

**ACUTE SERVICES REVIEW  
BEDS ACTIVITY CAPACITY SUB-GROUP**

**Note of Meeting held on 29<sup>th</sup> April 2004 in the Conference Room,  
Southern General Hospital**

		<b>ACTION</b>
<b>1.</b>	<p><b>NOTES OF PREVIOUS MEETING HELD ON 26<sup>TH</sup> FEBRUARY 2004</b></p> <ul style="list-style-type: none"> <li>The notes from the previous meeting were confirmed as accurate.</li> </ul>	
<b>2.</b>	<p><b>PROGRESS WITH SURGICAL AND CANCER SPECIALTY GROUPS</b></p> <ul style="list-style-type: none"> <li>Catriona Renfrew confirmed that dates were now agreed for meetings of the Vascular (7<sup>th</sup> May) and Urology (14<sup>th</sup> May) Surgical Specialty Groups. Dates for Renal and General Surgery/Cancer to be arranged ASAP.</li> </ul>	<b>CR</b>
<b>3.</b>	<p><b>CHKS PERFORMANCE AND PLANNING ANALYSIS</b></p> <ul style="list-style-type: none"> <li>Sam Gallaher presented the updated Performance and Planning Analysis based on 2002/03 data (see attached presentation);</li> <li>Sam confirmed that this analysis is based on 2002/03 data, includes the updated population projections and includes a number of future scenarios (which can be amended/adapted/added to) based upon planning assumptions from North and South Glasgow Divisions and GGNHSB;</li> <li>Sam confirmed that the dataset for 2002/03 has been confirmed as 98% + complete/accurate;</li> <li>The Next Steps for this work are set out on the attached presentation.</li> <li>With regard to clinical models work, it was agreed that Catriona Renfrew would raise at the ASR Programme Board on 6<sup>th</sup> May 2004 the need to 'carve out' funded clinical time to ensure models work progresses over the next 9 months.</li> </ul>	<b>CR</b>
<b>4.</b>	<p><b>HRG ANALYSIS</b></p> <ul style="list-style-type: none"> <li>From the Performance and Planning Analysis, it was agreed that Sam Gallaher would now produce the HRG Analysis for each Clinical Model/Disease based Group. This will be available by late May 2004.</li> <li>Once the HRG Analysis is available, CHKS will arrange to meet with each Clinical and Planning Lead to work through and develop an understanding of the HRG Analysis and how it should be used in the modelling work;</li> <li>Martine Sambrook raised the issue of rheumatology beds/data. Agreed that South Glasgow has rheumatology beds within the general</li> </ul>	<b>Sam G</b>

	<p>medicine specialty. Anne Harkness to confirm details to Martin ASAP that</p>	<b>AH</b>
	<ul style="list-style-type: none"> <li>• Catriona Renfrew agreed to speak to the Orthopaedic Sub-Committee to ensure there is engagement with, and input from, Orthopaedic services to the modelling work;</li> <li>• For the purposes of the clinical modelling work, we also need to agree the future scenarios for Cardiac Surgery and Cardiology. There is Project Group led by Kevin Hill, Divisional General Manager in North Glasgow Division progressing work to review issues/options for locating cardiac services at the GJH. Kevin Hill to update the ASR Sub-Group on likely future scenarios.</li> </ul> <p>David Leese to speak to Kevin Hill on this ASAP;</p> <ul style="list-style-type: none"> <li>• Dr. Howie noted the interconnection between improvements in performance and changes in the mindset and behaviour of staff. Dr. Howie noted the importance, therefore, of focussing on areas where performance can be improved in a shorter time period. This will give confidence in the modelling process and future hospital performance;</li> <li>• It was agreed that Planning Leads (Jim Crombie, Pat Kilpatrick and David Leese) to work together to identify a day/2 days when Clinical Leads and Planning Leads could meet with CHKS to share HRG Data. David Leese to link with Sam Gallaher on this.</li> </ul>	<p><b>CR</b></p> <p><b>KH</b></p> <p><b>JC/PK/ DL &amp; SG</b></p>
<b>5.</b>	<p><b>CLINICAL CODING UPDATE</b></p> <ul style="list-style-type: none"> <li>• Sam Gallaher noted that CHKS would meet with North and South Divisions again in mid-May to agree the critical next steps for improving clinical coding. An update will be provided to the next ASR Beds/Activity/Capacity Sub-Group meeting scheduled for Thursday 27<sup>th</sup> May 2004.</li> </ul>	<b>Sam G</b>
<b>6.</b>	<p><b>CLINICAL GOVERNANCE REPORTING</b></p> <ul style="list-style-type: none"> <li>• Sam Gallaher raised the critical importance of agreeing how the CHKS Analysis is introduced into Divisions for Clinical Governance purposes.</li> <li>• Sam noted that it is important that North and South Glasgow Divisions work with CHKS to agree how the analysis is introduced and how it will be used. Sam noted that he is now working with Divisions on this but this work needs to accelerate. Catriona Renfrew noted the importance of Divisions having robust corporate ownership of this analysis. Catriona agreed to write to Robert Calderwood and Tim Davison on this.</li> </ul>	<b>CR</b>
<b>7.</b>	<p><b>DATE AND TIME OF NEXT MEETING</b></p> <ul style="list-style-type: none"> <li>• The next meeting is scheduled for 5.00 p.m. on Thursday 27<sup>th</sup> May 2004. The meeting will take place in the Conference Room, Southern General Hospital.</li> </ul>	

	<p><b>REMINDER: The front door of the SGH Management Building closes at 5.00 p.m. Access can be gained via the side entrance.</b></p> <p><b>The code for this is 1325.</b></p>	
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