ACCOUNTABILITY REVIEW 2001/02 – OUTCOME

Recommendation: The Board is asked to:

i) receive the record of the outcome of the Annual Accountability Review Meeting between NHS Greater Glasgow and the Scottish Executive;

ii) note the progress made on the set of early action points arising from that Review.

1. Introduction

1.1 The annual Accountability Review meeting between NHS Greater Glasgow and the Scottish Executive was held on 20th June, 2002 at the Headquarters of the NHS Board. A record of the outcome of that meeting was set out in the letter from Trevor Jones, Head of Department and Chief Executive, NHS Scotland sent on 10th July, 2002 to Professor David Hamblen, then Chairman of the NHS Board: a copy of that letter is attached to this paper.

1.2 The NHS Board Chief Executive will amplify at the Board meeting the key issues discussed at that Accountability Review. The purpose of this short covering paper is to provide a brief up-date on the points identified as early action points arising from the Accountability Review Meeting itself.

2. Area Partnership Forum

2.1 A further meeting of the Area Partnership Forum took place in the week following the Accountability Review Meeting. At that meeting of the Partnership Forum, a draft work programme for the present year was discussed: that programme should be finalised at the September meeting of the Partnership Forum. In addition, the Joint Chairs of the Forum have had an initial meeting with UNISON: further discussion will take place in the coming weeks. Further, the process for recruiting the Director of Corporate Communications is now well advanced and should be complete by the date of the NHS Board meeting in August.
3. **Major Service Issues**

3.1 There was detailed discussion at the Accountability Review Meeting of the Acute Services Strategy: a final submission was made to the Chief Executive of NHS Scotland and to the Minister for Health and Community Care immediately following the NHS Board meeting held on 27th June, 2002.

3.2 The Minister for Health and Community Care has now completed his detailed consideration and scrutiny of all three submissions which the NHS Board had made during the previous six months. On 10th August, 2002, the Minister wrote to the Interim Chairman, Professor Gordon Dickson, and gave his approval to the proposals flowing from Greater Glasgow’s Acute Services Strategy. The details of the Ministerial decision are set out below:

- That the Clinical Strategy based on three adult in-patient sites, supported by two ambulatory care and diagnostic units (ACADs) on the Stobhill site and on a site adjacent to the Victoria Infirmary site is the appropriate pattern for future years.

- In North Glasgow acute in-patient services will be provided from the re-developed Glasgow Royal Infirmary and Gartnave General Hospital.

- In South Glasgow acute in-patient services will be provided from a major new development at the Southern General Hospital.

- That full A& E services will be provided from two sites located at Glasgow Royal Infirmary (GRI) and the Southern General Hospital (SGH) and that:
  - acute receiving services will be provided from three in-patient sites at GRI, Gartnave and SGH;
  - trauma and orthopaedic in-patient services will be provided from the two full A & E sites. Orthopaedic out-patient and day case services to be provided from all five adult sites;
  - minor injuries units will be provided from all five adult sites (Gartnave, Stobhill, GRI, Victoria and SGH); and
  - paediatric A & E and emergency services will be provided from the Royal Hospital for Sick Children at Yorkhill.

3.3 In his letter of approval, the Minister also welcomed the NHS Board’s proposal that Audit Scotland undertake a “governance” role in respect of the implementation of the Acute Services plan. The Minister has asked that the final remit agreed between the NHS Board and Audit Scotland be shared with his Department as soon as that has been agreed.
3.4 Discussions are progressing with planning officials in Glasgow City Council on the planning application for the local Forensic Psychiatric Unit at Stobhill. A Campus Plan which covers the Stobhill site has now been submitted for consideration by the Council’s Development and Regeneration Sub-Committee; the formal planning application for the Forensic Psychiatric Unit will be considered thereafter by the Council’s Planning Committee.

4. Financial Issues

4.1 The two immediate action points arising from the discussion on financial issues have been taken. The Chief Executive and Director of Finance met with the Health Department’s Director of Finance and members of his team on 2nd August in order to take forward next steps in the discussion about the development of the five year financial plan: an agreed timescale for an initial submission (by end August, 2002) and of a more detailed submission (by end December, 2002) has been agreed with the Health Department’s Director of Finance.

4.2 In addition, a detailed paper has now been sent to the Chief Executive of NHS Scotland on Regional Planning Mechanisms. This follows the further meeting of West of Scotland NHS Boards held on 22nd July. It is anticipated that this contribution from the West of Scotland Boards will help to inform the arrangements which are shaped in the month ahead to take forward Regional Planning arrangements.

5. Waiting Times

5.1 As agreed at the Accountability Review Meeting, a detailed report has now been sent to the Director of the National Waiting Times Unit which sets out the proposals for the coming 18 month period, in order to address the key Ministerial waiting time targets. Fuller details of the implementation of that plan will continue to be brought to the NHS Board at regular intervals.

6. Next Steps

6.1 Quarterly reports on progress against the key action points agreed at the Accountability Review will be brought to the NHS Board during the second half of the 2002/03 year.