

GREATER GLASGOW AND CLYDE NHS BOARD

Minutes of the meeting of the

West Dunbartonshire Community Health Partnership

Held at 4.00pm on 23rd August 2006

Court Room, Clydebank Town Hall

PRESENT:

Rani Dhir (Chair)
Dr. Fiona Coulter
Cllr. Andy White

Keith Redpath (CHP Director)
Ross McCulloch
Selena Ross

Margaret Hastings
Betty McIntosh
Claire McGinley

IN ATTENDANCE:

Jeanne Middleton

Gordon Whitelaw (Minute)

ACTION
BY

1. APOLOGIES

Apologies were intimated on behalf of Dr. Alan McDevitt

2. MINUTES of meeting held on 21st June 2006 were agreed

3. MATTERS ARISING

The Chair advised the Committee that Dr. Mustafa Kapasi and Dr Barry Williams had been appointed to vacant Non Executive posts within NHS GG&C and that the vacancy for the 3rd "Clyde" area representative is being re-advertised.

4. CHAIRS REPORT

a) **Service Integration and Governance.**

The Chair indicated that she and the Director had met with senior representatives of West Dunbartonshire Council subsequent to the previous Committee meeting to discuss this issue.

It was agreed that the CHP Director and the Acting Director of Social Work will complete a mapping exercise of shared services and related governance issues

Director

The Chair advised that as a result of these discussions, she hoped she and Cllr White could present a common position to the NHS Board Seminar in October that will be considering the issues around CHP development.

b) **Transport.**

The Chair indicated that she and the Director had met with Strathclyde Passenger Executive (SPE) to discuss improvements to the limited local

transport links. The SPE are in communication with the Scottish Executive on this issue and the West Dumbarton locality contact was offered through the Public Partnership Forum. The Local Authority also plans to meet with the SPE and will reinforce the view that a significant improvement to local transport links is required.

c) **NHS Board – Accountability Review.**

The Chair advised the Committee that the Health Minister had the day before met with NHS GG&C to discuss the annual Performance Review. During the review sessions, he emphasised his expectation for health improvement and stressed the important role of CHPs as both drivers of change and deliverers of improvements.

d) **Alexandria Medical Centre.**

The Chair indicated that proposals for the replacement for Renfrew and Barrhead Health Centres had been announced. She confirmed that the Alexandria Medical Centre proposal had not meet criteria on financial value and reassured Committee of the NHS GG&C continuing commitment to the reprovision of Alexandria Medical Centre and would be writing to the Board Chairman on this matter.

5. DIRECTOR REPORT

a) **New Appointments.**

The Director outlined recent CHP appointments as detailed below:

- Soumen Sengupta has been appointed to the vacant post of Head of Planning and Health Improvement with effect from 1st October 2006.
- Gordon Whitelaw had been appointed as the CHP head of Administration effective from 1st July, 2006.
- David McCrae has been appointed to the role of CHP lead Nurse Adviser in addition to his current role as Head of Mental Health and Partnerships.
- Lead AHP role. Expressions of interest on this lead role have been invited which again is in addition to the post holders current role, outcomes of which are awaited and will be reported when confirmed.

b) **Alexandria Medical Centre.**

Following on from item 4(d) above, the Director referred to recent media reports in which GPs had expressed concern around the announcement of replacement facilities for Renfrew and Barrhead Health Centres but not for the Alexandria facility.

He described the nature of the previous speculative proposal by PMP and confirmed that their proposal had not meet the required value for money criteria which is essential within the approval process.

The Director confirmed that the reprovision of the Alexandria Medical centre remains the highest priority within the CHP and advised that the Project group leading the development process for the centre was being re-established under his direction and would report progress in due course.

6. CHP SELF ASSESSMENT TOOLKIT

There was submitted Report No. 06/10 by the Director in respect of The Audit Scotland Self Assessment Toolkit based on National guidance and acknowledged good practice.

The Director advised that he had completed this is an internal self assessment reflecting our organisational position at this time and confirmed that there is no requirement to submit this as a formal return, either within NHS GG&C or to Audit Scotland.

Discussion around its application within different organisational models concluded that since the overall guidance remained the benchmark, then various models may be considered within this assessment tool. Committee discussion considered performance management within the context of the requirement for improved Information Technology & Communication (ITC) systems.

After discussion, the Committee agreed to note the self assessment as being reflective of the developing position of the CHP and agreed that the self assessment exercise be repeated in Autumn 2007 to evidence where progress has been made.

