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**REPORT TO: MORAY INTEGRATION JOINT BOARD CLINICAL AND CARE GOVERNANCE COMMITTEE ON 31 AUGUST 2023**

**SUBJECT: PRIMARY CARE MINOR SURGERY**

**BY: PRIMARY CARE DEVELOPMENT MANAGER**

**1. REASON FOR REPORT**

1.1. To inform the Committee of the current position regarding the Moray Primary Care Minor Surgery Service.

**2. RECOMMENDATION**

**2.1. It is recommended that the Clinical and Care Governance Committee consider and note the current position of Primary Care Minor Surgery Service.**

**3. BACKGROUND**

3.1. A report was submitted to the previous meeting of the Committee on 25 May 2023 (para 6 of the minute refers) which set out the current position of Primary Care Minor Surgery Service which is delivered from the Dr Gray's Hospital site and the impact on Moray patients.

3.2. At the meeting members requested a follow up report with possible solutions to the issues highlighted in the report.

**4. KEY MATTERS RELEVANT TO RECOMMENDATION**

4.1. The service has developed over the years and now operates out of the Minor Surgical theatre facility on the Dr Gray's site every Wednesday, Thursday and alternate Fridays.

4.2. Since September 2022, due to issues within Dr Gray's theatres, the service is operating Wednesday and alternative Fridays only. By implication, this reduction of operating capacity has led to increased waiting lists, which has resulted in workload pressures to both Primary and Secondary Care.

4.3. Historically, the service had operated from a facility at Seafield Hospital, this was discontinued due to concerns regarding the standard of the operating

facility itself i.e. infection control concerns, ventilation, etc and the fact that the facility is situated in a designated non-clinical zone.

- 4.4. The only suitable location for this facility in Moray would be Seafield Hospital in Buckie.
- 4.5. Consideration has been given to upgrade the Seafield premises to include a fully functional health facility that is compliant with the Scottish Health Technical Memorandum (SHTM).
- 4.6. Costings were sought to undertake this work and to ensure Seafield Hospital would be SHTM compliant. The estimated cost that this would incur is upward of £200K however it is anticipated that the actual costs would be far greater.
- 4.7. The reasons being as detailed in 4.3 above and the fact that the facility is situated in a designated non-clinical zone means that the area is also not compliant with material finishes; lighting; medical gasses, disposal areas, fire code, flooring etc. These aspects and the costs to upgrade these would also need to be investigated and consequently increase the overall costs.
- 4.8. Due to the nature of the Minor Surgery Service, it is considered that there is only one location that is suitable within Moray that could provide a safe, effective and reliable service delivery and that is Dr Gray's Hospital.
- 4.9. At the moment, to ensure that patients are seen by the service a robust waiting list is operational.
- 4.10. The service lead who works for the Minor Surgery Service on a Thursday uses this day to undertake telephone consultations and reviews with patients, as they are unable to access an operation suite.
- 4.11. If another member of the team is off on annual leave etc then the service leads swap working days for the service so that patients can be seen and any necessary operations can take place.
- 4.12. The Minor Surgery Service will return to full operational capacity at Dr Grays when the Intravitreal (IVT) theatre returns to operational capacity.
- 4.13. The Outpatient Service are reviewing their Standard Operating Procedure and the risk assessments required for the re-opening of the IVT theatre. Once this is complete, the Minor Surgery Service will plan for returning to full operational capacity at Dr Grays.

## **5. SUMMARY OF IMPLICATIONS**

### **(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan "Partners in Care 2022 – 2032"**

The policy and approach set out in this report is consistent with the MIJB Strategic Plan.

### **(b) Policy and Legal**

A number of policy and legal implications to be considered

**(c) Financial implications**

Financial implications regarding the refurbishment at Dr Grays and/or purchase of equipment

**(d) Risk Implications and Mitigation**

Risks and mitigating factors are outlined within the report

**(e) Staffing Implications**

There are implications on staffing provision and on staff health and wellbeing

**(f) Property**

Implications regarding Dr Grays premises or alternative provision

**(g) Equalities/Socio Economic Impact**

None arising directly from this report

**(h) Climate Change and Biodiversity Impacts**

None arising directly from this report

**(i) Directions**

None arising directly from this report

**(j) Consultations**

Dr Robert Lockhart, Moray GP Clinical Lead

Dr Malcolm Simmons, Moray GP Clinical Lead

Dr Charles Hornsby, Moray GP Referral Surgery Clinical Lead

Sean Coady, Head of Service, Health and Social Care Moray

**6. CONCLUSION**

**6.1 The Committee are asked to note the content of this report**

Author of Report: Rosemary Reeve, Primary Care Development Manager

Background Papers: Previous report

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