

NHS Lanarkshire Board
ANNUAL REPORT
AND ACCOUNTS 2008/09

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Chairman's foreword

“THIS has been an exciting year for NHS Lanarkshire with new services and buildings adding to the high standard of care we already provide.

One of the highlights of 2008/09 was without the doubt the official opening of the optimal reperfusion service at Hairmyres Hospital. This new West of Scotland service is providing life-saving and life-changing treatment for some heart attack patients.

The service was officially opened by the Princess Royal in February and staff and patients lined Hairmyres corridors to greet her.

We also opened the new Bellshill Community Health Clinic to patients which provides excellent new facilities for the local community and work continues apace on several other new buildings and facilities.

Staff have continued to work incredibly hard to ensure we have met and sustained our waiting time guarantees. Our cancer performance continues to improve with more and more patients being seen within 62 days of an urgent referral.

We have also seen waiting times in accident and emergency reduce and be maintained across all three of NHS Lanarkshire's acute hospitals.

We have also made great progress in improving existing services for patients through the patient experience programme and the LEAN programme.

Both of these programmes will be further rolled out in the coming years and will continue to deliver service improvements across Lanarkshire.

Staff have worked hard also to reduce the incidence of healthcare associated infection.

Key to all decisions and initiatives within Lanarkshire is our shared working with staff, partnership, the Public Partnership Forums and our local authority colleagues - all of which means we are well-placed to tackle health inequalities and improve the health of the people of Lanarkshire in coming years.”

Ken Corsar

Chairman NHS Lanarkshire

Princess Royal opens new service for heart patients

HAIRMYRES Hospital became one of two centres in the West of Scotland to provide a new specialised service for heart patients.

On 18 February 2009 HRH The Princess Royal visited the East Kilbride hospital to see first hand the optimal reperfusion service, commonly known as primary angioplasty or PPCI (Primary Percutaneous Coronary Intervention).

This service means patients having a heart attack due to a blocked artery will receive a procedure to unblock the artery within 90 minutes of their diagnosis.

During the visit Princess Anne met with staff, was provided with a demonstration of the optimal reperfusion service and witnessed a live procedure being carried out.

Unveiling a plaque commemorating the start of the new service, she said: "While it is the technology that does the actual job, it is the management of the service and the work that goes on behind the scenes which make sure the technology is used to its fullest extent.

"It's nice to have the technology and it is nice to have the specialists but it is even better when you are able to reach so many of the people who need this service most."

Dr Barry Vallance, NHS Lanarkshire's divisional medical director and consultant cardiologist said: "This is a fantastic service for patients and the clinical benefits are undeniable.

"We are providing a consultant led 24 hour, seven day a week service so that no matter when a patient takes ill, treatment will be available.

"We have a dedicated team of experts working in Hairmyres and at our sister provider at the Golden Jubilee National Hospital providing care for patients across the West of Scotland.

"There is world-wide recognition of the success and patient benefits that the optimal reperfusion service with primary angioplasty can bring and I am delighted that we can now offer this to our patients."

- ◆ Hairmyres Hospital and the Golden Jubilee National Hospital in Clydebank jointly host the specialist service for heart attack patients in the West of Scotland.
- ◆ The service began at Hairmyres on 1 November 2008 for all Lanarkshire patients and is now fully operational providing a service to Lanarkshire, Ayrshire and Arran and some areas of South Glasgow.
- ◆ The Golden Jubilee serves Glasgow and Clyde, Argyle and Bute, Dumfries and Galloway and Forth Valley.
- ◆ Patients are brought straight to the specialist centre for treatment to reopen the blocked artery using balloon angioplasty. This involves threading a long, thin balloon through the artery and inflating it to clear any obstruction and leaving in place a stent, which is a small piece of metal scaffolding, to hold the artery open.

Annual Review

THE Minister for Public Health and Sport Shona Robison held the annual review of NHS Lanarkshire on 20 October 2009.

In addition to meeting with the Area Partnership Forum, the Area Clinical Forum and patients, Ms Robison also visited the new Douglas Street Community Health Clinic.

Following the annual review meeting, the Minister highlighted, in a letter to chairman Ken Corsar, a number of areas which demonstrated good practice.

