GREATER GLASGOW NHS BOARD

Minutes of a Meeting of the
Area Clinical Forum
held in Board Room 2, Dalian House
350 St Vincent Street, Glasgow
on Monday 17 November 2003 at 2.00 pm

PRESENT

Dr F Angell (in the Chair)
Dr J Nugent  Ms G Leslie

IN ATTENDANCE

Ms S Gordon, Secretariat Manager
Ms L McManus, Representative, Greater Glasgow Health Council
Ms C Renfrew, Director of Planning and Community Care

ACTION BY

31. APOLOGIES AND WELCOME

Apologies for absence were intimated on behalf of Dr B West, Ms R Crocket, Dr B Cowan, Ms M Wilmott, Mr J Cassidy, Sir J Arbuthnott, Dr T Parke, Mr S Bryson, Mr A McLaws, Dr H Burns, Mr C Fergusson, Ms A Duncan, Ms L Love and Mr H Smith.

The Chairman welcomed Linda McManus to her first meeting of the Area Clinical Forum as a representative from Greater Glasgow Health Council.

32. QUORUM

Members were reminded that the Area Clinical Forum quorum was one-third of its membership. Members noted that, as such, the meeting was not quorate.

33. MINUTES

The Minutes of the meeting held on Monday 18 August 2003 at 2.00 pm were agreed to be an accurate record. Given that the meeting was not quorate, however, it was agreed that the Minute be approved formally at the next Area Clinical Forum meeting.

34. MATTERS ARISING

Members were asked to note the following Matters Arising from the Minute of the meeting held on Monday 18 August 2003:
(i) Greater Glasgow NHS Board’s Green Transport Policy

Ms Renfrew advised that the NHS Board’s car parking document was expected out shortly for consultation. The Chairman encouraged the NHS Board to consider using environmentally friendly fuels on all NHS Greater Glasgow vehicles. This may be a comment that the Area Clinical Forum wished to feed into the consultation exercise when it began.

NOTED

(ii) Area Clinical Forum Membership

Members noted a letter from Danny Crawford, Chief Officer, Greater Glasgow Health Council, nominating Linda McManus to attend future Area Clinical Forum meetings as the Health Council representative. Ms McManus was in attendance.

NOTED

(iii) West of Scotland Cancer Awareness Project

Members noted the letter of response sent to Lisa Cohen, Project Manager, West of Scotland Cancer Awareness Project, by the Secretary on 29 August 2003. Ms Cohen had responded in a letter dated 22 September 2003 and Members noted the content of her response in so far as it related to oral and bowel cancers.

Members reported no increase, so far, in patient attendances resulting from this campaign.

NOTED

35. DISABILITY DISCRIMINATION ACT

Tony Curran, Head of Estates, Greater Glasgow Primary Care NHS Trust had been scheduled to attend the Area Clinical Forum meeting between 2.00 and 2.30 pm to update on developments on the Disability Discrimination Act. Due to ill health, however, Mr Curran had had to cancel his attendance – he had confirmed that he would gladly come along to the next Area Clinical Forum meeting to provide an update.

Ms Leslie advised that a meeting was being held in Edinburgh on 2 December 2003 to discuss in general, the Disability Discrimination Act and an Area Optometric Committee representative would attend.

Furthermore, Ms McManus reported that there was an independent group looking at all NHS Greater Glasgow premises to check accommodation in relation to compliance with the Act.

NOTED
36. **MEDIA AWARENESS**

Ally McLaws, Director of Corporate Communications, Greater Glasgow NHS Board, was scheduled to attend the Forum meeting to present on general issues of media awareness. Unfortunately, due to ill health, Mr McLaws was unable to attend but had agreed to come along to the next meeting.

**NOTED**

37. **SCOTLAND WIDE ACF MEMBERS MEETING**

The Chairman reported that he had attended the Scotland Wide ACF meeting held on 2 October 2003 in Edinburgh. Topics of discussion had included:

- **ACF Development Days** – confirmation had since been received that ACF development days would be held on 29 and 30 January 2004 in Edinburgh. Correspondence had been received in relation to this from Bryce Watson and circulated to all Members.

  Their communication had encouraged an upper limit of 20 persons from each ACF and the Chairman considered it to be ideal to have, at least, one person from each of NHS Greater Glasgow’s Advisory Committees. There was a general consensus that it would have been helpful if the development event had been held on one day rather than two half days as it was anticipated many Members would have difficulty in attending two half days. Accordingly, there may be greater attendance if the event was a one-day event. To this end, it was agreed that the Secretary would write to Bryce Watson providing these comments and ask if it would be possible to change to one day only.

