

**NHS LANARKSHIRE
& NHS GREATER GLASGOW & CLYDE**

Paper No 07/8

**CHP SOUTH OPERATING MANAGEMENT
(PERFORMANCE MANAGEMENT) COMMITTEE**

**Note of a meeting held on Monday 13th November 2006 at 9.30 am in
The Meeting Room, Calder Ward, Udston Hospital.**

PRESENT:	Mrs Neena Mahal	Chair
	Mr H Stevenson	Executive Director, Social Work Resources, SLC
	Councillor J Handibode	NHS GG and Clyde
	Mrs M Nelson	Non Executive Director
	Mr A Lawrie	Director CHP South
	Mrs M Samson	Staff Partnership Representative
	Ms J Miller	Support Services Manager
	Ms F Leckie	Associate Director of Nursing
	Mr R Watts	Head of Planning
	Mrs R Hibbert	Head of HR
	Dr L Armitage	Consultant in Public Health Medicine
	Ms J Mouriki	Voluntary Sector Representative
	Mrs I Miller	Patient Representative
	Mr J Mitchell	Patient Representative
Dr S Mackie	Medical Director, Primary Care	
Mrs F Porter	Deputy Director of Finance	

In attendance: George Lindsay, Chief Pharmacist, Graeme Walsh, Patient Services Manager.

1 APOLOGIES

Apologies were received from Ian Ross.

2 MINUTES OF LAST MEETING

Accepted as an accurate record.

3 Matters arising:

The Chair asked Roy Watts to bring the Audit Scotland Self Assessment Tool to the January meeting for discussion.

Action: Roy Watts

Community Nursing Review

Agreed that a paper updating the committee on progress to date would be brought to a future meeting.

Action: Frances Leckie

4 DIRECTORS REPORT (previously circulated)

AL discussed the content of his report.

There was some discussion about the content of the proposed workshop for the Programme 2 (Primary Care and Long Term Conditions Strategy) which will take place on 22nd and 23rd November, in particular about the consultation process and the need to have appropriate patient representation on all Programme Boards or specific workstreams.

Action: Alan Lawrie

Following the OMC Away Day in October, 5 top priorities for the South CHP were identified as follows: (full report previously circulated)

- Picture of Health Implementation
- Develop a system for delivery of Clinical Governance/Clinical Effectiveness
- Create a Performance Management system
- Improve relations with Acute Division
- Produce locality based multi-agency community plans

Alan also reported that Neena Mahal and himself had met with representatives from the Public Partnership Forum to discuss their representation on the OMC. It was agreed that the Constitution only allows for 2 patient representatives and therefore this will be adhered to.

John Mitchell confirmed that Patient Representatives were now on Locality Clinical Forums but would also need to be involved with the Local Care Partnerships with Local Authorities once they are established.

The committee noted the Director's report.

5 Performance

5.1 Finance

Fiona Porter discussed the report which had been previously circulated.

The main issues are around the impact of Agenda for Change and the increased costs of the new childhood vaccine. The South CHP is currently showing an overall underspend of £84k.

Noted that the overall NHSL position has a higher overspend due to costs of vaccines and acute division theatre supplies.

Councillor Handibode asked about figures for Rutherglen and Cambuslang. FP advised that although some figures have been received, these are not yet reported on and further work is still to be done with NHSGG & C and will be in the January report.

Action: Fiona Porter and Alan Lawrie

Margaret Nelson asked about the budget for SLAs in Hairmyres and Red Deer and FP advised that historically no budget had been allocated against this but the CHP were still able to meet the costs.

Irene Miller asked if a simplified Finance Report could be made available to the PPF.

Action: Fiona Porter

The Chair asked for clarification on the overspend within the Out of Hours Service and FP advised that funding had been included in the Financial Plan for 07/08 and as such the situation would not arise again.

The Committee noted the report.

5.2 Sickness Targets

Ruth Hibbert advised that the second quarterly report would be submitted to the Human Resources Forum in November and will be available for the next OMC in January. Locality Reports had been prepared for the meeting based upon management information at locality level. The report included the actions taken by each locality to reduce the level of sickness absence.

RH asked the committee to note that the Clydesdale figure should read 6.4%.

It was also noted that future reports would include the split between short and long term absence and that future reports should include information from Rutherglen and Cambuslang.

RH explained the new sickness absence policy which was implemented during summer this year, and advised that due to technical problems with the IT system, figures used in reports were currently those collected within each locality, and therefore the September figures would be used as a benchmark.

