PRELIMINARY BUSINESS

(a) Apologies for Absence

Apologies for absence were intimated on behalf of Dr J Beattie, Miss S Dick, Ms S Forsyth, Mrs L Hamilton, Dr R Lindsay, Mr D McDonald, Miss I McKune, and Mrs G Wilson.

(b) Minutes for Approval

The remainder of the minutes of the meeting of the Divisional Management Team, held on the 20th May 2005, were approved as an accurate record.

(c) Matters Arising from the Minutes of the Meeting held on 18th March 2005

(i) Pan-Glasgow Laboratories Review - Update

Mr Matheson reported that external consultants had been appointed to provide costings for the four options under consideration.
(ii) PICU/HDU - Update

Mr Jamieson reported that medical gases were still being tested to identify the source of the problem causing the delay in opening the new unit. There were some indications that the flexible tubing was the problem and, if this proved to be the case, it may be necessary to replace the mobile pendants with fixed ones at an approximate cost of £80k.

1. SERVICE DELIVERY / DEVELOPMENT

(a) NHSGG Re-organisation

Mr Best described the selection process for directors in the new structure (phase I), which was now underway. He added that there would be a second round of selection for the next level of managers (phase II), beginning in mid-August.

Members went on to discuss the papers produced by NHSGG describing the proposed new management arrangements and inviting comments. A number of concerns were raised and members expressed the importance of clinical arguments being heard in shaping the new structure. It was noted that Mr Best would be responding to the discussion paper and concerns raised by members would be incorporated in this response.

(b) Copying Clinical Correspondence

Mrs Horne summarised the comments that had been received in relation to this proposal (Ref. 06/05/01). During discussion it emerged that there was widespread support for the principle of copying clinical correspondence for patients/parents. However, concerns remained about the practical considerations involved, particularly in cases where an additional letter would be required to explain technical information in a manner suitable for parents. Members noted that the practice of copying clinical correspondence was more common in some areas than in others and felt that there may be merit in adopting a phased approach.

The DMT invited Mrs Horne and Mr Jamieson to produce an implementation plan for approval at a future meeting.

2. PERFORMANCE AND ACCOUNTABILITY

(a) Quarterly Waiting List Report

Mrs Fleming invited members to note the Waiting List report for the quarter ended 31 March 2005 (Ref. 06/05/02). She reported that inpatient activity in RHSC was 3½% higher than last year and went on to report on the recent Waiting List Initiatives and the proposals for additional anaesthetists and utilisation of the 7th theatre to meet future waiting time guarantees.

Following discussion it was agreed that future reports would be expanded to include information on Waiting Lists by NHS Board area, theatre utilisation rates, cancer waiting times and Child and Adolescent Mental Health Services.
3. RESOURCES AND INFRASTRUCTURE

(a) Monthly Finance Report

Mr Matheson reported that the financial accounting function had now been centralised for NHSGG at Stobhill Hospital. As a result of this change the usual monthly report was not yet available. It was acknowledged that this situation was unhelpful for budget holders and efforts were being made to resolve the situation. It was noted that the process for purchasing equipment was unchanged.

Mr Matheson added that the results for the first quarter of the financial year were expected to be positive, although savings would still be required during the year. Mr Best reminded DMT members that the expenditure moratorium continued to be monitored on a monthly basis.

4. HUMAN RESOURCE ISSUES

(a) Access Arrangements for R&D Contacts

Mrs Ostrycharz invited members to consider the proposed arrangements for ensuring appropriate disclosure or supervision of researchers who may come into contact with patients (Ref. 06/05/03). Following discussion it was agreed that amendments would be made at section 4.2, to ensure that parental supervision was not relied upon and at section 4.4 to clarify that a recent disclosure meant one made after January 2005 or less than one year old, whichever is the shorter.

The DMT approved the policy subject to these amendments.

5. GOVERNANCE

(a) Annual Accounts for the Year Ended 31 March 2005

Mr Bryden reported that the Division had ended 2004/05 with a surplus of £130k and that all revenue and capital targets had been met. He added that the auditors were satisfied with the accounts and that the Audit Committee would meet next week to confirm that it was satisfied with the internal financial controls. He invited members to approve the statement of members’ responsibilities and the statement on internal control (Ref. 06/05/04). The Chairman expressed the DMT’s appreciation of the work done by the Finance Team.

The DMT approved the statements, subject to the Audit Committee’s approval of internal control procedures.

(b) EU Directive on Blood Transfusions

Mr Jamieson drew members attention to a new EU Directive, which required Divisions to trace every unit of blood/blood components from the point of receipt to disposal (Ref. 06/05/05). The new regulatory framework would come into force on 8 November 2005 and there would be cost implications. Members noted that trials of new forms to collect the necessary data were now underway.
6. **ANY OTHER BUSINESS**

(a) **Computer Virus**

Mr Best reported that there was a virus now affecting the Division’s network. The IT department was working to restore the system to normal as soon as possible.

(b) **Diagnostic Imaging**

Dr Watt reported informed members that a pan-Glasgow imaging system was now in operation.

7. **DATE AND TIME OF NEXT MEETING**

The next meeting will be held at 12:30pm on Friday 19\(^{th}\) August 2005 in the Conference Room, QMH.

The Chief Executive delivered the June Core Brief.