

**Approved minute of the North of Scotland
Public Health Network Steering Group Meeting**

Tuesday 16th April 2013, 2:00– 4:30pm
All members joined by videoconference

**NORTH OF SCOTLAND
PUBLIC HEALTH NETWORK**

Present:

Margaret Somerville - NoSPHN Lead, Director of Public Health, NHS Highland (Chair)
Sarah Taylor - Director of Public Health, NHS Shetland
Ken Black - Consultant in Public Health Medicine, NHS Orkney
Ray Watkins - Head of Health Improvement and Consultant in Dental Public Health, NHS Grampian
Pip Farman - North of Scotland Public Health Network Co-ordinator
Jim Cannon - Director of Regional Planning, North of Scotland Planning Group
Phil Mackie - ScotPHN (by telephone)
Sara Aboud - Health Promotion Manager, NHS Western Isles

NB Not all members were in attendance for all items. The items were not taken in consecutive order but are presented here in numerical order.

Members of the Group and those attending the meeting should be aware that their names will be listed in the minutes/papers, which will be published on the internet.

11/13 Welcomes and apologies

Margaret welcomed Jim Cannon Director of Regional Planning, North of Scotland Planning Group and Sarah Aboud newly appointed Health Promotion Manager, in the NHS Western Isles.

Apologies had been received from: William Moore, Noelle O'Neill, Sharon Pfleger, Susan Webb, Anne Whitcombe, Suzanne Baird, Christine Duncan, Louise Wilson, Martin Malcolm and Ann Conacher.

12/13 Minutes of the last meeting 6th February 2012

The minutes of the last meeting were accepted as an accurate record and members gave no reason why the papers / minutes of the meeting should not be made available by open access on the internet.

13/13 Matters arising from last meeting not on the agenda (matters arising were also updated at Item 16.1b)

- **Matters arising – SIMD:** noting previous discussion at NoSPHN with regard the use of SIMD, Sarah highlighted a paper recently considered by SDsPH from Colin Fischbacher of ISD – 'Identifying 'deprived individuals': are there better alternatives to SIMD for socioeconomic targeting in individually based programmes addressing health inequalities in Scotland?' and noted Colin's interest in exploring different methodologies in remote and rural areas eg the use of house evaluation banding (noting there may be a cost). Sarah suggested waiting for further feedback on developments and suggested discussion at a later date. ST
- **04/13 Community Justice Authority (CJA):** at the last NoSPHN meeting it was agreed that members would feed back on local discussions on whether there was a need for more coordinated Public Health approaches to CJA. Members agreed that there was not a regional agenda to be pursued but were happy for Pip to circulate the routine CJA updates. PF
- **Item 6.3 GIS Mapping:** Margaret advised that at the most recent SDsPH meeting it had been agreed that the SDsPH would write to the Scottish Government (SG) seeking a meeting to look at the variable use of GIS across Public Health Departments in Scotland. In the meantime a letter had been received by Boards asking for sign up to OSMA but with no indication of costs to individual Boards. Margaret proposed seeking further reassurance from the SG on how the costs would be met and to highlight the need for ongoing engagement. Sarah noted that an additional letter had just been sent to Boards proposing discussion on the funding arrangements on the presumption that the first year of costs would be met centrally but then picked up by Boards. Margaret agreed to review and liaise with Alison McCallum re the final letter from DsPH and to ensure that all DsPH were circulated with all the GIS / OSMA information received. MS

14/13 ScotPHN / NHSHS updates and developments

14.1 Scottish Public Health Network (ScotPHN)

a Updates – Phil highlighted that the 'Impact of Welfare Reform' work had been published and the work on 'Looked After Children in Glasgow and Scotland; health needs assessment' was to

be published on the ScotPHN website shortly. In discussion on the update Margaret noted a need in time to understand what should be the regional elements of the Scottish (Managed) Sustainable Health Network (SMaSH) and the disinvestment work.

b ScotPHN workplan 2013/14 – Phil advised that the ScotPHN workplan had been discussed at the last ScotPHN meeting and was being reviewed in the light of current developments and what might be welded together nationally rather than necessarily starting new work. Areas of work included: an external audit of ScotPHN; the Public Health aspects of the care of the dying, the Health Impact Assessment Network – rural development programme (which Phil hoped NoSPHN would engage with), Carbon Calculator (SMaSH), carrying forward work with older people, Disinvestment and the Health Economics Network and further supporting Asset Based approaches. The intention was to take the next 6 months to further work up the developments for the workplan.

c New Ways of Working (NWW) for Public Health In Scotland and developmental actions – Phil agreed to discuss with Pip the NWW approaches in the light of the workforce paper on the agenda and Phil highlighted possibilities for looking at Public Health Function standards being developed in Lanarkshire on which a interim statement was expected by the end of May.

