Discharge Paper at February 29th 2008 was presented by Mr Garscadden who provided a brief commentary on the performance on waiting times compared with the planned trajectory identified in the Local Delivery Plan. Mr Garscadden began by commenting on the introduction of New Ways and highlighting that there had been some issues with the software, data validation and the reporting mechanism. Mr Garscadden confirmed that problems around these issues have been experienced by NHS Boards across Scotland. NHS Lanarkshire in response have set up a Governance Committee to ensure management grip of the overall process.

Mr Garscadden reported that progress against the HEAT targets has been sustained and that it is the intention to improve performance with the aim to deliver a maximum wait of 16 weeks by March 2009. Dialogue is continuing with the Scottish Government, and that there is ongoing work around capacity and demand, which will inform the completion of trajectories for each target. Mr Garscadden also confirmed that Clinical Business Plans are being prepared for each speciality.

5.3 DIVISIONAL REPORT

Mr Hume reported operational issues within the Acute Division.

Emergency and Medical Clinical Division

Within the Emergency and Medical Division emergency activity continued to increase at both Monklands and Wishaw hospitals while remaining relatively flat at Hairmyres Hospital. day case activity has continued to increase, and there has been sustained increase in A&E activity on all three sites throughout the year, and this has continued in month, particularly at Monklands. The formal winter planning period ended on March 31st 2008, and the formal evaluation paper will be concluded and submitted to the DMT in May 2008. Monklands 4 hour UCCP was at 99% for March 2008.

Women's Cancer and Diagnostic Clinical Division

Ms Hope provided an update on Neonatal Services and confirmed that following the issue of a change notice the formal process to detailing the business case costs is now underway. Ms Hope also confirmed that the engagement period for the Maternity Services Strategy has now ended and that a summary paper will go firstly to the Modernisation Board in April and to the NHS Lanarkshire Board in May.

Cancer- The new Head of Cancer Services Sheena Kilpatrick took up post at the beginning of April 2008. The interim NHS Lanarkshire Maggie's Centre, based at Wishaw General Hospital was opened on April 3rd 2008.

Surgical and Critical Care Division

Mr Dalby advised that across the division 88% of planned elective lists were utilized. Thoracic services migrated successfully from Hairmyres Hospital to the Golden Jubilee national Hospital on March 24th 2008. Mr Dalby also confirmed that approval has now been give to begin work around a suitable treatment room for patients who will receive Lucentis, and that this will allow theatre space to be freed up for more appropriate ophthalmic treatments. An update on the introduction of a project (LEAN) aimed at improving efficiency, and analyzing patient and process flows within Theatres will begin in June 2008 Mr Dalby advised.

5.4 CONSULTANT APPOINTMENTS

The paper was endorsed by the OMC.

5.5 HR MONTHLY BRIEFING- February- April

Mrs Khindria presented the report and provided an update to the OMC on the main areas of HR activity in the Acute Division up to April 2008. Mrs Khindria also reported that there was a slight increase in senior medical staffing vacancies as at March 31st 2008. Following some discussion around recruitment, Mrs Khindria confirmed that recruitment to NHS Lanarkshire is improving overall, and that a review of the recruitment process is now place, with the view to streamlining the process and reducing timescales.

6. CORE AGENDA ITEMS – REPORTED QUARTERLY

6.1 HR QUARTERLY WORKFORCE REPORT OCTOBER- DECEMBER

The Report was noted by the OMC who thanked Mrs Khindria for providing the level of detail within the report.

7. SPECIAL INTEREST ITEM

Primary PCI

Mr Hume provided the OMC with an update on Primary PCI, which included the background and rationale for its introduction, progress to date and the timescales for introducing the service. Mr Hume outlined the details of the new Catheterisation Lab build at Hairmyres Hospital, and the considerable investment - £1.4 million being made. Mr Hume also set out the timescales around the build, and the

temporary arrangements, the use of mobile Cath Lab facilities, which require to be put in place during the period of building work. The new service will also allow patients from NHS Ayrshire and Arran access to Primary PCI. Mr Hume confirmed that the expectation was that following the refurbishment work; the earliest date for commencing the new service would be October 2008. Following Mr Hume's presentation there was general discussion around the introduction of Primary PCI, the level of investment, and the quality of the new service. There was also a recognition that the public and cardiac support groups would require to be kept informed through the Communications Department

8. ITEMS FOR NOTING

- 8.1 MINUTES FROM COMMUNITY HEALTH PARTNERSHIP (CHP) NORTH OPERATING MANAGEMENT COMMITTEE (OMC) MEETING HELD 6TH FEBRUARY 2007
- 8.2 MINUTES FROM THE COMMUNITY PARTNERSHIP (CHP) SOUTH OPERATING MANAGEMENT COMMITTEE (OMC) MEETING HELD 21ST JANUARY 2008

The items above were noted

9. ANY OTHER COMPETENT BUSINESS

None.

10. DATE AND TIME OF NEXT MEETING

It was agreed that the next meeting would take place on ***Thursday 19th June at 1:30 pm, in the Boardroom, Wishaw General Hospital.***