ACUTE GOVERNANCE COMMITTEE Wednesday 23rd November 2022 at 1400 hours via Microsoft Teams

Attendance:

Ms. L McDonald, Non-Executive Director, Chair

Mrs. J. Park. Director of Acute Services

Dr. J. Keaney, Acute Director of Medical Services

Dr. L. Thomson, Non-Executive Director

Mr. S. Murdoch, Head of Finance, Acute Division

Mrs. S. Friel, Acute Director of Nursing

Mr. G. Simpson, Deputy Hospital Site Director, University Hospital Wishaw

Mr. S. Peebles, Hospital Site Director, University Hospital Monklands

Mrs. A. Campbell, Head of HR Employee Relations

Mr. D. Downie, South H&SC Forum Representative

Ms. M. Hunter, Partnership Representative

Mrs. S. White, Non-Executive Director

Mr. C. McKay, Communications Manager

Mrs. L. Mack, Cancer Services Service Manager

Mr. T. Mitchell, Management Secretary

Mrs. F. Anderson, Operational Support Manager

Apologies:

Mr. M. Hill, Board Chair

Mr. R Coulthard, Deputy Director of Acute Services/Director of Access

Mr. J. Duffy, Chair of North Public Partnership Forum

Mr. M. McLuskey, Deputy Finance Director

Mrs. C. Ritchie, Hospital Site Director, University Hospital Wishaw

Mrs. M. Meek, Hospital Site Director, University Hospital Hairmyres

Mr. J Muir. Non-Executive Director

Mr. A. Boyle, Non-Executive Director

1. Welcome

Ms. McDonald welcomed everyone to the meeting and noted apologies received.

2. Risk Review

The Committee noted the Acute Risk Register Report. Following enquiry from Ms. McDonald concerning the very high graded ophthalmology risks, Dr. Keaney provided assurance that the appropriate mitigating controls are in place. Dr. Keaney informed that Committee that the opportunity to have screening tests carried out in the community is being explored.

Dr. Keaney assured the committee that despite the GI bleeding risk being reinstated, incidents are low.

The Committee were assured that the risks expressed and quantified within the Acute Divisional Risk Register have been subject to discussion and review regularly in a number of forums and are subject to improved scrutiny.

The Committee noted the current challenges with General Surgical Services in Lanarkshire and the 3 stage approach to addressing these, as outlined in the briefing paper. Mrs. Park provided an overview, assuring the committee of actions being taken to overcome challenges.

The Committee acknowledged the considerable effort that has been made to date, but also the risk that remains to this service if the establishment cannot be maintained and training accreditation is lost. It was agreed that General Surgery should remain as a standing item on future agendas.

3. **3.1 Minutes and Action Log of Acute Governance Committee Meeting Held on 21st September 2022**

The Committee agreed that the minutes from the meeting held on 21st September 2022 reflected the meeting accurately. The Committee noted the action log.

4. Performance Overview, Risks and Strategic Agenda

Mrs. Park provided the Acute Governance Committee members with an update, highlighting the variation in ED attendances across the 3 Acute sites and the ongoing staffing challenges. Mrs. Park shared data on past and present performance position regarding TTG, recovery/remobilisation, clinical prioritisation, Outpatient, Unscheduled Care, capacity and patient flow.

Mrs. Park assured the Committee that the financial position continues to be scruitinsed by the Divisional Management Team and highlighted concerns about the current position. Mr. Murdoch reported a £14.565M overspent and pressures associated with medical and nurse staffing. Mrs. Friel updated the Committee on the work being undertaken regarding staffing levels and highlighted workforce challenges associated with nursing gaps across the system. Mrs. Park reported a financial overspend driven by agency spend and assured the Committee that actions are being taken to mitigate risks to provide a safe environment for patients.

Following an enquiry from Mrs. White. Mrs. Friel and Mrs. Park advised that there have been significant occurrences when staff have been stressed and distressed. The Committee discussed the extremely high occupancy rates, which have been sustained for a period of time. Mrs. Park assured the Committee that the CMT have plans to focus on this and a whole system approach is being taken with immediate actions in an attempt to improve the situation.

