

Lanarkshire NHS Board
Kirklands
Fallside Road
Bothwell
G71 8BB
Telephone: 01698 855500
www.nhslanarkshire.scot.nhs.uk

Meeting of Lanarkshire NHS Board
25th May 2022

SUBJECT: EXCEPTION REPORT FROM ACUTE GOVERNANCE
COMMITTEE, 5TH MAY 2022

1. PURPOSE

The Exception Report from the Acute Governance Committee is coming to the Lanarkshire NHS Board.

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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2. ROUTE TO THE LANARKSHIRE NHS BOARD

The Exception Report has been:

Prepared	<input type="checkbox"/>	Reviewed	<input checked="" type="checkbox"/>	Endorsed	<input checked="" type="checkbox"/>
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by the Chair of the Acute Governance Committee and Director of Acute Services.

3. SUMMARY OF KEY ISSUES

Feedback from Acute Governance Committee on 5th May 2022, highlighting the slight improvement in staffing, increased pressures at University Hospital Hairmyres, focus on patient safety, risk mitigation and staff well-being; past and present performance position regarding TTG recovery/remobilisation, clinical prioritisation, Outpatient, Unscheduled Care, capacity and patient flow. A presentation regarding finance was delivered. An update on the laboratory contract was delivered. All areas were analysed and assurance provided in relation to risk and mitigating controls being reviewed.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	AOP/RMP 5	<input checked="" type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive	<input type="checkbox"/>	Statutory requirement	<input type="checkbox"/>	AHF/local policy	<input type="checkbox"/>
Urgent operational issue	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	✓	Effective	✓	Person Centred	✓
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Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	✓
People are able to live well at home or in the community; (Person Centred)	✓
Everyone has a positive experience of healthcare; (Person Centred)	✓
Staff feel supported and engaged; (Effective)	✓
Healthcare is safe for every person, every time; (Safe)	✓
Best use is made of available resources. (Effective)	✓

6. MEASURES FOR IMPROVEMENT

The Committee are aware of targets.

7. FINANCIAL IMPLICATIONS

Acute Division financial performance in 2021-22 noted and financial risks going into 2022-23 discussed extensively.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

The Acute Governance Committee were assured that the Acute Risk Register is being reviewed and updated in keeping with NHS Lanarkshire's Risk Management Policy and a further report will be shared with the Committee in July 2022. Very High graded risks were highlighted to the Committee. The Committee noted that there is an ongoing piece of work in relation to risk management in conjunction with other Boards to ensure that in so far as possible, scrutiny takes place at Committees and reports are clearly linked to the risk register. Development sessions to take this work forward are planned in June and July 2022.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	✓	Effective partnerships	✓	Governance and accountability	✓
Use of resources	✓	Performance Management	✓	Equality	✓
Sustainability Management	✓		✓		

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

N/A

11. CONSULTATION AND ENGAGEMENT

N/A

12. ACTIONS FOR THE LANARKSHIRE NHS BOARD

The Lanarkshire NHS Board is asked to:

Approve	<input type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input checked="" type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

13. FURTHER INFORMATION

The Board will continue to receive Performance updates. For further information about any aspect of this paper, please contact:

Lesley McDonald

Ms Lesley McDonald
Chair of Acute Governance Committee

Mrs Judith Park
Director of Acute Services

5th May 2022

Acute Governance Committee

(Meeting on 5th May 2022)

Chair: Ms Lesley McDonald

Key Issues Considered

1. The Director of Acute Services updated the Committee Members regarding the covid situation and provided an overview on 4 hour ED compliance, ED attendances, occupancy rates, outpatient and elective waiting times, as well as very high graded risks.
2. The Committee noted that NHS Lanarkshire has been stood down from emergency footing by Scottish Government and that the Strategic Command structure has been paused. The Senior Leadership team will meet weekly to discuss Covid response and a separate service remobilisation group is also being convened to meet weekly.
3. The Acute Governance Committee acknowledged the importance of ongoing staff well-being support and the long term emotional impact on staff.
4. The Director of Acute Services provided an update on provisional timescales that improvement trajectories will need to be considered within, highlighting that these are being kept under review. The Committee acknowledged that these would be challenging.
5. A Finance presentation was delivered and the committee discussed financial governance, 2021/2022 financial performance and risks and challenges for 2022/2023.
6. An update regarding the Laboratory Managed Contract was provided.
7. The Committee discussed the Public awareness and lack of sympathy around current pressures on our acute hospitals and noted the actions being taken forward at a local level to help educate the public and to ease the pressure on our emergency departments to renew the promotion of the minor injury units prior to the summer and implementation of a redirection policy across the three emergency departments. It was recognised that the work required to support our redirection policy will take longer. The aim is to have this in place before we head into winter 2022/23.
8. The Acute Governance Committee were assured that the Risk Register continues to be reviewed and updated by Risk Owners and Risk Leads. The committee noted that review of the Acute Risk Register is partially complete, with an update expected at the committee meeting in July 2022. The committee noted the planned piece of work in relation to risk management in conjunction with other Boards to ensure that in so far as possible, scrutiny takes place at Committees and reports are clearly linked to the risk register. Development sessions to take this work forward are planned in June and July 2022.

Key Issues to Highlight

1. The ongoing pressures within the Acute Division from a capacity and flow perspective, notwithstanding the reduction in covid positive patients.
2. Ongoing work on Risk Management.
3. Communication challenges and actions being undertaken locally.

Any Decisions / Approvals taken to highlight

1. Regular Communications updates.

Any risks identified that need to be highlighted

The Acute Governance Committee noted the following very high risks;

1. Staff Well Being
2. Interventional Radiography
3. Radiology Staffing
4. Finance
5. Renal Dietetics – Reduction & Withdrawal of Services
6. Bed Capacity
7. General Surgery Emergency Service
8. Impact on diagnosis and treatment as services were stepped down during acute covid response
9. Treatment of clinical prioritised patients
10. Neonatal Service
11. Labs Managed Contract
12. TTG Recovery/Remobilisation
13. Unscheduled Care/Scheduled Urgent Care