7. CLINICAL GOVERNANCE

There was submitted Report No. 06/11 by the Joint Clinical Director in respect of the West Dunbartonshire CHP Clinical Governance Framework.

The Director advised that this paper had been fully discussed and endorsed by the Professional Executive Group (PEG). PEG membership and constitution was raised and discussion continued on staff partnership involvement within the PEG. It was concluded that the Staff Partnership Forum (SPF) would nominate their representative.

Since services are delivered and outcomes achieved over a range of health and social work services, it was also proposed the PEG should consider whether the Director of Social Work also becomes a full member of the PEG, decision on which to be remitted to the PEG for consideration.

PEG

The paper and the recommendations were noted by the Committee.

8. STAFF PARTNERSHIP FORUM

There was submitted and noted draft Minute of Staff Partnership Forum (SPF) meeting of 4th August 2006.

The Committee considered the SPF agenda to harmonise policies and procedures on which the Area Forum is considering the wider organisational context.

SPF

ACTION
BY

9. PUBLIC PARTNERSHIP FORUM

There was submitted and noted draft Minute of Public Partnership Forum (PPF) Meeting held on 9th August 2006. The Continence delivery service in Clydebank was raised during discussion on the draft minute. A more detailed response was requested and this will be arranged as soon as possible.

Director

10. FINANCE

There was submitted Report 06/12 by Head of Finance in respect of the CHP financial position as at end June. In summary, the overall allocation is some £187,000 under spent, £147,000 of which arose within the Lomond area.

It was noted that this did not at this stage represent an accurate reflection of the estimated end of year position and caution was being exercised until further financial projections had been developed.

Despite the underspend against initial budget, it was clear that on a recurring basis there was a very close match between budget and commitments with a very limited scope for any development except on a self financing basis.

It was agreed that future finance reports would provide a more accurate reflection of projected year end financial performance.

**Head of
Finance**

11. CHP DEVELOPMENT PLAN

There was submitted report 06/13 by Director in respect of the CHP Development Plan.

General amendments to improve the flow of the document were noted from the earlier draft.

The Development Plan identifies the CHP priorities and sets the context within the CHP and with other Partners. The Plan acknowledges planning guidance and is set within an evolving financial and organisational context. The use of terminology, abbreviations and sections that have a reference to Alexandria Medical Centre will be reviewed. The Committee endorsed this Development Plan as the basis for CHP general service direction.

Director

An update will be provided within 2006 and thanks were recorded to those officers who completed this significant document within a short period.

12. DATE OF NEXT MEETING:

4.00 PM on 11th October 2006 in Clydebank Town Hall, Court Room

Minutes of the meeting of the
West Dunbartonshire Community Health Partnership
Paper No – 06/68

Held at 4.00pm on 21 June 2006

Hartfield Clinic, Latta Street, Dumbarton

PRESENT:

Dr. Fiona Coulter
Cllr. Andy White
Claire McGinley

Rani Dhir (Chair)
Ross McCulloch
Selena Ross

Keith Redpath (CHP Director)
Dr. Alan McDevitt
Betty McIntosh

IN ATTENDANCE:

Annie Hair
Helen Ostrycharz

Bill Clark
Phil White

Lorna Fitzpatrick (Minute)
Jeanne Middleton

ACTION BY

1. APOLOGIES

Apologies were intimated on behalf of Margaret Hastings

2. MINUTES of meeting held on 19 April 2006 were agreed

3. MATTERS ARISING

1. Item 3 - Scheme of Establishment

The Committee considered the contents of letter dated 17 May 2006 from the Scottish Executive Health Department that confirmed the Minister's approval of the changes to the Scheme of Establishment for the Partnership.

The Committee also noted that the additional NHS Board Non Executive Director appointments to cover the Clyde area were still awaited.

4. CHP DRAFT DEVELOPMENT PLAN

There was submitted Report No. 06/05 by the Health Improvement Manager in respect of the draft Development Plan.

After discussion, the Committee agreed to note the content of the plan and the process for its development and agreed that the final Plan be submitted to the next meeting for consideration and approval.

Ross McCulloch asked that appreciation be recorded for the production of the document inside tight deadlines.

5. FINANCE

There was submitted Report No. 06/06 by the Head of Finance.

After discussion the Committee agreed (i) to note the report for its interest and (ii) that further detailed reports on both revenue and capital budgets be submitted to the Partnership Committee for consideration.

