Introduction

This issue provides an update from today’s Board meeting and links to a Scottish Government press release on cleft surgery and details an NHSGGC media statement on emergency department performance.

Board meeting update

NHS Greater Glasgow and Clyde Health Board met today, Tuesday 20 December 2016. All the Board papers are available on our website.

Below are some of the important highlights from the meeting.

Board members voted in favour of the proposal to deliver the full current range of Centre for Integrative Care (CIC) services on an ambulatory care basis and remove the seven inpatient beds.

Board members voted to move to formal three month consultations on the proposed changes to birthing services in the Community Maternity Units (CMUs) at both the Inverclyde Royal Hospital and Vale of Leven hospital. The board agreed that the consultations will be launched following the launch of the national NHS Scotland maternity strategy, due to be published in January.

The proposal to reshape rehabilitation services in the north east of Glasgow leading to the closure of Lightburn Hospital was also approved for formal consultation. In addition to reshaping rehabilitation services, consultation will be undertaken on plans for new investment in health and social care services. A combination of these proposals is expected to deliver enhanced care.

John Brown, chairman, NHSGGC, said: "Today's board meeting saw a detailed interrogation of all the proposed services changes.

"It's always encouraging to see such strong debate as this reflects just how acutely aware board members are of the importance of each proposed service change.

"Discussions on the seven inpatient beds at the CIC was robust as was expected. It was absolutely clear that all board members fully understand all the issues being discussed.

"Following a vote of the board, the decision was made to proceed to close the beds and move to an ambulatory care model of service for the unit."
A transition plan will be developed to configure services as appropriate to continue delivering all services on a day case basis. This will ensure issues identified in the discussion are addressed and there is improved synergy with other clinical services.

The chairman added: "The decision was taken to move to formal consultation on birthing services at the two CMUs. The board agreed that the consultations will only be launched following the publication of the national NHS Scotland maternity strategy to ensure the board's decisions are in keeping with that strategy.

"As we move to full consultation on the changes to rehabilitation services in the north east of Glasgow, we will work with the HSCP on the development of plans for new investment in facilities in the east end as an integral part of this. The board will now launch formal consultation in January to hear further views from patients, families and interested groups."

**Cleft surgery recommendation - procedures to take place on single site in Glasgow**

Surgical procedures for cleft patients will be consolidated on a single site in Glasgow subject to a number of conditions being met, Health Secretary Shona Robison has announced.

The expert surgical teams from Edinburgh and Glasgow will now work together as a single collaborative team, performing all cleft surgery on one site, ensuring a safe and sustainable service for cleft patients across Scotland. [Click here to read the full press release](#).

**NHSGGC media statement on emergency department performance**

The latest published performance statistics for our emergency department at Queen Elizabeth University Hospital, and indeed across the board area, are disappointing. We apologise to our patients who waited for more than four hours to be admitted to hospital or discharged home.

Whilst our performance was less than ideal, we would wish to offer reassurance that patient safety was not compromised and that patients who unfortunately had to wait longer to complete their assessment were clinically able to do so.

1787 patients attended the Queen Elizabeth emergency department between 5th and 11th December. The majority of these patients were seen, assessed, treated and either admitted or discharge within four hours. [Click here to read the full statement](#).

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