She praised the Board for their progress made on the Action Points agreed in the 2008 Annual Review.

Ms Robison wrote: "I congratulated the Board on the progress it has made in addressing the action points, achieving financial balance and delivering on service developments.

"I was particularly pleased to note the progress NHS Lanarkshire has made in the number of smokers successfully quitting at four weeks and that two thirds of those successful are from the most deprived communities in Lanarkshire."

Ms Robison continued: "I took the opportunity to thank staff for their efforts on pandemic flu.

"I also highlighted the contribution from Tim Davison, chief executive, to support NHS Scotland's work on a number of national initiatives."

The Board were also commended for improving health and reducing inequalities and she highlighted the stop smoking service.

Ms Robison wrote: "The pan-Lanarkshire Stop Smoking Service has placed special emphasis on the most deprived communities in Lanarkshire and has had considerable success on smoking cessation in those communities.

"I commended the Board for the number of smokers quitting at four weeks which was ahead of plan in March 2009."

The Minister for Public Health and Sport also praised NHS Lanarkshire for meeting all the key waiting time targets in 2008/09 and wrote: "I am grateful for the efforts of all staff in securing these."

Ms Robison commended NHS Lanarkshire's financial performance and wrote: "I was pleased that the Board had met all three financial targets and the two per cent efficient government target for 2008/09."

The Minister concluded her letter by complimenting the Lanarkshire NHS Board, and all staff, for their efforts in 2008/09.

Ms Robison wrote: "NHS Lanarkshire is working hard to deliver against set targets and I am confident the Board is well prepared to tackle the challenges ahead."

Annual Review Key Action Points

DURING the annual review the Minister for Public Health and Sport highlighted a number of action points for NHS Lanarkshire to focus on in the coming year.

These included:

- ◆ The Board must continue to work to achieve in-year and recurring financial balance, and maintain regular contact with Scottish Government Health Directorates (SGHD).
- ◆ The Board should regularly update SGHD on efforts to maintain the downward momentum in sickness absence rates.
- ◆ Continue to deliver robust arrangements for controlling healthcare associated infection (HAI).
- ◆ Sustain progress in meeting the targets around mental health services.
- ◆ Continue to work towards a 'whole journey' maximum waiting time of 18 weeks from GP referral to receiving treatment.
- ◆ Keep us informed of the progress of your capital investment projects.
- ◆ The Board should provide regular updates on the work of the anti-microbial management team.

People's health in Lanarkshire - continuing to improve

PEOPLE'S health in Lanarkshire is continuing to improve - but increasing unemployment, an aging population and continued inequalities are among the challenges the NHS must overcome for this to continue.

These are some of the key issues highlighted by NHS Lanarkshire's director of public health Dr Harpreet Kohli in his annual report for 2008/09.

Harpreet said: "Life expectancy in Lanarkshire has increased by around two years over the last decade for both men and women.

"However, men in south Lanarkshire live 1.4 years longer, and women live 1.1 years longer, than those in the north."

Evidence suggests unemployment results in poorer health.

As the rate of unemployment in Lanarkshire has increased markedly over the last year, the impact this may have on people's health, warns the report, must be considered.

Coronary heart disease (CHD) and cancer are the two main causes of death in Lanarkshire, particularly in people aged less than 75 years.

Harpreet said: "While the overall trend in deaths from these two causes is downward, the rates in Lanarkshire are still higher than the Scottish average. By reducing rates of smoking, NHS Lanarkshire's Stop Smoking Service and community pharmacists, which offer group or one-to-one support in addition to free nicotine replacement therapy (NRT), are contributing to reducing CHD. This service is also vital in reducing mortality from lung, head and neck and oesophageal cancer."

The national pilot Keep Well project - which identifies people with, or at risk of developing, cardiovascular disease and offering appropriate treatment - has now been established across a number of localities in Lanarkshire.

The predicted continuing aging of Lanarkshire's population is also highlighted in the report.

Between 2008 and 2018 it is estimated Lanarkshire's population aged 85 and over will increase by around 60 per cent - compared to a three per cent rise in the whole population.