6. RETURNING 'CLYDE' TO FINANCIAL BALANCE

The Committee considered the contents of the Chief Executive's letter of 8 June 2006 in regard to the above matter and advising of the processes that he had put in place in this regard.

The Committee had a detailed discussion in respect to the various issues and to the extent of the recurring deficit for the former Health Board area and it was noted that the Director will provide regular updates on the development of a financial recovery plan, particularly in respect of any issues that are of relevance to the West Dunbartonshire area.

**Future
Agenda Item**

Councillor White commented that the full NHS Board had not yet had an opportunity to discuss the "Clyde" deficit in the short interim period since the Chief Executive's letter had been distributed but was concerned that, in developing the recovery plan, due account needed to be taken of previous financial allocations which had not always been to the benefit of the West Dunbartonshire area.

The Chair agreed that she would write to the Board Chairman in respect of these concerns.

Chair

7. CHILD PROTECTION INSPECTION

There was submitted Report No. 06/07 by the Head of Children's Services and the Committee noted the Plan for the Integrated Inspection of Child Protection arrangements in this area during late 2006.

After discussion the Committee agreed that it would receive a detailed report on the CHP evidence that will be submitted to the Inspection Team at their meeting on 29 November 2006.

8. STAFF SURVEY

There was submitted Report No. 06/08 by the Interim HR Lead detailing the initial analysis of the results of the 2006 National Staff Survey.

The Local Partnership Forum at its last meeting had agreed to undertake an investigation into the local results and the Committee agreed that these would be reported back to the Committee at its 11 October 2006 meeting.

**Helen
Ostrycharz**

9. ORGANISATIONAL DEVELOPMENT UPDATE

There was submitted Report No. 06/09 by the Interim OD Lead in which the Committee was asked to consider which aspects of the development process detailed in the report it wishes to pursue.

The NHS Board model is to have intermittent sessions on how the Committee sees its development continuing and after discussion the Committee agreed to the organisation of an initial half day seminar along the lines proposed within the report.

**Serena
Barnatt**

10. ITEMS FROM PUBLIC PARTNERSHIP FORUM

The Committee heard from the representatives of the Public Partnership Forum in respect of issues that had been raised at the Forum's last meeting as follows:

(i) Continence Delivery Service in Clydebank – the tabled letter from the Director confirmed that he has agreed to provide £3,500 as a one-off payment for this year with further investigations ongoing in respect of recurring funding.

(ii) Mental Health Services.

It was confirmed that all mental health services for the whole of West Dunbartonshire would be the subject of review as part of the development of a comprehensive strategy for mental health services in the area. While previous history was not to be ignored, it was clear that the CHP was looking to the future so as to ensure the availability of a comprehensive and equitable mental health service for the whole of the CHP area.

(iii) Public Access.

The Chair confirmed that the NHS Board at its next meeting is due to approve proposals to open all CHP Committee meetings to the public. On this basis, all future meetings of the CHP Committee will be open to the public to attend.

(iv) The Committee was also advised by the Director that he had, that day, received an invitation from the Scottish Health Council to a development event for Public Partnership Forums that was to be held in the Beardmore Hotel, Clydebank on 7 September 2006.

The Committee agreed to reserve four places for members of the Committee.

**11. DATE OF NEXT MEETING: 23 AUGUST 2006 – The Court Room,
Clydebank Town Hall**

GREATER GLASGOW AND CLYDE NHS BOARD

**Minutes of the meeting of the
West Dunbartonshire Community Health Partnership
Held at 4.00pm on 19 April 2006
Hartfield Clinic, Latta Street, Dumbarton**

PRESENT:	Rani Dhir (Chair)	Keith Redpath (CHP Director)
Dr. Fiona Coulter	Ross McCulloch	Muriel Robertson
Cllr. Martin Rooney	Selena Ross	Margaret Hastings
Claire McGinley	Betty McIntosh	Dr. Alan McDevitt (part meeting)
IN ATTENDANCE:	Chris McNeill	Lorna Fitzpatrick (Minute)

ACTION BY

1. APOLOGIES

Apologies were intimated on behalf of Cllr. White (represented by Cllr. Rooney).

2. WELCOME

The Chair referred to the previous informal discussion which was helpful and welcomed everyone to the meeting.

Cllr. White has proposed naming Cllr. Rooney as deputy and the Chair has agreed.

It was noted that Cathie Tumauth would be unable to sit on this group in future and that her place would be taken by Betty McIntosh.

