

NOT YET ENDORSED AS A CORRECT RECORD

PCDMIN2005/06

Minutes of a Meeting of the Divisional Management Team
held at 10.10 a.m. on
Thursday, 1st September 2005
in the Boardroom, Divisional Headquarters, Gartnavel Royal Hospital,
1055 Great Western Road, Glasgow

PRESENT:	Andrew Robertson John Bannon Rosslyn Crocket Councillor Bob Duncan Douglas Griffin Dr Iain Wallace	Chairperson Non-Executive Member Chief Executive Non-Executive Member Director of Finance Medical Director
IN ATTENDANCE:	Jane Arroll Sybil Canavan Terry Findlay Gerry Hope Carole Hunter Jill Paton	Director of Allied Health Professions Primary Care Personnel Manager Divisional General Manager, Primary Care Organisational Development Manager Lead Pharmacist, Glasgow Addiction Services Secretariat Officer, Corporate Services
BY INVITATION	Dr Barbara West	Secretary, Area Medical Committee GP Sub-Committee

Action

1. APOLOGIES

Apologies for absence were submitted on behalf of Robert Broadfoot (Director of Primary Dental Care), Eileen Burns (Divisional Nursing Advisory Committee), Andy Carter (Head of Personnel), Iona Colvin (General Manager, Addiction Services), John Dearden (General Manager, Corporate Services), Gale Leslie (Area Optometric Committee), Alistair Maclean (General Manager, Support Services), Juli McQueen (Head of Organisational Development and Training), Dr Mark Taylor (Vice Chairman, Divisional Psychiatric Advisory Committee), David Thomson (Director of Pharmacy) and Dr Linda Watt (Associate Medical Director).

2. WELCOME/ANNOUNCEMENTS

The Chairperson welcomed to the meeting Sybil Canavan attending on behalf of Andy Carter, Gerry Hope attending on behalf of Juli McQueen, and Carole

Hunter, attending to give the presentation at Minute 4, the Addictions Service Performance Report.

3. MINUTES

The Minutes of the meeting of the Divisional Management Team held on 30th June 2005 [MIN 2005/05] were approved as a correct record and signed by the Chairperson, subject to the deletion from the word "two" to "Gartnavel Royal" at Minute 11.

4. HOMELESSNESS STRATEGY

Jane Arroll, Director of Allied Health Professions gave a presentation on the Strategy for the Prevention and Alleviation of Homelessness in Glasgow. This work was being led by the Glasgow Homelessness Partnership, formed by NHS Greater Glasgow, Glasgow City Council, the Glasgow Homeless Network (voluntary organisations), and the Scottish Executive.

The closure of the large scale hostels and the redesign of city services to accommodate the needs of this client group and ensure that the need for such hostels did not arise in the future were the priorities for the partnership. This work had commenced with the closure of Robertson House, the first of three large scale hostels for men scheduled to close. Repeat homelessness had been reduced and additional support services had been put in place for the homeless. An essential furniture grant scheme was in place and significant improvements had been made to the turn around time for temporary furnished flats.

Families now comprised the main client group whereas in the past those with drug and alcohol problems had been most prevalent. Services had focussed on the drug and alcohol group in recent years which may have resulted in the reduction in their numbers.

Jane advised that an audit of clients with mental health problems would take place, looking at the clients circumstances six and twelve months after they left homeless accommodation.

NOTED

5. ADDICTIONS SERVICE PERFORMANCE REPORT

Carole Hunter, Lead Pharmacist, Glasgow Addiction Services, spoke to Paper 2005/059, the Addictions Service Performance Report. The Addictions Service aimed to ensure that services were delivered in an equitable manner across the City and provided individuals and their families with recognised points of access to the service. These services included specialist in-patient services, day hospital and out-patient services, and the methadone programme and community addiction teams. The Addictions Partnership was also responsible for the commissioning and contract management of all addiction services purchased by Glasgow City Council and the Greater Glasgow NHS Board. These services included residential services, the Drug Crisis Centre, Community

Rehabilitation Services, community support and carer's services.

Carole outlined the key achievements in 2004/05 as:

- the establishment of a Single Integrated Management Team for Glasgow Addiction Services;
- the establishment of all 9 Community Addiction Teams (CATs) under single management arrangements, with all staff trained in the use of single shared assessment;
- a 44% increase to 7,642 in the number of adults accessing treatment through Community Addiction Teams;
- 81% of new service users were seen within 21 days (compared to a national average of 42%);
- of the 7,528 people within the methadone programme, 5,532 are now being supported by CATs or other specialist services such as the Drug Court – 2,000 more than the previous year;
- 1,239 people were provided with pre-employment training, education or employment opportunities;
- Eriskay House, a new 15 bedded in-patient and partial hospitalisation service for North and East Glasgow, was established at Stobhill Hospital;
- a new Arrest and Referral Service was established in partnership with Strathclyde Police in the East End of Glasgow with 354 people making use of the service;
- 2 new residential services were tendered and awarded to the independent sector alongside 4 new community rehabilitation services and 2 community alcohol support services;
- the Archala residential service for young people with drug and alcohol related problems was established and became operational;
- a respite service for Grandparents was established.

