

ACUTE SERVICES COMMITTEE

Minute of the Acute Services Committee meeting held on Friday 5 September 2008 in Conference Room1, SRI

Present: Mr Campbell Christie, Non-Executive Member (*Chair*)
Dr Allan Bridges, Non-Executive Member
Dr Gareth Davies, Medical Director
Ms Margaret Duffy, Chief Operating Officer
Mr Simon Dryburgh, Assistant Director of Finance, Acute Services
Dr Karen Facey, Non-Executive Member
Mr Jonathan Procter, Director of Strategic Access and Capacity Planning
Ms Angela Wallace, Director of Nursing

In attendance: Mr Ian Aitken, General Manager, Medicine, Emergency Care & Rehabilitation
Mr Michael Fox, Head of Capacity Planning & Information Services
Mr Garry Kennedy, Information Manager, Capacity & Redesign
Mr David McPherson, Interim Director of Property & Strategic Projects
Dr Peter Murdoch, Associate Medical Director
Ms Alison Richmond-Ferns, Deputy Director, Human Resources
Mr Jim Sinclair, General Manager, Surgical, Clinical Facilities & Cancer Services
Ms Janett Sneddon, Co Chair, Acute Services Partnership Forum
Mrs Ann Duffy, Committee Administrator

PRESENTATION

The Committee received a presentation on Information & Capacity Planning from Mr Michael Fox and Mr Garry Kennedy.

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Mr Graeme Simmers, Ms Gillian Morton and Ms Maureen Goggins.

2. MINUTE OF THE ACUTE SERVICES COMMITTEE MEETING HELD ON 8 AUGUST 2008

The minute of the meeting held on 8 August 2008 was agreed as a correct record after amendment to Page 2, para 4.2 as follows: "The Committee noted the Performance Management Report and agreed that there should be further discussion to establish a more focused presentation for the Acute Services Committee."

3. MATTERS ARISING

3.1 Performance Management Report

The Committee received an update on the discussions about the Acute Services Performance Report from Ms Margaret Duffy, Chief Operating Officer.

Ms Duffy reported that after a preliminary discussion with Ms Elaine Vanhagen it had been agreed that the next Performance Management Report would be available to present at the Acute Services Committee meeting in November 2008.

The Committee noted the proposed date for the next Performance Management Report.

4. FINANCIAL AND PERFORMANCE ISSUES

4.1 Finance Report to end July 08

The Committee received the "Finance Report" from Mr Simon Dryburgh, Assistant Director of Finance.

Mr Dryburgh reported that there was a cumulative overspend of £317k for the period to July 2008, an adverse movement in the month since June of £79k. The main pressures in the Surgical Directorate are in nursing and also in non-pay costs, specifically drugs spend. In the Medical Directorate the main overspend is in Emergency Care, experiencing both pay and non-pay pressures. The Women and Children and Clinical Services Directorate is incurring exceptional Medical Locum costs and non-pay pressures in Clinical Chemistry and Haematology.

Transitional savings arrangements delivery to date has been on the basis of non-recurrent plans. There remains a requirement to address the requirement for recurrent savings plans.

Mr Dryburgh reported that there had been an overall reduction of £231k on Bank and Agency costs in comparison to the prior year, although the reduction in Medical Locums expenditure was being impacted by the need for locum cover in the Women and Children's Unit.

It was agreed that there is a need for the Committee to review the current year overspend regularly and to look at future savings and to understand the relationship between costs and activity for 2008/09 compared to the previous year. Following discussion, it was agreed that more detailed proposals would be brought to the next meeting of the Committee.

The Committee noted the Finance Report and the work required to support improving the financial position.

4.2 Waiting Times Highlight Report to end July 2008

The Committee received the "Waiting Times Highlight Report" presented by Mr Jonathan Procter, Director of Strategic Access & Capacity Planning.

Mr Procter reported that the delivery in relation to the key access targets for the period to end of June 2008 are now available to the public on the National Website. The performance data confirm that Forth Valley are meeting targets and holding their position well in relation to the Local Delivery Plan.

It was reported that with regards to the LDP position, the performance in relation to Out Patients and Diagnostics is on target with only a slight rise in the number of In-Patients in relation to trajectory. Mr Procter highlighted that a rise in the number of

outpatients in comparison to trajectory would be likely in the next 2 months as the effect of the summer holidays works through. Current indications are that the holiday impact would have worked through the system in the 3rd quarter with a return to trajectory.

Mr Procter advised of the capacity issues within MRI services and the implications for achieving the four week diagnostic target. A full capacity plan was being developed by the unit and various options being reviewed, including additional contract capacity being sought through the MRI service providers.

Due to the success of the national bowel screening programme, there has been a rise in the number of Endoscopy patients. This is putting some pressure on the diagnostic services. However, the cancer target of 95% was maintained through the months of January to March and there remains a significant focus on the management of these areas by the Surgical Unit team. Mr Procter highlighted that colleagues should be congratulated for the achievement of the Cancer Waiting Times target over the difficult winter period, the latest position in the public domain.

The Committee noted the Waiting Times Highlight Report.

4.3 Sickness/Absence Report

The Committee received the “Attendance Management Report” for the period to June 2008” from Ms Alison Richmond-Ferns, Deputy Director of Human Resources. Ms Richmond-Ferns also updated orally on the July position which had become available prior to the Committee meeting.