Harpreet said: "Various measures are in place to promote and protect the health and wellbeing of older people, including the promotion of good nutrition and physical activity, immunisations against influenza and pneumococcal pneumonia, and initiatives to help with maintaining social and mental activity. The majority of older people live at home and prefer to do so, and collaboration between the NHS and social work has improved over the years in order to make this possible for an increasing number of people."

The numbers of overweight children in 2008 remained similar to the 2007 figures, of 14.8 per cent of all primary one pupils within NHS Lanarkshire. It is estimated there are about 16,000 overweight five to 15-year-olds.

Harpreet said: "NHS Lanarkshire's Fit for Fun programme for primary school pupils is one of the initiatives launched to improve children's health and it encourages children to understand the benefits of healthy eating and an active lifestyle through fun games and activities."

The Annual Report of the Director of Public Health 2008/09 provides more information and analysis on all these topics and others. Copies of the full report are available online at

www.nhslanarkshire.org.uk/publications

or by writing to:

Dr Harpreet Kohli
Director of Public Health
14 Beckford Street, Hamilton, ML3 0TA

LEAN efficiency initiative

PATIENTS are waiting less time for their surgery within NHS Lanarkshire's three acute hospitals thanks to a new efficiency initiative.

LEAN, a programme which aims to eliminate waste in working practices and processes, was introduced by NHS Lanarkshire across all its theatres.

The first stage of this programme was completed at Wishaw General in August 2008 with some impressive results.

These included the average waiting time for a patient in theatre, from admission to procedure, being reduced by almost an hour and 20 minutes.

Rosemary Lyness, director of acute services, said: "Staff have been really enthusiastic and the changes they have suggested have made a real impact in improving our efficiency and as a result the patient's experience."

The LEAN programme uses a technique called Kaizen - which means "to change for the good of all" in Japanese. Having received training in LEAN methodologies, the staff identified a number of areas where they could make quick, simple changes to deliver rapid improvements in their department. They also identified areas for improvement that will be worked on over time to ensure ongoing and continuous improvement.

Lanarkshire's first Kaizen event began in July 2008 with a week-long event where staff worked in teams to cover five areas identified for improvement.

These areas were - admissions, changeover, recovery, performance and planning and environment.

Changes implemented include:

- ♦ Two admission times, compared to only one - reduces the times patients need to wait before their operation and reduces congestion in the wards.

- ♦ Reducing numbers of patients staying overnight before their operation - vastly increasing the numbers of patients having same day surgery.

Theatres at Wishaw are now carrying out, on average, the equivalent of three extra procedures every week.

A similar LEAN programme was undertaken within theatres at Monklands and Hairmyres hospitals.

National 18 weeks referral to treatment target

PATIENT waiting times continue to fall as NHS Lanarkshire works towards the national 18 weeks referral to treatment target.

This Scottish Government's 18 Week Referral to Treatment (RTT) target states that by 2011 all patients must be treated within 18 weeks of their first contact with their GP.

Embracing this challenge, NHS Lanarkshire established an 18 Week RTT programme board.

This group is now looking to ensure the target is met through service redesign and transformation, planning, information and performance management.

Rosemary Lyness, director of acute services and executive lead for the programme, said: "Lanarkshire has made vast improvements in waiting times and cancer targets over the past few years and we want to build on this experience."

Dr Jane Burns, clinical lead for the programme, added: "Achieving an 18 week pathway from referral to treatment by 2011 is both ambitious and exciting, requiring a contribution from everyone working in NHS Lanarkshire."

Cathy Dunn, 18 Weeks programme manager, said: "We aim to improve the patient's experience using techniques such as Lean to deliver better access to services, earlier diagnosis and treatment."

Healthcare associated infection (HAI)

TACKLING healthcare associated infection (HAI) is a key priority for NHS Lanarkshire.

In 2008-09 the health board launched a raft of measures to further improve infection control.

NHS Lanarkshire chief executive Tim Davison said: “We are committed to maintaining excellent infection control practices throughout our hospitals and other premises. But we can’t do this just by talking about it. We need all staff throughout the organisation to put the highest standards of infection control into practice every single day - so that we provide the safest environment and care we can for patients.”

NHS Lanarkshire formed a short-life Executive HAI Action Group, chaired by medical director Dr Alison Graham.

The group developed an action plan to drive improvements in infection control.

