



Eastern and Coastal Kent

MINUTES OF EAST KENT GYNAECOLOGY SERVICE IMPROVEMENT GROUP

HELD ON MONDAY 30th NOVEMBER 2009 AT 10.00AM

AT SEMINAR ROOM, POSTGRADUATE CENTRE, KENT AND CANTERBURY HOSPITAL

Members Present	Ingrid Cobourn, Women's Health Lead Commissioner, (Chair) (IC) Graham Bridge, Commissioning Support Officer (GB) - minutes Marie Reynolds, Pathways Project Manager (MR) Tina McKay, Deputy Clinical Services Manager (TM) Janet Smith, Lead Nurse Gynaecology (JS) Dr Kate Neales, Clinical Director/Consultant Gynaecologist (KN) Jenny Spanton, Head of Community Continence Services (JSP) Trish Williams, Urogynaecology Physiotherapist (TW) Stewart Town, Information Representative (ST) Eve Andrews, Market Management Facilitator (EA) Dr. Chee Mah, Clinical Commissioner, Womens Health (CM) Jill Pilcher, Acting Head of Service, Bladder and Bowels (JP) Titi Oloruntobh, Clinical Physiotherapist (TO) Dr Nasrin Nasr, GP Representative
Apologies for Absence	Ben Stevens, Cheryl Clennett, Karen Stone, Maureen Moore, Karen McIntyre, Davinia Brown

Minute Number	Minutes of last meeting held 21 st September	Action
1.	<p>Agreed as an accurate reflection.</p> <p>Matters arising</p> <p>Kings Avenue</p> <p>IC confirmed that the PCT have undertaken a review of the Kings Avenue proposal and have found it not to be financially viable. Therefore current Gynae projects have been frozen, however, other areas are being looked at within Ashford.</p> <p>Audit</p> <p>Current approved areas for audit are: Map of Medicine/Pathways and A & E pilot. The Audit team have agreed for these two areas to be covered next year and will be linking with Clinical Leads shortly.</p> <p>GP Referrals</p> <p>ST confirmed that work is ongoing. IC asked that ST feedback at the next meeting January 2010.</p> <p>Service Specification for Gynae</p> <p>IC confirmed that the first draft is in the process of being written by Janet Smith and it is envisaged the draft will be ready in the New Year for tabling/discussion</p>	ST

	at the SIG.	JS
2.	<p>Service Updates</p> <p>EKHUFT</p> <p>Tina McKay confirmed that the 2 consultant posts have now been recruited to at QEQMH – they are Zoe Woodward and Keyuri Shrotri. OPD waiting times are 9 weeks across the Trust with hotspots being WHH. Diagnostics at WHH and K&C are within target however at Margate the routine colposcopy service targets have slipped due to sickness and thus although the two week target is being sustained, there are breaches. Rapid access for November is 97% compliant for 2 week waits, 100% with 62 day target 18week referral to treatment 92% compliant for November – the is improving and there are 30 patients against 45 trajectory giving 91.4% for December.</p> <p>The weekend lists at WHH are working well and thus will continue on an ongoing basis. Slots are fully booked for daycase and inpatient bookings. The Trust are to undertake a mapping exercise on elective/non elective capacity and pull together a plan. TMc to forward to IC</p> <p>Stewart Town presented the 18 week breach list and also performance against planned trajectory. IC asked KN to look into the breaches to ascertain whether they were clinical, patient choice, administrative reasons etc. KN agreed to commence audit from December onwards and feedback to future SIG's. to see patient level data.</p> <p>KN queries some of the procedure codes on the breach list and whether they should be Gynaecology, ST said that he would contact Simon Bailey for clarification and amend accordingly.</p> <p>Medway Maritime Trust</p> <p>Medway had given their apologies for today's meeting. KMc to provide written updates for future meetings where unable to attend.</p> <p>Urogynaecology Physiotherapy</p> <p>TW confirmed the service is experiencing ongoing staff issues. There is a new Band 6 starting in January 2010 along with new full time admin person.</p> <p>Waiting times are 0-8 weeks in Thanet where there are still staffing issues but it is hoped the Band 6n appointment will address these. Waiting times in Swale are 3-4 weeks</p> <p>TW feedback on the KPI Audit undertaken by the service on 72 patients. An action plan is to be drafted and this will be presented at May 2010 SIG.</p> <p>Continence Service</p> <p>Jenny Spanton confirmed that recruitment is still a huge problem. Gill is acting Head of service and is working with Donna Osborne on the duplicate referral Issues as well as reviewing Comcare data. Recruitment to vacant posts has been frozen until the contracted activity is delivered.</p>	<p>TMC</p> <p>KN</p> <p>ST</p> <p>KMc</p> <p>TW</p>
3.	<p>Map of Medicine</p> <p>MR mentioned to the group that they are aiming to publish on the 18th December and ran through the pathways for sign off. All agreed:-</p>	

	<p>Sterilisation and vaginal bleeding – no changes needed Incontinence some small changes needed - to be undertaken by MR with JS/Chee Mah. It was mentioned that there should be two pathways needed for stress incontinence and urgent incontinence which would hopefully stop double referrals.</p> <p>KN to get all changes to MR by 12th December MR and CM to meet to agree final amendments JS and CMah to sign off for Acute/Primary Care</p>	<p>JS/MR/CMah</p> <p>KN MR/CMah JS/CMah</p>
4.	<p>Uterine Artery Embolisation for the treatment of Fibroids</p> <p>IC discussed the contact Carmen Dawe had made with her in relation to the above service provision in EKHUFT. KN confirmed that this has been a long standing service however reconfiguration some years ago led to the gynaecology inpatient beds being reduced at KCH. More recently beds have been identified hence the push to publicise this service again. All in agreement with the proposal</p>	
5.	<p>Elective Care SCP</p> <p>IC confirmed that future meetings will be aimed at delivering the commitments of the Elective Care Strategic Commissioning Plan over the next 5 years. IC to send out a copy of SCP to members to consider and feedback at next meeting in January 2010</p>	IC
6.	<p>QEQM Gynae Assessment Unit</p> <p>JS confirmed that since the pilot commenced at the beginning of October 2009, there have been 76 women assessed on the unit, 3 were inappropriate and 7 were admitted for the right reasons. The opening times have changed and the unit will stop taking referrals from 5pm. Most of the referrals so far have been through A & E. JS confirmed that some GP's are still not aware of the service and queried if the letter and criteria had been sent out. IC confirmed that these had been sent to the Communications Team but would check again.</p> <p>JS confirmed that if the pilot is successful, it will be rolled out at WHH if space can be identified.</p>	IC
7.	<p>Any other business</p> <p>KN queried where independent/providers stood in relation to Governance particularly those on Choose and Book. IC to invite Choose and Book Lead Commissioner and Eve Andrews to present to next meeting in January 2010 for clarification.</p> <p>TO raised an issue with Secondary Care Physio's not being listed on Choose and Book. IC confirmed a meeting was held sometime ago with EKHUFT regarding this and it is down to the Trust to action this.</p>	<p>IC/EA/SL</p> <p>TO</p>
8.	<p>Date, time and venue for next meeting Date of next meeting is Monday 25th January 2010 at 10.00am at Kent and Canterbury Hospital subject to room confirmation. Any agenda items to be sent to Ingrid Cobourn by no later than 18th January.</p>	ALL