Carole also outlined the challenges currently facing the service as:

- an increase in the number of individuals and families accessing the service;
- the need to consolidate growth and maintain the balance between alcohol and drug services and ensure efficient and effective care pathways between community and secondary services;
- the need to adapt services to meet the needs of service users, including adults and young people, children and carers from across Glasgow's communities;
- the need to balance the provision of services between the methadone programme and other services and increase the level of support to those in the programme, helping more individuals into further rehabilitation, training and employment opportunities;
- the development of secondary services to meet the needs of those with the most complex difficulties, co-existent mental health problems and complex addiction issues;
- re-balancing service provision between alcohol and drugs.

Discussion took place on the need to ensure that the activity of the CATs was captured alongside other services.

DECIDED/-

1. That the contents of the report be noted.
2. That a further Annual Report be provided in 2006.
3. That a further report be received on proposals for investment of the new funding provided by the Scottish Executive for treatment and care for drug misuse and tackling alcohol problems.
4. That arrangements be made to provide information on activity for inclusion in the Waiting Times Report.

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General
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6. LOCAL IMPLEMENTATION PLAN – MONITORING TO AUGUST 2005

Paper 2005/060, the Local Implementation Plan to August 2005 was considered by the Committee. Thus far, very little slippage had occurred.

In discussion it was agreed that this was a useful means of tracking progress and one which should be retained in the new structure.

DECIDED/-

That a copy of the report should be provided for discussion at the Performance Review Group.

Chairman

7. STAFF GOVERNANCE

Paper 2005/061 on staff governance issues, concentrating on those aspects that related to workforce data (including staff in post, overtime working, Working Time Regulation compliance, absence monitoring, recruitment activity, redeployment and pay modernisation) together with organisational development and training activity was received.

Sybil Canavan advised that some 35% of the non-medical/dental workforce had now put their names to the 438 job descriptions submitted for job matching. The Minister for Health had recently announced that he anticipated 100% of this group would have their name against a job description by December 2005 and there was some anxiety as to the achievability of this target, not least as some staff were unwilling to sign up to the process without the agreement of their Union.

Gerry Hope advised the meeting that a proposal on future arrangements for Organisational Development was expected from the Board in the next few days.

NOTED

8. WAITING TIMES – EXCEPTION REPORT

Dr Iain Wallace presented Paper 2005/062 on exception reporting against agreed waiting times for the period ending June 2005. Iain stressed that the exceptions reported here were the maximums rather than the average wait, and whilst the average wait would in many cases be more useful, such information would not be available until the process was fully electronic.

NOTED

9. DIVISIONAL FINANCIAL PLAN 2005/6

Douglas Griffin presented Paper 2005/063, the Divisional Financial Report to July 2005. Thus far, expenditure was slightly below that expected. The prescribing budget was very tight but was staying on track at the moment. Iain Wallace had written out to those involved in this work to thank them for their efforts and confirm that this work would continue.

Douglas advised that it would become apparent during October/November if the Division would have a residual cost savings challenge to meet.

10. PHARMACY PRACTICES COMMITTEE

The minutes of a meeting of the Pharmacy Practices Committee held on 18th August 2005 [Paper 2005/064] were noted.

11. RISK MANAGEMENT ADVISORY COMMITTEE

The Minutes of a meeting of the Risk Management Advisory Committee held on 5th July 2005 [Paper 2005/065] were noted.

12. CLINICAL GOVERNANCE COMMITTEE

The minutes of a meeting of the Clinical Governance Committee held on 18th August 2005 [Paper 2005/066] were noted.

13. NEXT MEETING

The next meeting of the DMT was noted as 9.00 a.m. on Thursday, 3rd November 2005.

14. CONFIDENTIAL ITEMS

DECIDED/-

That the following items be considered in private as they may contain

information which is exempt from disclosure under the Freedom of Information (Scotland) Act 2002.

15. REMUNERATION COMMITTEE

The Minutes of the meeting of the Remuneration Committee held on 30th June 2005 [Paper 2005/067] were noted.

16. REFERENCE COMMITTEE

The Minutes of the meeting of the Reference Committee held on 15th August 2005 [Paper 2005/068] were noted.

Attention was drawn to on-going concerns relating to certain practitioners as referred to in the Minutes.

17. ACCOUNTABILITY REVIEW

Andrew Robertson advised the meeting that the Accountability Review had gone extremely well and presented a very positive account of the health service in Glasgow.

NOTED

18. TRANSITION GROUP

Terry Findlay advised the meeting that a group had been set up to consider a number of issues arising from the Health Board restructure and the assimilation of some services which were currently the responsibility of Argyll and Clyde Health Board.

NOTED

The meeting ended at 11.50 a.m.