





<p>representative could be invited twice yearly.</p> <ul style="list-style-type: none"> • Therapists, chaplaincy etc to be invited to attend on a rotational basis <p><u>5. Divisional Risk Register</u></p> <p>This has been added to the rolling programme to be discussed quarterly. Members can add to this monthly. Trust risks are dealt with by Trust Quality & Governance Committee.</p> <ul style="list-style-type: none"> • New updates for consideration <p>Divisional Safe Haven list is required. Code A will publish when available.</p> <p>Patient identifiable information was discussed. There was a discussion about whether computers should be encrypted or NHS Net should be used. Code A to discuss issues with Patricia Radway. CF to discuss at Information Governance Group on 03/11/08.</p> <p><u>6. Safety</u></p> <ul style="list-style-type: none"> • SUIs process <p>JC reported on the SUIs process. DMOP clinicians are good at recognising SUIs. Reports have to go to SHA within 48 hours. A discussion followed regarding contact with Trust Duty Manager and DMOP on-call manager. It was decided to discuss this further in a smaller group</p> <p>Code A commented that HR should be informed at an early date if there was disciplinary potential.</p> <p>This is to be an agenda item for November 2008 meeting</p> <ul style="list-style-type: none"> • Nice reports <div style="display: flex; justify-content: space-around; align-items: center;">    </div> <p>\\Qah-svr-farm\elderly\Management\elderly\Management\elderly\Management\</p> <ul style="list-style-type: none"> • Major incident <p>JC has instruction for the control log which is a formal document. JC will also be conducting refresher training for bleep holders. A table top exercise day is to be arranged for February next year.</p>	<p style="text-align: center;"><u>Action</u></p> <p style="text-align: center;">LH/LD</p> <p style="text-align: center;">CF</p> <p style="text-align: center;">CF</p> <p style="text-align: center;">LH/JC/CA</p> <p style="text-align: center;">JC Agenda item - LD</p> <p style="text-align: center;">JC</p>
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	<u>Action</u>
<p><u>7. Clinical and Cost Effectiveness</u> This has been covered with other agenda items</p>	
<p><u>8. Governance</u></p> <ul style="list-style-type: none"> • Balanced scorecard This is a new tool and therefore trends are as yet unavailable. Individual ward performance and targets will need a year's data to show seasonal changes. • Finance Finance show improvement. Risks include income for palliative care, loss of income with episodes – these factors may affect next year's budget. The Trust position show DMOP in a favourable position, savings plan has been achieved and we are breaking even. The whole PCT has to look at funding.  <p>\\Qah-svr-farm\elderly\Management\</p>	<p>LH</p>
<ul style="list-style-type: none"> • Additional savings plans. Kim suggested looking at continence products 	<p>KB</p>
<ul style="list-style-type: none"> • Winter planning Discussion around A1 being used as B1 last year or improvements in staffing levels to make this unnecessary. 	
<ul style="list-style-type: none"> • Charitable funds To be rolled forward to next month 	<p>Agenda item – LD</p>
<ul style="list-style-type: none"> • HR BG reported with a general update and a proposal for dealing with high levels of sickness in the department. This proposal is to be taken forward to include junior doctors. 	<p>BG</p>
<ul style="list-style-type: none"> • New Hospital Nursing Options Paper was presented by CA. Actions are on the report. Comments to CA. 	<p>All</p>
<ul style="list-style-type: none"> • DMOP report to Trust Quality and Governance Committee. Report to be added to rolling agenda. 	<p>KB</p>
<ul style="list-style-type: none"> • Team Brief Team brief is now available. Neil to produce DMOP team brief. Draft of this to be produce by the beginning of next week. All members to email Neil with items to enable it to go out on Monday or Tuesday. This is to be ongoing. 	<p>NM All</p>

	<u>Action</u>
<p><u>9. Patient Focus</u></p> <ul style="list-style-type: none"> • Patient Surveys <p>Patient surveys have been carried out on 3 wards. Feedback from PEG is good. Nutrition provision needs to be looked at with regard to specific diets.</p>	<p>NM/KB</p>
<p><u>10. Accessible and Responsive Care</u></p> <ul style="list-style-type: none"> • Clinical Services Directory <p>The Clinical Services Directory is now available (copy in Divisional Offices). This will be annually produced and electronically updated regularly.</p> <ul style="list-style-type: none"> • Outpatient report <p>There were a number of issues – capacity, Spr' issues, booking, notes etc. A monthly forum will meet to discuss and sort out issues. IR suggested this be reviewed in 3 months time. LH agreed to bring this to Divisional Performance Review with the Executive Team.</p> <p>Cancelled clinics need to be looked at</p> <ul style="list-style-type: none"> • Challenging Behaviour Unit – Code A <p>This unit is to be accessed solely from MAU. Evaluation needs to be developed. It is proposed that a 12 bedded unit is set up initially as a pilot. Support has been forthcoming from Social Work and OPMH. Further evaluation is to be carried out by the Operational Steering Group for the unit.</p>	<p>NM</p> <p>LH</p> <p>NM/AD/CI/JH</p> <p>CS</p>
<p><u>11. Care Environment and Amenities</u></p> <ul style="list-style-type: none"> • New Hospital <p>O₂ and suction is an issue as all our beds must have this facility and this is not available for all beds on F and G level. Mary Sherry is chairing a meeting to look at the problem.</p> <ul style="list-style-type: none"> • Cook and Chill <p>This begins in November. The service will be looked at to ensure it meets the needs of the patients.</p> <ul style="list-style-type: none"> • SMH Site – to be reported next time 	<p>NM/CA</p> <p>CA/BG</p> <p>NM Agenda item – LD</p>

<p><u>12. Public Health</u></p> <ul style="list-style-type: none">• Staff survey - progress to be discussed next month <p>Next meeting Thursday 27.11.2008 at 2.30 North Building Seminar Room</p> <p>Agenda items</p> <p><u>Circulation:</u></p> <p>Attendance and Circulation:</p> <div data-bbox="252 766 979 1090" style="border: 1px dashed black; padding: 20px; text-align: center;"><h1>Code A</h1></div> <p>Circulation and attendance when required:</p> <div data-bbox="240 1181 687 1453" style="border: 1px dashed black; padding: 20px; text-align: center;"><h1>Code A</h1></div>	<p><u>Action</u></p> <p>BG Agenda item - LD</p>
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