One key aspect of this plan was hand hygiene. Quarterly hand hygiene audits are carried out throughout NHS Lanarkshire wards to check staff are washing their hands.

In addition, the Intensive Treatment Unit (ITU) and six wards at Monklands Hospital piloted approaches to improving hand hygiene as part of the Scottish Patient Safety Programme.

Alison said: “Staff involved in the pilot took ownership of hand hygiene issues and worked extremely hard to improve hand hygiene.”

The pilot areas focused on the five key moments for hand hygiene:

- ◆ Before patient contact
- ◆ Before an aseptic task
- ◆ After body fluid exposure risk
- ◆ After patient contact
- ◆ After contact with patient surroundings.

A Health Protection Scotland report showed these measures were working in reducing HAI.

Rates of both Staphylococcus aureus Bacteraemia, which includes MRSA, and Clostridium difficile were shown to have fallen.

The health board had also further improved its hand hygiene compliance, achieving 93 per cent for the audit period 3 - 14 November 2008, up from 91 per cent for 4 - 15 August 2008.

Alison said: “Good hand hygiene is the single most important way we can reduce the spread of germs within our hospitals.

“These figures indicate that the wide-ranging initiatives and hard work put in by staff are bringing results.”

Other initiatives in the action plan, including improved infection control signage and revised handwashing policy, were overseen by a revised Lanarkshire Infection Control Committee (LICC), which took over from the short-life HAI Executive Action Group.

Bellshill Community Health Clinic

BELLSHILL'S brand new £4.5 million Community Health Clinic was officially opened on Monday 16 March 2009.

The building of this state-of-the-art, modern facility, demonstrated NHS Lanarkshire's aim of providing first class healthcare in the primary care setting.

The clinic, on Greenmoss Place, near Main Street, provides a wide range of health services and replaced the existing Bellshill Health Clinic on Main Street.

NHS Lanarkshire's chairman, Ken Corsar, said: "Through consultations with local communities, one of the major issues people highlighted was the need for improved facilities and accessibility to primary care and to mental health services.

"This new Bellshill Community Health Clinic will help NHS Lanarkshire provide the people of Bellshill with the highest standard of care."

The new clinic opened to patients in December 2008. NHS Lanarkshire's Bellshill locality manager, Tom Bryce, said: "Being a purpose built facility means ease of access for patients is first class and the staff are enjoying working in such pleasant surroundings.

"The new clinic will help to improve the health outcomes for the people of Bellshill and will allow us to provide the very latest and highest standard of care."

The new clinic was officially opened by Michael McMahon MSP. Mr McMahon, who received a guided tour and unveiled an official plaque, praised the new facility.

The MSP for Hamilton North and Bellshill, said: "This is a wonderful facility which was badly needed in this area."

Bellshill Community Health Clinic accommodates public health nursing, long term conditions nursing, podiatry, speech and language therapy, community dental services and a range of mental health services.

Services provided at the new clinic include:

- ◆ podiatry,
- ◆ speech & language therapy,
- ◆ child immunisation and surveillance,
- ◆ physiotherapy,
- ◆ dietetics,
- ◆ well woman clinic,
- ◆ antenatal,
- ◆ adult mental health services,
- ◆ community dental services,
- ◆ minor surgery,
- ◆ cervical screening,
- ◆ coronary heart disease surveillance,
- ◆ long term condition,
- ◆ counselling,
- ◆ public health team and health promotion,
- ◆ EVA (ending violence and abuse) project.

New pre-assessment unit

PATIENTS requiring surgery are benefiting from a new facility that opened at Monklands Hospital in October 2008.

The pre-admissions assessment unit ensures patients are prepared for their operation.

It also ensures patients are healthy enough for surgery.

Carole Young, senior charge nurse for the pre-admission assessment unit and day surgery unit, said: "The patients feel a lot better knowing what to expect when they come in for their surgery and what to expect afterwards.

"We've also significantly reduced the amount of cancellations in surgery.

"Not only were these a major inconvenience to patients, who would have built themselves up for their procedure that day, it was a waste of resources in surgery.

"The new unit means it's a better experience for patients and more procedures can be carried out."

Although the pre-admissions team had been operating at Monklands for several years, the lack of a dedicated facility meant it was sometimes impossible to assess every patient before they came in for surgery.

