

REPORT TO LOCAL AREA PARTNERSHIP

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Subject: Review of A & E Services in Lanarkshire
Date of Report: 30th January 2008

1. INTRODUCTION

This report is provided to the Coatbridge Local Area Partnership and summarises the recommendation of NHS Lanarkshire in respect of A & E services within Lanarkshire. The recommendation is made formally to the Cabinet Secretary to allow her to make a decision on this issue during February 08.

2. SUMMARY OF RECOMMENDATIONS

At its meeting today (30th January 2008), the Board of NHS Lanarkshire concluded the review of accident and emergency services.

Board members unanimously agreed to submit a recommendation to the Cabinet Secretary for Health and Well-being for the retention of existing emergency care services at Monklands Hospital, subject to some service changes (detailed below), and for there to be no significant change to the current configuration of emergency services within NHS Lanarkshire.

1. That there should be no significant change to the current configuration of emergency services within NHS Lanarkshire subject to the following changes:

- Developing a Primary PCI (Percutaneous Coronary Intervention) service for NHS Lanarkshire at Hairmyres Hospital in tandem with the planning of services with other West of Scotland Boards;
- Concentrating haematology inpatient services at the Lanarkshire Cancer Centre at Monklands hospital when it is developed;
- Redesigning clinical specialities to ensure that the Board can generate the required improved efficiency to deliver the 18 week RTT (Referral to Treatment) target by 2011. This will include early consideration of how best to organise orthopaedic and trauma services;

- Establishing an Emergency Response Centre as described in ‘Better Health, Better Care’ along with the support of other partnership agencies.
2. That NHS Lanarkshire receive the full resources recommended by the NRAC (National Resources Allocation Committee) Report, which are essential to provide the additional revenue resources required to support the Board’s top priorities for capital investment in primary care, mental health and learning disabilities.

In agreeing these recommendations, the Board has asked the Cabinet Secretary to recognise that two key issues remain to be addressed. These were:

- That NHS Lanarkshire requires support by NHS Education Scotland (NES) in its attempt to recruit and retain a sustainable medical workforce including the resolution of the specific issues associated with the Board’s reliance of fixed term specialist training posts.
- That a business case is now required to ensure that NHS Lanarkshire secures the appropriate mix of revenue and capital funding for the upgrading of Monklands Hospital recognising that this will be undertaken over a longer period than originally envisaged.

3. COMMENTS FROM NHSL CHAIRMAN KEN CORSAR

“The review of A & E services took place following the Cabinet Secretary’s decision in June 2007 to retain A & E services at all three acute hospitals in Lanarkshire.

“Since June 2007 an enormous amount of work has taken place with clinical and managerial staff to consider how services could be configured to meet the Cabinet Secretary’s decision. I personally would like to commend the high quality of work that staff have put in to this review. The fact that NHS Lanarkshire has managed to meet the challenging waiting times and cancer targets during this intensive review period is testament to the commitment of all our staff.

“We are committed to delivering the Cabinet Secretary’s request to provide three Accident and Emergency Departments in Lanarkshire. The Board’s recommendation will now be submitted to the Cabinet Secretary for approval and we expect to hear the outcome during February.

“While this concludes the review of accident and emergency services, the Board will now require to give consideration to its future investment programme. The Board previously approved a programme of significant investment in services for primary care, mental health and learning disabilities and remains committed to implementing as much of this as possible. NHS Lanarkshire's financial allocation will not be known until February and once

the allocation has been clarified the Board will require to prioritise its investment programme.”

For further information on the A & E Review and the process that was undertaken please refer to the Board Papers on NHS Lanarkshire’s website: <http://www.nhslanarkshire.co.uk/Board+Papers+and+Meeting+Dates/January+2008.htm>.

4. CONCLUSION

The report is provided for information only.