

Women and Children's Directorate

Clinical Advisory Board for the New Children's Hospital Outpatient Services Sub Group

Minutes of the meeting held on Tuesday 1 August, 2006 in the QMH Classroom 12:00 – 13:30

Attendee List:

Mrs Eleanor Stenhouse (Chair), Mrs Coral Brady, Ms Maureen Kinney (Minutes), Dr Joan Burns, Sister Lynn Docherty, Ms Diane Fung, Dr Paul Galea, Sister Aileen Gibson, Ms Marjorie Gillies, Mr Robert Greig, Mr Jim Harrigan, Dr Jean Herbison, Mrs Marilyn Horne, Mr Alastair Irwin, Mr Morgan Jamieson, Ms Caroline King, Ms Diane King, Sister Maureen Lilley, Mrs Catherine Martin, Dr Ian Ramage, Miss Heather Read, Mrs Lynne Robertson, Ms Val Sellars, Mrs Lesley Smith

Apologies: Ms Lesley Bedford, Dr Janet Gardner-Medwin, Mr Haythum Kubba, Sister Karen Prince, Ms Marie Valente, Ms Gillian Wilson

1. Apologies and Welcome

Mrs Stenhouse opened the meeting and welcomed all.

2. Minutes of the meeting of the 18th of July 2006

The minutes of last meeting were discussed. One change is noted to Page 1, Item 3; Clinical Psychology should read Psychiatry. There were no further amendments and the remainder of the minutes were accepted as an accurate record.

3. Matters arising:

- **Standardised Questionnaire**

Dr Burns sent copy of the Clinical Psychology Facilities Questionnaire to group. Miss Read requested a copy to be sent to her.

(Action – Mrs Brady)

- **AHP Activity**

Ms MacLean was not in attendance. Mrs Smith offered to try and gather relevant figures. Mrs Stenhouse will contact Mrs Gillian Wilson and request that if she is unable to attend meetings it would be helpful for her to nominate a suitable deputy.

(Action – Mrs Smith / Mrs Stenhouse)

- **Schiehallion Activity**

This data needs to be fed into the A&E returns through the A&E group. All data should be submitted to this group. At present all patients, both daycare and outpatient are seen in Schiehallion unit, as at present there is no suitable space in Outpatient department. The ideal would be all activity in one area, ie Ward/Daycare/OP.

Ms Diane King also state that this would be the preferred model for renal, also.

Mr Jamieson suggested a note of caution relating to individual specialty areas, stating that all rooms need to be utilised fully. The project team do not envisage having rooms lying empty.

4. Individual Feedback

Mrs Brady thanked everyone who had already submitted their written brief. The process is that once submitted, individual feedback would be sent to each specialty. Final versions must then be submitted back by the 7th of August. Mrs Brady would then merge all reports into one document (the OBS), and attempt to have a draft paper available no later than the 14th of August (it will be circulated at that stage, regardless of progress). It was re-iterated how important it was for the few remaining specialties that had not submitted, to have their reports in no later than the 3rd August. Anyone who had a personal issue with that was invited to contact Mrs Brady after the meeting.

5. Facilities for Young People

Members were directed towards a previously distributed paper on the subject. Mrs Gillies gave a helpful insight into facilities for young people that she had experienced in various other worldwide paediatric facilities, and that these should be considered for the new hospital, particularly for outpatients. In Perth they have a dedicated young person's outpatient department adjacent to the adolescent ward staffed by ward staff. This area was multifunctional (school, outpatient, play area)

It was queried how specialty clinical staff are able to efficiently balance their time (between a central outpatient clinic and an adolescent outpatient clinic). Mr Jamieson offered to table the idea at the forthcoming Clinical Advisory Group.

(Action: Mr Jamieson)

6. Interaction with Medical Illustration

Mr Irwin had sent a letter (previously circulated to members) to all new hospital sub-groups to highlight the need for consideration of Medical Illustration facilities. Two-thirds of all medical illustration activity is outpatient related. The Health Board are looking at Medical Illustration pan-Glasgow and no decision has been taken as yet to where the service would be situated. Mr Irwin did state that a photographic studio close to Outpatients would be advantageous with a space for photographers to work when not at clinics. A number of members wished it be recorded that they supported this view (Miss Read, Mr Greig, Mrs Smith, Dr Herbison, Dr Galea and Ms Sellars).

7. AOCB

Activity Calculations

Dr Burns indicated that the figures in their written brief do not accurately reflect the activity of the Outpatients in Psychiatry as the majority of activity is not on HISS. Mrs Horne reiterated that if the activity figures are not recorded on HISS or sent to her they cannot be reported. Mrs Stenhouse stated that a lot of the missed activity is logged as ward attenders as there is no space in outpatients at present to see these patients. These attenders are usually logged in a diary and no feedback is sent to Mrs Horne. Mrs Horne once again stated that accurate data must be reported.

Other activity not recorded is Nurse Specialist data and no Child Protection data. Dr Herbison asked what activity was required. It was requested that activity for the past year should be provided in written brief.

(Action – Dr Herbison/Catherine Martin)

Mrs Horne also stated that what she has recorded are the figures sent to Edinburgh and that it was late in the day to now to record retrospectively.

Drafting Process

Mrs Brady reiterated that if there were any concerns regarding drafting specialty reports then to contact her as soon as possible.

Mr Greig asked if there would be the opportunity to personally present your service or department to the design team as this would obviously give a much better picture of what happens.

Mr Jamieson explained that there will be different stages in the process. Initially there is the need to capture the activity/space required before we can put in our business case. Once the business case is submitted, the design team will work through 2007 looking at what is required for each specialty, so the key is to describe what you require. How your department works, may require a visit, but the architects will use the business case to come up with the design. The design team are aware of what's required and what legislation is in place for specific designs.

8. Date and time of the next meeting

The next meeting is scheduled for 12:00 – 13:30 on Tuesday 15th August 2006 in the QMH Classroom. Items for the agenda should be forwarded to Mrs Brady no later than Friday 11th August 2006.

MK/04.08.06