- How ACFs were fitting into the work of NHS Boards across Scotland.

- How the Advisory Committee Structure would fit into the new Unified Board systems – it was acknowledged that in NHS Greater Glasgow Trust management teams had found the advisory structure a helpful link and it was hoped this would be maintained. As Community Health Partnerships evolved, it may be necessary to take a look at how the advisory structure could be best placed to reflect ongoing developments and fit into new ways of working. This may be considered in line with making better use of clinical time and what mechanisms could be put in place to achieve this. It was recognised that, at the moment, the Advisory Committee mechanism was a statutory arrangement but if NHS Greater Glasgow considered changes to be made to benefit the NHS system it could certainly suggest this to the Scottish Executive.

- The advantages in all Members of the Area Clinical Forum becoming more media aware – it was due to this discussion that the Chairman had extended an invitation to Ally McLaws, Director of Corporate Communications, to attend an ACF meeting.

- The benefit in non Executive NHS Board Members having a heightened knowledge in all areas of working within the NHS particularly matters such as accountancy and whether there was a training need for such Members across NHS Boards.
• A general sharing of experiences – Members discussed what Greater Glasgow NHS Board sought from its Area Clinical Forum. It was hoped that the ACF pulled together strands from different professional bodies and advised the Board accordingly. On this point, Members discussed the benefit in the ACF looking at the consultation document on maternity services with a view to responding to the NHS Board. It was intended that this would be over and above the respective Advisory Committee responses but there may be benefit in bringing these together with a consensual ACF response. It was agreed that this would, therefore, be further discussed at the next ACF meeting.

38. SERVICE REDESIGN COMMITTEE

Dr Nugent referred to the Service Redesign Committee NHS Board paper which would be considered by the Board tomorrow (Tuesday 18 November 2003). He referred, in particular, to the proposed membership of the Committee which included four representatives from the Area Clinical Forum. This would be a matter for the Area Clinical Forum to consider and as such it was:

DECIDED:

• That the Secretary write to all Chairs of the Advisory Committees seeking nominations. It was then intended that at the next ACF meeting, Members would consider all nominations and come to a conclusion on which four would represent the Area Clinical Forum.

39. ADVISORY COMMITTEE MEETING SUMMARIES

Members were asked to note the following topics of discussion from recent Advisory Committee meetings:

(i) Area Optometric Committee

• Diabetic Screening concerns – particularly in relation a change process for diabetic screening which now involved cameras being set up at two hospital sites across NHS Greater Glasgow. The Chairman of the AOC had agreed to write to the Chairman of the Area Medical Committee and the NHS Board’s Chief Executive highlighting concerns the AOC had about this. Catriona Renfrew agreed that David Leese, Assistant Director for Planning – Acute Services would contact Gale Leslie directly to take these concerns forward. The Secretary was asked to forward Ms Leslie’s email address to Catriona Renfrew.

• Local Implementation Plan.

• Partnership for Care.

• Pre-school Eyesight Tests.

(ii) LHCC

• Partnership for Care.

• The role and remit of the Community Health Partnership Steering Group and ongoing work being undertaken.

• New monies for primary Care
• Next meeting to be held in December 2003.

(iii) Area Dental Committee

• The Service Redesign Committee.

• Local Implementation Plan.

• Partnership for Care – particular concerns included no dental representation on Community Health Partnerships.

• Provision of fluoride in water.

40. ANY OTHER BUSINESS

(i) Greater Glasgow Health Council

Ms McManus updated the Committee on the current and proposed revised roles of Greater Glasgow Health Council. In general, she considered that Greater Glasgow Health Council was supportive about the formation of Community Health Partnerships and hoped that there would still be a role for patient advocates. The Health Council also welcomed the increased patient and public involvement witnessed recently in NHS Greater Glasgow.

NOTED

41. DATE OF NEXT MEETING

Date: Monday 9 February 2004
Place: Conference Room, Ground Floor, Dalian House
Time: 2.00 pm – 4.00 pm

DECIDED:

That the Secretary write to all Members advising them of this meeting date particularly as it would include the important items for discussion of:

• Maternity Services – Consultation Proposals
• ACF Nominations for the Service Redesign Committee

Secretary