

YORKHILL DIVISION

Divisional Management Team

**Minutes of the ninth meeting of the Divisional Management Team held on
Friday 21st January 2005 at 12:30pm in the Conference Room, QMH.**

Present: Mrs S Kuenssberg, Chairman
Ms S Dick, General Manager, Clinical Board for Laboratories, Diagnostic Imaging and Radiology
Mrs L Fleming, Director of Corporate Planning
Dr A Ford, Chairman, Clinical Board for Medicine, Child Health and Psychiatry and Clinical Director of Medicine
Mrs L Hamilton, Head of Integrated Services
Mr J Hughan, General Manager, Estates
Mr M Jamieson, Medical Director
Mr D MacDonald, General Manager, Operations
Mr J Marshall, Planning Manager
Ms C McCalman, Local Health Council Representative
Mrs H Ostrycharz, Director of Human Resources
Dr J Peutrell, Clinical Director of Anaesthesia
Mrs E Stenhouse, General Manager, Clinical Board for Obstetrics and Neonatology
Mr J Wallace, Director of Pharmacy
Dr A Watt, Clinical Director for Diagnostic Imaging

In attendance: Ms M Dunn, Assistant Director of Finance
Mr J Mullen, Secretary to the DMT

PRELIMINARY BUSINESS

(a) Apologies for Absence

Apologies for absence were intimated on behalf of Dr J Beattie, Mr J Best, Prof. M Connor, Mr D Crawford, Mrs S Forsyth, Dr R Lindsay, Mr D MacDonald, Mr D Matheson, Miss I McKune, Ms P Mitchell, Mr J Redfern, Dr T Turner and Mrs G Wilson.

(b) Minutes for Approval

The minutes of the meeting of the Divisional Management Team, held on the 17th December 2004, were approved as an accurate record.

(c) Matters Arising from the Minutes of the Meeting held on 17th December 2004

(i) Pan-Glasgow Laboratories Review - Update

Ms Dick reported that the minutes of the last Steering Group meeting had not yet been issued, however, no new information was expected until a smaller, Core Group, which had met on 31st December, had reported. She also informed members that the Finance Group was awaiting staffing information to enable costings to be produced.

(ii) National Framework for the NHS in Scotland – Child Health

Mrs Fleming reported that a national seminar had been held at Dunblane on 12th January 2005 to consider the emerging recommendations of the National Framework for Service Change. She added that the final report would reflect the range of joint working arrangements in different areas and recognise workforce issues. She also reported that, as part of the process, a number of conferences for clinicians would be held at which participants would have the opportunity to debate and vote on the proposals in the report.

(iii) Pan-Glasgow Risk Management Strategy

Mrs Ostrycharz reported that no substantial issues had been raised with this document and it would be ratified by the NHSGG Board. She added that there might be further debate at a later stage about the split between clinical and non-clinical risk.

(iv) Serious Clinical Incident Investigation/De-briefing Policy

Mr Jamieson reported that there had been no feedback from Clinical Boards. He added that the policy would be presented to the Partnership Forum next month. It was agreed that, if there were no substantial changes required the policy would be ratified by the DMT.

(v) Divisional Nutrition Policy

Mr Jamieson reported that there had been a further change to the wording of this policy and that the references to “pregnant women” would be amended to “sick, pregnant women”. It was agreed that, if no further concerns were raised by the Clinical Boards, the policy would be approved.

1. STRATEGY AND PLANNING

(a) Implementing “Partnership for Care – The Next Steps” - consultation arrangements

Mrs Kuenssberg advised members that the consultation (Ref. 01/05/01) was scheduled to run until 14th February 2005 and asked members to ensure that all staff were aware of the consultation and had the opportunity to convey their views to NHSGG. Members noted that the Yorkhill Medical Staff Association would be responding formally to the consultation.

2. SERVICE DELIVERY / DEVELOPMENT

(a) Community Health Partnerships

Mrs Hamilton reported that she and Mrs Mercer at the NHSGG Board had been asked by the Child Health Strategy Group to examine a model of care for vulnerable children. She informed members that those services delivered in Child Development Centres (CDCs) fitted this model quite well and could be managed in CHPs, however, this may be more difficult for those services split between hospitals and CDCs.

Mrs Hamilton went on to provide members with an update on the development of CHPs in Greater Glasgow. She advised members that East Dunbartonshire Council planned to incorporate all Child & Family Social Work services in CHPs. The Head of Children’s Services would be a joint Council/NHS appointment. For legal reasons, the individual would be a Council employee but not necessarily a Social Worker. Other areas were not yet at this

advanced stage. Although there was unlikely to be significant variation in the type of services delivered in each area, Ms McCalman advised members that Social Work practice varied.

3. RESOURCES AND INFRASTRUCTURE

(a) Monthly Finance Report at Month 09

Ms Dunn reported that the Division had overspent by £0.153m at the end of December 2004, an improvement of £0.076m on the previous month due to increased income from ECMO and non-Scottish patients. She added that Service Level Agreements had still to be finalised with 9 NHS Boards.

(b) Capital Expenditure Report

Ms Dunn referred members to the Capital expenditure report (Ref. 01/05/02). Members noted that £0.5m had been allocated for new monitors for the HDU. Members also noted that NSD had agreed to provide funding for a Tandem Mass Spectrometer, although this was unlikely to be purchased until 2005/06.

4. HUMAN RESOURCE ISSUES

(a) Protection of Children (Scotland) Act 2003

Mrs Ostrycharz referred members to her summary of the key responsibilities for the Division arising from the Protection of Children (Scotland) Act 2003 (Ref. 01/05/03). She added that she was seeking confirmation that the Division would continue to seek Enhanced Disclosure for all staff. There was considerable discussion about the implications of the Act, and the new register to be created under the legislation, and it was agreed that staff would require further guidance. In the meantime, the DMT agreed to continue the policy of seeking Enhanced Disclosure for all staff.

(b) Agenda for Change - Implementation of Terms and Conditions of Service

Mrs Ostrycharz invited members to note the progress made on the implementation of the Terms and Conditions of Service for Agenda for Change (Ref. 01/05/04). She advised that members should alert HR managers to any non-standard terms and conditions of service. Following discussion, it was noted that medical staff and others not on Whitley contracts would have the 2 additional public holidays to which they were entitled added to their annual leave entitlement until a final agreement was reached. It was also noted that there were issues in relation to the reduction in pharmacists' hours and this was being monitored.

5. ANY OTHER COMPETENT BUSINESS

(a) Freedom of Information

Mr Marshall reported that only one formal request for information had been received by the Division. This related to individual prescribing practice and was considered, at this stage, to be exempt from disclosure under Data Protection legislation. It was noted that similar requests were being made nationally for information on individual practice and that, in the future, there may be a challenge to decisions to withhold this type of information.

6. DATE AND TIME OF NEXT MEETING

The next meeting would be held at 12:30pm on Friday 18th February 2005 in the Conference Room, QMH.

The Medical Director delivered the January Core Brief.