It was agreed that the following issues should be included in future reports:

- Breakdown of staff grades to inform financial cost
- More information on "Hot Spots"

HS raised an issue pertaining to GPs supporting people to get back to work and Dr Mackie indicated that there were a number of policies/return to work initiatives and that she would discuss this with GPs and liaise with HS outwith the meeting.

Action: Shiona Mackie

The committee noted the report.

5.3 Performance Management Report

RW discussed the paper on Balanced Scorecard which was previously circulated. RW explained that Appendix 1 of the document did include information from Rutherglen and Cambuslang but this is not yet consistent with NHSL format therefore further work is still to be done.

Noted that the table now includes all the proxies agreed by the Corporate Management Team, however the framework for reporting on these is still being developed.

RW explained that the majority of the targets are NHSL and NHSGG & C level and that these now require to be cascaded to CHP and Locality level and proposed that the formal process of quarterly locality reports should start with the first quarter of the next calendar year.

There was a discussion around the IT system used by South Lanarkshire Council giving data zones and it was proposed that a demonstration be arranged for early next year.

M Nelson asked if information on Risk could also be included in future reports.

AL advised that a Performance Review Group has now been set up and chaired by Tim Davison, both AL and NM are members of this group.

The committee noted the work and accepted Appendix 1 as a working document and agreed the Balanced Scorecard Approach.

Mid Year Review

RW advised that a draft report on progress to date against the corporate objectives was currently being prepared and would be circulated when available.

Action: Roy Watts

Waiting Times Monitoring Report (previously circulated)

RW discussed the report which has some Rutherglen and Cambuslang data included but still requires more work.

Noted that overall figures have improved this month mainly due to improvements in collecting and reporting of data.

The committee noted the report.

6. Planning

6.1 Update on SL CHP Capital Developments (previously circulated)

AL gave a brief overview of each project and advised that the Locality General Managers are the project leads and specific questions about each project should be directed to them.

There was a short discussion about the Community Casualty Units and what services they would include. Further information will be provided when plans are further developed.

The committee noted the developments to date.

6.2 Pharmacy

George Lindsay gave a presentation on the new Pharmacy contract.

George discussed the proposals for Chronic medication services (eCMS) which will be a core component of the new Pharmaceutical Care Services Contract. Patients will register with the pharmacy of their choice and will receive long term prescriptions (e.g 6 - 12 months at a time) from their GPs, but will liaise with their pharmacist with regard to a clinically appropriate and convenient schedule for receiving their medicines up to the total amount prescribed. The process of obtaining the balance of medicines will also involve a clinical consultation with the pharmacist to assess issues such as:

- compliance
- efficacy
- adverse reactions.

This will therefore add clinical value to the process

Pharmacists will also be able to deal with minor illnesses and there was discussion around the need for training to ensure that Pharmacists were competent to deal with minor illness in the community, and the need for public education and awareness about what services pharmacists could now provide.

The committee thanked George for his presentation and agreed to invite Alistair Thorburn to a future meeting to discuss the Prescribing Action Plan in more detail.

6.3 Winter Plan

Dr Mackie advised that all plans have now been submitted to the SE and they have responded with their comments. NHSL plans have now been approved by NHSL Board and the SE.

7. Governance

7.1 Staff Partnership Forum Minutes and Health and Safety Minutes.

The committee noted receipt of the minutes.

7.2 South Lanarkshire PPF Minutes

The committee noted receipt of the minutes.

7.3 Ombudsman's Report Monklands

The committee noted receipt of this report

7.4 Complaints Quarterly Report (previously circulated)

Graeme Walsh, Patient Services Manager, discussed the content of the report and advised that "hosted" services should perhaps be reported separately instead of within the locality where they were hosted.

Noted that the Out of Hours service had performed poorly in terms of responses to complaints, but some systems have now been put in place to ensure that there is an improvement.

The committee noted the report and thanked Graeme for attending.

8. AOCB

There was no other competent business.

9. Date of Next Meeting

The Chair circulated dates for next year (see below) and asked that members note that the meeting is scheduled for 9.30 am until 12.30 pm.

Monday 22 nd January 2007	Boardroom, Calder Ward, Udston Hospital
Monday 19 th March 2007	Committee Room 1, Strathclyde Hospital
Monday 14 th May 2007	Boardroom, Calder Ward, Udston Hospital
Monday 9 th July 2007	Boardroom, Calder Ward, Udston Hospital
Monday 3 rd September 2007	Boardroom, Calder Ward, Udston Hospital
Monday 29 th October 2007	Boardroom, Calder Ward, Udston Hospital
Monday 10 th December 2007	Boardroom, Calder Ward, Udston Hospital