



	<p style="text-align: center;">ACUTE GOVERNANCE COMMITTEE Wednesday 18th September at 1400 hours in Boardroom, University Hospital Hairmyres</p> <p>Attendance: Dr A. Osborne, Non-Executive Director, Chair Ms. H. Knox, Director of Acute Services Mrs. J. Park, Director of Access Mrs. F. Dodd, Director of Nursing Mrs. M. Meek, Hospital Site Director, University Hospital Monklands Mr. Russell Coulthard, Hospital Site Director, University Hospital Hairmyres Mr. M. McLuskey, Interim Director of Finance Mrs. A. Campbell - HR Manager Acute Mr. S. Peebles, Hospital Site Director, University Hospital Wishaw Dr. J. Keaney, Director of Medical Services Ms. J. McColl, Deputy Director of Communications Mr. M. Fuller, Non-Executive Director Ms. M. Hunter, Partnership Representative Mr. D. McLean, Chair of North Public Partnership Forum Mr. D. Downie, Vice Chair of South H&SC Forum Mrs. F Anderson, Operational Support Manager</p> <p>In Attendance Item 4 – Mr. H BenYounes,</p> <p>Apologies: Councillor P. Kelly, Non-Executive Director Ms. L. Thomson, Non-Executive Director Mrs. M. Morris, Non-Executive Director</p>	
1.	<p>Welcome</p> <p>Dr Osborne welcomed everyone to the meeting and noted the apologies. Dr Osborne welcomed and introduced David Downie, Vice Chair of the South Health & Social Care Forum and Donald McLean, Chair of the North Public Partnership Forum to the committee.</p> <p>Dr Osborne noted Mrs Anne Lindsay’s and Mr Donald Masterton’s resignation to the committee and thanked them for their contribution to the Acute Governance Committee.</p>	

	Dr Osborne will write to Mrs Lindsay and Mr Masterton to thank them.	AO/FA
2.	<p>Risk Review</p> <p>Dr Osborne highlighted the significant pressures being experienced within the Acute Division in relation to Unscheduled Care, acknowledging the work ongoing regarding this. The committee appreciated the significant pressures and impact that this is having on staff and services. Unscheduled Care remains on the Acute Risk Register.</p> <p>The Committee noted that there were no immediate updates to the current risks in terms of controls in place or risk level and no urgent actions were noted to be undertaken.</p>	
3.	<p>Minutes of Acute Operating Management Committee Meeting Held on 24th July 2019</p> <p>The Acute Governance Committee accepted the minutes as an accurate log of the meeting held on 24th July 2019.</p> <p>The action log was reviewed.</p> <p>Mrs Dodd updated the committee following a meeting with Mrs Park, Dr Keaney and Ms Thomson, to provide assurance regarding induction for Medinet and agency staff. Mrs Dodd provided Mrs Thomson with an overview of the current processes, during which some areas for improvement were highlighted. Mrs Dodd has highlighted and actioned these with HR colleagues. Ms Dodd confirmed that Ms Thomson was satisfied and assured following discussion and this action has been closed.</p> <p>Mrs Park confirmed that the TTG Risk status was changed from Red to Amber. Mrs Park assured the committee that this risk will continue to be reviewed in keeping with NHS Lanarkshire's Risk Management Policy.</p> <p>Mrs Park reported that a Regional Meeting is scheduled to be held on 2nd October 2019 to discuss Interventional Radiology. The Committee were assured that Interventional Radiology remains on the Acute Risk Register, with appropriate mitigating controls in place. The risk will be reviewed in keeping with NHS Lanarkshire's Risk Management Policy. Dr Osborne requested that Mrs Park provide the committee with a verbal update following the Regional Meeting.</p>	JP

4.	<p>Specialist Interest Item</p> <p>General Surgery Mr Hakim BenYounes delivered a presentation, updating the Acute Governance Committee on the draft modelling and challenges associated with General Surgery.</p> <p>A copy of the presentation is embedded for information.</p>  <p>Presentation-Future of General Surgery</p> <p>The committee were assured by the planning processes and enquired about proposed timescales. Mr BenYounes advised that further data was being collated prior to a paper being finalised for submission to the Board.</p> <p>Following discussion, Heather Knox clearly informed the committee that there is absolutely no intention to removed surgical support from Emergency Departments.</p> <p>Mr BenYounes emphasised the benefits of developing a Centre of Excellence, noting the opportunities associated with the new Monklands.</p>	
5.	<p>Performance Overview, Risks and Strategic Agenda</p> <p>Ms Knox delivered a presentation on performance, which is embedded for information.</p>  <p>Overview Presentation 180919</p> <p>Ms Knox highlighted the key performance issues, noting deterioration of compliance with the 4 hour standard on all 3 sites. Heather advised that there has been an increase in GP referral and noted that the Out of Hours Services have been reduced to one site more regularly due to staffing challenges within Primary Care. Heather also shared data highlighting the increase in patients in delay. The committee discussed the aging population and frailty. The committee are assured that the Acute Division are working closely with H&SC colleagues and that a piece of Regional work has been commissioned to review overall changes in demand. Dr Keaney reported that alternative pathways e.g. for medical receiving are being explored.</p>	
6.	<p>Governance Sub Group Meetings</p> <p>The Committee broke into the following sub groups to seek assurance on improvement measures being taken:</p>	