Now there is a modern, welcoming unit where patients can be assessed in pleasant surroundings by a friendly and highly professional team.

The pre-admission assessment unit covers a wide range of surgeries, including general surgery, orthopaedics, maxillofacial, gynaecology, colorectal, urology, and ear, nose and throat (ENT).

Sickness/absence rates greatly reduced

NHS Lanarkshire made tremendous progress in reducing sickness/absence rates among staff in 2008/09.

From having one of the highest levels of absence in March 2008, when the rate was 6.16 per cent, the health board managed to lower this to only 4.25 per cent by March 2009.

The health board is continuing to move towards the Scottish Government's target of reducing sickness absence to four per cent.

NHS Lanarkshire director of human resources Lynne Khindria said: "We're working hard across NHS Lanarkshire to meet the target and are seeing a gradual reduction in the sickness levels thanks to the efforts of staff and managers."

Hugh Sweeney, NHS Lanarkshire's employee director in 2008-09 added: "In recent years, we've introduced a wide range of initiatives, policies and services to give staff better support than ever before to stay healthy and to help them back to work when they are ill.

"For NHS Lanarkshire, a one percent reduction in sickness absence means an extra 120 staff at work every day.

"This has the potential to make a massive difference to patients as well as easing the pressure on colleagues who are already at work."

Health initiatives available to staff include:

- ◆ Healthy Working Lives
- ◆ Health Promoting Hospitals
- ◆ Staff stop smoking sessions
- ◆ EASY - Early Access to Support for You
- ◆ SALUS Occupational Health
- ◆ Employee Counselling Service
- ◆ Staff Physiotherapy Service
- ◆ Work/life balance policies.

UNICEF baby friendly award

NHS Lanarkshire was recognised in 2008-09 by the United Nations for its efforts in promoting and supporting breastfeeding.

Coatbridge was the first locality in Lanarkshire, and only the third in Scotland, to receive full United Nations Children's Fund (UNICEF) accreditation.

The UNICEF Award recognises the work done by staff in endorsing breastfeeding as the healthiest option for mothers and babies.

The other nine community health partnership (CHP) localities in Lanarkshire were awarded a Certificate of Commitment which is the first step to gaining full international recognition from UNICEF.

This certificate recognises that a health care facility is dedicated to implementing best practice standards for breastfeeding.

Theresa McElhone, a professional officer from UNICEF, presented the awards to NHS Lanarkshire.

Theresa said: "I am delighted to present staff with this award from UNICEF.

"I'd like to thank all staff for their commitment and hard work which will help to improve the health of local families.

"The UNICEF award means mums in Lanarkshire can be assured all the help and advice they need on feeding their babies is available when they need it."

Anne Marie Lee, NHS Lanarkshire breastfeeding co-ordinator, added: "Mothers in Lanarkshire can have the satisfaction of knowing their midwives and health visitors are providing the highest standard of care for breastfeeding.

"Breastfeeding mothers in Lanarkshire are also lucky to have access to the Community Mothers programme, where local women who have breastfed their own children volunteer their help and expertise to other local mums who are breastfeeding."

Patient feedback

DURING 2008-09 NHS Lanarkshire staff received many expressions of thanks for the care they had given patients.

It is good to hear about the positive experience of our patients and visitors.

However, to ensure NHS Lanarkshire continues to provide the highest possible quality of care, we also want to hear about occasions where we could have done better.

Shona Welton, NHS Lanarkshire's head of patient affairs, said: "We listen carefully to the feedback received from patients and visitors and take appropriate action whenever we can.

"This helps us ensure we're providing the best healthcare service possible."

Shona continued: "The complaints received by NHS Lanarkshire reflect the national trends and tend to be around poor staff attitude, behaviour or communication and clinical treatment.

"We're working hard to ensure we tackle these concerns.

"It's hoped, for example, the roll-out of customer care standards, which encourage staff to use plain English and to take account of the needs of the individual, will bring a reduction in complaints relating to communication and clinical treatment.

"De-brief sessions are now held with nursing staff in relation to significant complaints or where a particular area has received a series of similar complaints.

"These sessions allow staff to think about what they could have done better.