For the period to July 2008, the sickness/absence rates for NHS Forth Valley had increased by 0.05% to 5.4%. Within the Acute Services, the position was relatively favourable at 4.45% overall. The detailed rates by unit are set out below:

Women & Children’s and Clinical Services	4.34%
Surgical, Clinical Facilities and Cancer Services	4.76%
Medicine, Emergency Care and Rehabilitation	4.27%

Ms Richmond-Ferns confirmed that work continued across the system, focussing efforts towards achieving the 4% national target.

It was noted that CHP sickness/absence rates were higher than the Acute Sector at 6.45% and that there would be targeted activity in the relevant areas.

It was agreed that Ms Richmond-Ferns would present a shorter report at the October meeting, focussing on high level statistics and management interventions.

The Committee noted the Attendance Management Report.

4.4 Delayed Discharge

The Committee received the “Delayed Discharge” Report by Mr Ian Aitken, General Manager, Medicine, Emergency Care & Rehabilitation.

Mr Aitken reported that 2 of 3 targets were achieved in August. Reducing Delayed Discharges over 6 weeks continues to be a challenge with all 3 local authorities reporting delays over 6 weeks.

The key challenges in facilitating discharge include delays in patients making choices, particularly where family members are required to or wish to be involved. In addition to this, the lack of availability of first choice care homes have also been a factor. The importance of including this as a key item on the agenda of CHP Committees was discussed. It was agreed that Ms Duffy would raise this matter with CHP GMs.

The Committee noted the significance of the Delayed Discharge position.

5. ENSURING EFFECTIVE USE OF RESOURCES

5.1 Agenda for Change & KSF Update

The Committee received the “Agenda for Change, KSF Update” from Ms Alison Richmond-Ferns.

Ms Richmond-Ferns focused on the Knowledge and Skills Framework (KSF) current position. She advised that the national HEAT target was that all staff should have their KSF PDP in place by 31 March 2009. It was advised that improved roll out had been achieved between June and August and that NHS Forth Valley was now at 50% compliance with the target.

Ms Richmond-Ferns advised that, to date, this process had been a significant one for all local managers and their staff and that the intensity of this work would continue over the next 6 months. Managers are being supported in this process through the KSF Leads and use of the local monitoring tool.

It was advised that positive feedback on the 07/08 Pay Modernisation Benefits Delivery Plan had been received from the Scottish Government Workforce Department. Ms Richmond-Ferns also advised that the plan for 08/09 had recently been completed. Overall Ms Richmond-Ferns reported on good progress.

The Committee noted the Agenda for Change & KSF Update.

6. IMPROVING THE QUALITY OF PATIENT CARE

6.1 Forth Valley Complaints Performance Report

The Committee received the “Forth Valley Complaints’ Performance Report” from Ms Angela Wallace, Director of Nursing.

Ms Angela Wallace reported that the Acute Services performance had recovered in the month reported on following the e-mail challenges impact experienced in the June performance. It was predicted that July would see a response rate of 68% for Acute Services. Discussion followed on the ongoing development of the Complaints’ Performance Report.

The Committee noted the Forth Valley Complaints’ Performance Report.

6.2 Surgical Unit Clinical Governance Annual Report

The Committee received the “Surgical Unit Clinical Governance Annual Report” from Mr Jim Sinclair, General Manager Surgical, Clinical Facilities & Cancer Services.

It was confirmed that this one Annual Report had been brought to the meeting as an illustration of the clinical governance work being taken forward within units as a whole across the Acute Services. The report illustrated the full engagement of frontline teams and services within the unit.

There was a wide ranging discussion on the breadth of the work being carried out across the unit.

It was agreed that the report was very informative and helped to detail all steps taken to move forward clinical governance arrangements within units.

The Committee noted the Surgical Unit Governance Annual Report and the assurance this report gives to the Committee about the clinical governance work being undertaken.

7. MODERNISING SERVICES

7.1 New Hospital Project Director’s Report

The Committee received the “New Hospital Project Director’s Report”, presented by Mr David McPherson, Interim Director of Property and Strategic Projects.

Mr McPherson suggested that the recent visit by the NHS Board members to the new hospital had proved very informative and had allowed detailed questions to be answered in an informative way.

Mr McPherson confirmed that the construction of the hospital is on target and that all road works had been fully completed. He highlighted that the discussions about office accommodation had moved on significantly.

In terms of Serco, it was reported that the staff training audit had progressed well. Mr McPherson noted that robust systems were in place to allow staff the opportunity to raise any issues of concern.

The Committee noted the New Hospital Project Director’s report and that work was still on track to complete on time and to budget.

8 REPORT ON SUB COMMITTEE GROUPS

8.1 Draft Minute of the Acute Services Partnership Forum held on 22 July 2008

Janet Sneddon reported that some detailed issues had been raised by staff side concerning the proposed car parking arrangements at Falkirk District Royal Infirmary and Stirling Royal Infirmary. These were being taken forward by Mr McPherson.

The Committee noted the draft minute of the Acute Services Partnership Forum and the points raised.

9. ANY OTHER COMPETENT BUSINESS

Nil of Note

10. DATE OF NEXT MEETING

The next meeting will be held on 3rd October 2008 in the Board Room Falkirk District Royal Infirmary at 9:00am.