3. COMMITTEE MEMBERSHIP AND SCHEME OF ESTABLISHMENT

There was submitted Report No. 06/01 by the Partnership Director in respect of the membership of the CHP Committee and the revisions to the Scheme of Establishment for the Partnership as a result of the dissolution of NHS Argyll and Clyde. After discussion the Committee agreed to note for its interests

1. the final proposed membership of the CHP Committee; and
2. the minor changes to the original Scheme of Establishment in terms of the services to be directly managed by the CHP.

Before concluding this item the Chair advised that as a result of the recent advert for three new Non-Executive Board members to represent the “Clyde” area she hoped that one of those members would be added to the membership of the CHP Committee in time for the next meeting.

4. STANDING ORDERS

There was submitted report number 06/02 in respect of the proposed final draft standing orders for the CHP Committee.

After discussion, the Committee agreed to endorse the final Draft Standing Orders as presented; (i) that in due course each member would notify to the Chair their appropriately-named deputy; and (ii) that all committee members and deputies would in due course receive a request for them to make any Declarations of Interest as required by Standing Orders.

It was also noted that the detailed information of CHP Committee members, deputies and interests would be available for public scrutiny on the NHS Board web site.

5. SCHEDULE OF MEETINGS

Standing orders require that a minimum of six meetings of the Committee must take place each year and the following dates were agreed. Each meeting would be held at 4.00pm at venues to be agreed:

- 21 June 2006
- 23 August 2006
- 11 October 2006
- 29 November 2006
- 24 January 2007
- 14 March 2007

6. CHP SERVICES AND STRUCTURES

The Director gave a brief presentation about the services provided by the CHP and associated budgets and also in respect of the main planning and cross-agency structures and processes. As a result of the presentation, the Committee subsequently discussed the following issues:

- Budget figures for the new NHS Board and the identification of “Clyde” elements;
- Hosting of services for Helensburgh and the Lochside;
- Mental health services;
- Prescribing budgets;
- Addictions services.

The Committee agreed that this had been a helpful introduction to some of the issues that will need to be addressed over the coming months.

7. COMMUNITY CARE PLANNING STRUCTURE

There was submitted report no. 06/03 by the Partnership Director in respect of the proposed revisions to the community care planning structure within West Dunbartonshire.

The Committee heard from Chris McNeill, Head of Community Care, particularly in respect of changes to the Older People's Strategy Group and in general amplification of the contents of the report.

After discussion, the Committee agreed to approve the proposed changes as detailed within the report for their interest.

8. NHS BOARD CORPORATE OBJECTIVES AND CHP DEVELOPMENT PLAN.

There was submitted report No. 06/04 in respect of the requirement to produce a CHP Development Plan for 2006/07 based on the overall corporate objectives set out by the NHS Board.

The Director advised that for this initial year, the process and by consequence, the product would be more limited in its expectations with the intention that energy should be concentrated on a more substantive process and product for 2007/08.

After discussion, the Committee noted the arrangements and agreed that the draft Plan be presented at the June meeting of the Committee.

9. NHS ARGYLL AND CLYDE INTEGRATION

At the last meeting of the Public Partnership Forum the Forum had asked its representatives on the CHP Committee to raise their concerns in respect of comments attributed to the NHS Board Chief Executive within a report to the NHS Board meeting on 21 February 2006 where it was stated that *"Finally, it is already clear that, in a number of key service areas current Argyll and Clyde residents have access to substantially lower levels of service than would be the case for the population served by NHS Greater Glasgow."*

The PPF had asked for an explanation of these comments, particularly in relation to budgets and staff morale.

For reference purposes a copy of the NHS Board Report had been circulated with the papers for the meeting.

The Chair thanked the PPF representatives for raising these points and offered reassurance that the intention was not to bring standards down but to raise them.

There are differences in services and there is a need to recognise that. Some initiatives are available in Glasgow where the same model has not been

adopted in Argyll and Clyde and *vice versa*. The role of the CHP will be initially to highlight where these differences exist and, in this respect, the Director hopes to report back to the CHP Committee in the Autumn once a full picture of the differences had been collated.

The Director recognised that there has also been an issue around staff morale and the CHP has tried to be sensitive around these issues, trying to engage with staff and providing stability and continuity. Focus now has to be on moving forward.

The PPF representatives agreed to feedback these comments to the next meeting of the forum.

10. APPOINTMENT OF VICE CHAIR

The Director seconded by Cllr. Rooney proposed Dr. Alan McDevitt for the position of Vice Chair. This was unanimously supported by all members of the committee and Dr McDevitt thanked the Committee and confirmed his willingness to accept.