"And at all staff inductions and in training sessions there is a focus on good customer care."

Formal complaints received rose from the previous year.

There were 138 to the community health partnerships in 2008/09 - an increase of 31 per cent from 2007/08 - and 488 formal complaints to the acute services division - a slight increase of three per cent.

Complaints regarding waiting times have been halved - from 42 in 2007/08 to 21 in 2008/09. This is in line with the significant reductions made to waiting times for appointments and admissions.

The national target for responding to formal complaints is 20 working days.

The community health partnerships met this target in 82 per cent of cases – the same percentage as in 2007/08.

Acute services met the deadline in 99 per cent of cases - the same as in the previous two years.

Shona said: "This continuing high level of performance for dealing with complaints compares extremely favourably with national figures.

"This demonstrates NHS Lanarkshire's commitment to responding promptly to issues raised with us."

When an individual is unhappy with the response they receive to a formal complaint they have the option of referring the matter to the Scottish Public Services Ombudsman.

During 2008/09 the Ombudsman issued nine reports on complaints about acute services provided by NHS Lanarkshire.

Meeting Lanarkshire's financial targets

NHS Lanarkshire has met all its financial targets in 2008/09.

Laura Ace, who took over from Susan Goldsmith as NHS Lanarkshire's director of finance in January 2009, reported that the health board maintained a balanced financial position.

She said: "The financial position at the end of the 2008-09 year was extremely positive and marks a huge achievement for NHS Lanarkshire.

"The NHS Lanarkshire team worked incredibly hard in ensuring the board's finances remained in good health.

"We are also continuing to support the Board's strong performance against health targets and in the development of strategies and delivery of service improvement and redesign."

In line with the approved financial plan for the year, the Board achieved a cumulative surplus of £14.9m as at 31 March 2009.

Through ongoing tight financial management, cost containment and the delivery of savings across acute and primary care services and corporate departments, NHS Lanarkshire managed to maintain recurring balance throughout the year.

Although NHS Lanarkshire's finances have been well managed Laura acknowledges that tight financial management will be of key importance for the future.

She said: "Given the current global financial climate we are well aware that we can expect a challenging few years ahead.

"Over the past few years NHS Lanarkshire has shown it can rise to the financial challenge and can continue to provide quality clinical services."

Total expenditure by Lanarkshire NHS Board on Hospital, Community and Family Health Services

- ◆ Family Health Services £240.9 million
- ◆ Maternity £29.5 million
- ◆ Learning Disabilities £31.9 million
- ◆ Geriatric Continuing Care £32.6 million
- ◆ Acute £379.9 million
- ◆ Mental Health £69.7 million
- ◆ Geriatric Assessment £36.8 million
- ◆ Community Services £108.1 million
- ◆ Other £17.5 million

Contact details

FURTHER information and an electronic version of this Annual Report and Accounts can be found on the NHS Lanarkshire website at

www.nhslanarkshire.org.uk

If you require extra copies of the report or would like this document on audiotape, in Braille, in large print or in Arabic, Hindi, Chinese, Bengali, Punjabi, Gaelic, Urdu or Polish please email

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Or write to:

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Balance Sheet as at 31 March 2009

2008		£'000	£'000	£'000
	FIXED ASSETS			
0	Intangible Fixed Assets		0	
216,323	Tangible Fixed Assets		219,472	
216,323	Total Fixed Assets			219,472
31,781	Debtors falling due after more than one year			18,087
	CURRENT ASSETS			
4,549	Stocks		4,876	
26,446	Debtors		31,206	
0	Investments		0	
0	Derivative financial instruments		0	
1,121	Cash at bank and in hand		195	
33,340			36,277	
	CURRENT LIABILITIES			
(118,658)	Creditors due within one year		(106,247)	
(86,542)	Net current assets(liabilities)			(69,970)
161,562	Total assets less current liabilities			167,589
0	CREDITORS DUE AFTER MORE THAN 1 YEAR		0	
(50,793)	PROVISIONS FOR LIABILITIES AND CHARGES		(54,246)	
(50,793)				(54,246)
110,769				113,343
	FINANCED BY:			
31,207	General Fund			43,894
79,441	Revaluation Reserve			69,379
121	Donated Asset Reserve			70
110,769				113,343