5. **Special Interest Item**

Cancer Services Update

Mrs. Mack shared a presentation summarizing the challenges and opportunities within Cancer Services in NHS Lanarkshire. Mrs. Mack reported a significant increase in urgent suspicion on cancer referral.

The Committee noted the challenges associated with diagnostic workforce.

Mrs. Mack assured the Committee that a more sustainable 31 day pathway performance is being observed.

The Committee were assured that clear aims & purpose with good audit and safety measures are in place.

Ms. McDonald thanked Mrs. Mack for providing such a comprehensive presentation and requested that Mrs. Anderson arrange for the Committee to receive a further update in the future.

LM/ FA

6 & 7 Governance Sub Groups Meetings

Following discussion regarding the current pressures, the Committee agreed not to split into breakout groups, but to receive information from the Hospital Site Directors (HSDs).

Mr. Simpson provided an overview and highlighted that focused work is underway with the University Hospital Wishaw (UHW) Emergency Department improvement agenda and priorities have been identified and capital plans to expand the ED footprint. Mrs. Park advised the committee that UHW remain out with their escalation protocol and the challenges associated with this were discussed. Following enquiry, Mr. Simpson reported that the initial reconfiguration work under taken has received positive feedback from the medical staff and that the building work is scheduled to commence in January 2023. Mrs Park assured the committee that NHS Lanarkshire are engaging with health care planners.

Mr. Peebles reported that University Hospital Monklands (UHM) continues to face challenges in achieving the ED 4hr waiting time standard. The site continues to have an increased length of stay and increased numbers of patients being moved out of speciality to support admission demands. A number of priorities have been identified for initial improvement work as part of the site unscheduled care plan with a focus on the 5 key priorities outlined by the operational and clinical teams. These include, downstream ward processes and discharge planning, and review of current REACT streaming process of well ambulant patients.

	Mrs. Park reported on behalf of University Hospital Hairmyres (UHH), reporting the ongoing challenges associated with Flow and delayed discharges. Mrs. Park assured the committee that Mrs. Meek would provide further updated regarding the very high graded Ophthalmology risks at the next Acute Governance Committee in March 2023. Following discussion regarding CSW staffing shortages, Mrs. Friel assured the Committee that an action plan is being developed through the Welfare Steering Group.	MM
8.	Labs Managed Service Contract	
	The Committee noted the report, which provided a general update to meet the responsibilities of the Acute Governance Committee as per Labs MSC programme governance.	
	Mrs. Park highlighted that Bidders may ask clarification questions based on the procurement documents published. The deadline for such questions is 6 January 2023. To date over 400 clarification questions have been received. Legal correspondence was received late October 2022 and whilst NHS Lanarkshire do not consider there was merit in the points raised, an extension of time for bid responses was provided to allow bidders additional time to consider responses to clarification questions and develop well-considered bids. The deadline for bid submissions is now mid-January 2023.	
	Mrs. Park assured the Committee that the service continues to be delivered and there are no significant concerns to raise at this point with regard to performance.	
9.	Communications Report	
	Mr. McKay shared a report informing the Committee of the proposed changes to the minor injury units.	
	The Committee were assured that a new whole system urgent and unscheduled care communications group has been established and this group is accountable to Unscheduled Care Programme Steering Group.	
10.	Items for Noting	
10.1	Nursing/HAI Update The Committee noted the report.	
10.2	Quality Assurance & Improvement Report The Committee noted the report.	
10.3	Waiting Times The Committee noted the report.	

10.4		
	Unscheduled Care	
	The Committee noted the report.	
10.5	Hairmyres Performance Report	
	The Committee noted the report.	
10.6	Monklands Performance Report	
	The Committee noted the report.	
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10.7	Wishaw Performance Report	
10.7	The Committee noted the report.	
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10.8	Einanas Danaut	
10.8	Finance Report	
	The Committee noted the report.	
10.9	Human Resources & Workforce Report	
	The Committee noted the report.	
10.10	South IJB Minutes	
	The Committee noted that the minutes will not be available until	
	2023.	
10.11	North IJB Minutes	
	The Committee noted the report.	
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11.	Risk Register	
	The committee did not identify any new risks and no immediate	
	actions are required to be taken.	
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