

ASR Beds/Activity/Capacity Sub Group**Meeting 21st April 2005 Conference Room Southern General Hospital**

	Item	Action
1.	Note of previous meeting accepted.	
2.	Clinical Model Sub Groups <ul style="list-style-type: none"> • Margaret Welsh & Phil Rakhra produced a summary report of the CMSG'S. This will continue to be updated as each of the group's complete their reports, and will form the basis of the final report from the Beds/Activity/Capacity sub group. BC & CR acknowledged and thanked them for the report. • Final reports yet to be submitted – work continues to progress in the groups. It is expected that the majority will be completed by the end of May. 	 MR/PR MR/PR
3.	CHKS Report <ul style="list-style-type: none"> • Final updated report received using 2002/03 data. • Headline messages – Nothing has moved significantly from the two sets of data 2001/02 – 2002/03. • North & South bed compliments have been reconciled. • Recoding exercise for South Glasgow has not shown any significant changes in the HRG profile analysis. • Community beds – Beds within Acute setting – could be provided in the community. • Benchmarking – This will be picked up by the Divisions and CHKS through the Clinical Governance reporting. 	 CR Div/CHKS
4.	Bed Model Template <ul style="list-style-type: none"> • CR talked the group through the template – some discussion followed and a few issues were raised that required clarification. <ul style="list-style-type: none"> ○ Need to ensure we have an audit trail of bed movements and changes. ○ Additional column required for Primary Care. ○ Cardiology beds in SGH are included in General Medical beds, need to aggregate this. ○ Accident & Emergency bed requirement will be extracted from work previously carried out by the HMcL and EMC team. ○ Acute beds v Rehabilitation beds, Assessment beds need to ensure that we do not lose beds from system. 	 All JC JC All All

5.	<p>Community Beds - CR will circulate a table of beds required.</p> <ul style="list-style-type: none"> Based on work carried out at GGHB and CHKS it is recognised that approximately 184 beds could be provided in an alternative facility. Work to continue to refine and identify alternatives provision. 	CR
6.	<p>Modelling growth – Joe Clancy</p> <ul style="list-style-type: none"> Bed modelling scenarios have been produced using various growth factors across all specialties. From the analysis it has been identified that there are a range of growth factors across specialties, i.e. ranging from .3% to .7%. There was much discussion and debate in relation to the model. It was agreed that further work is required to refine the model. 	JC
7.	<p>Surgical Sub Specialties</p> <ul style="list-style-type: none"> CR agreed to write up the paper and issue this to the group. 	CR
8.	<p>Trauma & Orthopaedics</p> <ul style="list-style-type: none"> Groups have now been established and work is progressing well. Progress will be reported back at the next meeting. 	CR/PK
9.	<p>Rehabilitation</p> <ul style="list-style-type: none"> The group have completed their final report. AH required clarification from CR as to the next steps for the group. CR advised that it is important for the group to continue with their work, start to share this with CD's etc., RC to be invited to next meeting, in relation to engaging with the Clinical Teams, ACAD etc., Rehabilitation group is meeting with the Musculo-skeletal group next week. 	MR/AH PR MR/AH
10.	<p>Infectious Diseases</p> <ul style="list-style-type: none"> CR meet with the Clinicians, who have put a strong case forward for being on an acute site, in relation to their key linkages with A&E & ITU. Paper produced by Fiona McTeague to be issued to group. 	CR PR
11.	<p>Date & Time of next meeting The next meeting of the ASR Beds/Activity/Capacity Sub-Group will be held on Thursday, 30th June, 2005 at 5.00 p.m. in the Conference Room, Southern General Hospital.</p>	