	<p>Activity & Finance – Heather Knox, Judith Park, Russell Coulthard, Michael McLuskey, Michael Fuller and Duncan McLeod.</p> <p>People/Staff & Quality/Patient Safety/Clinical Governance – Ann Marie Campbell, Frances Dodd, John Keaney, Avril Osborne and David Downie.</p>	
7.	<p>Governance Sub Groups Feedback</p> <p>Activity & Finance – Ms Knox reported that discussion focused on unscheduled care challenges, including increased attendances, admissions and patients in delay. Unscheduled Care was highlighted as an area where performance has deteriorated to below Scottish average over recent weeks. The Committee was advised of the multiplicity of initiatives to address the pressures, but also recognised the need to review staffing resource and models in light of a potentially sustained increase in demand.</p> <p>People Staff & Quality/Patient Safety – Mrs Dodd reported that discussion focused on the need for a whole system approach and the pressures within the Division associated with increased attendances to the Emergency Departments. Mrs Dodd reiterated the pressures and the impact on staff resilience.</p>	
8.	<p>Risk Register</p> <p>The Acute Governance Committee approved the Acute Risk Register report, noting that this paper has been reviewed and endorsed by the Acute Divisional Management Team (DMT). The Committee are assured that risks are being reviewed in keeping with NHS Lanarkshire’s Risk Management Policy.</p> <p>Mrs Anderson reported technical issues with the current version of Datix, affecting the quality of the complaints data. It is anticipated that these issues will be resolved in a couple of months, following the implementation of Datix Web.</p>	
9.	<p>Media Report</p> <p>Mrs McColl provided the Acute Governance Committee with an update on the media coverage regarding the Acute Division for 1 July to 31 August 2019, as well as highlighting NHS Lanarkshire’s performance in complying with the Freedom of Information (FOI) Act 2020 for quarter 4 for 2018/19. Mrs McColl advised that there is an aspiration to improve the website, in an attempt to deflect FOIs.</p> <p>The committee noted the significant pressures on the services involved and the communications department due to the increased volume of FOIs.</p>	

	<p>The committee considered if it would be appropriate for the Communications Department to respond to FOIs and following discussion, were assured the staff with the appropriate skills work within the department and are best placed to undertake this work.</p>	
10.	<p>Site Performance Reports</p> <p>10.1 Monklands Performance Report Mrs Meek highlighted the 8% increase in attendances to the Emergency Department compared to August 2018. The impact this is having on staffing was acknowledged by the committee. Mrs Meek reported newly graduated nurses will be taking up posts earlier than expected and the site will manage the skill mix. Transport issues were discussed. The committee were assured when Mrs Dodd reported a meeting is arranged to discuss issues with ambulance service colleagues. The added pressure on the ambulance service related to the increase in emergency attendances was noted.</p> <p>The committee discussed the potential increased requirement of transport availability as Centres of Excellence develop.</p> <p>10.2 Wishaw Performance Report Mr Peebles echoed Mrs Meek's comments regarding increased attendances, pressures and challenges. Mr Peebles highlighted challenges associated with delayed discharges.</p> <p>10.3 Hairmyres Performance Report Mr Coulthard compared performance and attendances between August 2018 and August 2019. Mr Coulthard advised the committee of the vulnerability associated with gaps in acute medical staffing, recruitment has been unsuccessful but another round is planned, with more optimism.</p> <p>All 3 site directors reported concern regarding the impact the increased activity is having on workforce resilience. Mrs Dodd reported that attempts will continue to recruit registered nurses, but provided assurance, noting that where this is not possible, additional Clinical Support Workers will be recruited and will be trained appropriately.</p> <p>Mr Fuller enquired about patients being referred and receiving treatment for cataract procedures in the private sector. Mrs Park assured the committee that this has been agreed to allow specialists to treat chronic and complex conditions in house.</p>	
11.	<p>Items for Noting</p> <p>11.1 Human Resources & Workforce Report The committee noted the report.</p>	

	<p>11.2 Nursing/HAI Update The committee noted the report.</p> <p>11.3 Medical Staffing Report The committee noted the report.</p> <p>11.4 Waiting Times Report The committee noted the report.</p> <p>11.5 Unscheduled Care Report The committee noted the report.</p> <p>11.6 Finance Report The committee noted the report.</p> <p>11.7 Quality Assurance & Improvement Update The committee noted the report.</p> <p>11.8 Draft South JIB Minutes June 2018 The committee noted the minutes.</p>	
12.	<p>Risk Register</p> <p>No new risks were highlighted throughout the meeting, required urgent action.</p>	
13.	<p>AOCB</p> <p>13.1 Meeting Schedule 2020 The committee noted the schedule.</p> <p>13.2 Induction for Medinet Staff This was discussed under Item 3, when action log was reviewed.</p> <p>13.3 Complaints Reporting This was discussed under Item 8, when the Risk Register Report was discussed.</p> <p>Dr Osborne noted Brexit contingency planning is ongoing, as well as preparation for winter.</p>	
15.	<p>Date & Time of Next Meeting</p> <p>The next meeting of the Acute Governance Committee is scheduled to be held in the Boardroom, Kirklands Headquarters on Wednesday 20th November 2019 at 1400 hours.</p>	