PM/PF

15/13 North of Scotland Planning Group / programmes

15.1 Margaret invited Jim to introduce himself, update on NoSPG developments and his future plans. Jim highlighted his background in Radiography and recent roles in Workforce Planning and as the Network Manager for the National Network Manager for the Managed Diagnostic Imaging Clinical Network. Jim noted he was newly in post so had still to take a view as to future plans. Early discussion had however highlighted his interest in and the scope for the 'Intelligent Region' approach and a need to review the NoSPG workplan and structures and it was his intention to take proposals back to NoSPG by the summer.

Sarah noted the range of ongoing work that NoSPHN was progressing for NoSPG and advised that NoSPHN would look to Jim for guidance on what might be expected of NoSPHN in the future over and above this.

Jim advised he was in the process, as part of his induction, of speaking to a range of people and that this offered a opportunity to look at issues and to what extent the NoSPG work programmes were driven by central needs and regional issues and was keen to take a pragmatic approach and focus on efficient and effective services, standardising data, exploring variation and to look at a set of question by pathway or across pathways for doing the business. A review of NoSCAN had also been requested.

Margaret welcomed the opportunity to take a step back and highlighted the proposed NoSPHN work to look at small volumes and outcomes as an example of where looking at issues at a broader level would be helpful rather than focussing on single issues.

Sarah supported a need to look at variation ensuring it focussed on outcomes. Jim suggested there might be merit in looking at outcomes and for example imaging data and how that correlated with for example cancer outcomes and that it was his intention to articulate these issues to NoSPG and understand what were the necessary structures to support such work and expectations of Boards, this included understanding how work was generated and then managed within NoSPG.

Margaret thanked Jim for his input and summarised the discussion noting Jim's intention to take some time to gather views on the work of and structures within NoSPG including the need for robust data and analysis to support discussions and his intention to take a paper back to NoSPG. Margaret invited Jim to bring his proposals to NoSPHN for further discussion and offered NoSPHN in shaping developments.

JC

15.2 Feedback from NoSPG meetings 20th February 2013 and IPG 6th March – Sarah noted that proposals for ongoing work on the Intelligent Region and Small Volumes work had been presented and supported in principle at the last IPG meeting and that the NoSPG meeting of 17th April 2013 had been cancelled – the next NoSPG meeting being 19th June 2013.

Noting the appointment of Elaine Mead as the new Chair of NoSPG from June – Margaret suggested a meeting with herself, Pip and Jim to look at issues further.

PF

15.3 Small volumes / outcomes and sustainability work Speaking to the paper circulated Pip outlined feedback from discussion about the development of the small volumes work. A number of themes had emerged for the work including: the need to clarify the sources / evidence base for small volume work; learning from previous work (eg vascular and HPB); the need for consistent approaches to future service reviews; better understanding the impacts of service change in relation to small volumes; the need to recognise that if there was a legitimate case for calling into question the viability of a service that this was fully explored; embedding horizon scanning thinking into processes; articulating the challenges to others with respect to small volume work and ensuring representation on national working groups. A number of questions had been highlighted.

Pip advised that support with evidence reviews had been secured from Aberdeen University. Pip highlighted a proposed methodology for the work and suggested the outputs should be a summary of the evidence in agreed areas, a summary of findings and the development of a framework for further service reviews. Pip asked members to discuss the proposed work with a view to moving it forward and essentially to understand if the work would be seen as helpful and who should be involved?

Sarah asked about how best to ensure buy in to the work and suggested that this might need to be at different levels and the need to look at Clinical Director (generalist) support for the work. She noted that work might explore the differences between the RGH (as looked at in the Remote and Rural Service Review) and a DGH and understanding what might best be provided at a DGH or specialist centre – and what was the benchmark for RGH and DGH services. Sarah further suggested that a set of mind maps might be developed to understand the links between clinical services eg the same clinician doing the Whipple technique for cancer and other services and the need to for example make the links between surgery and paediatrics.

Jim asked whether the small volumes work was the best approach and whether a focus on larger services and variation would be more helpful? Members discussed and Margaret suggested that a focus on low volumes was necessary but recognised the benefits of reviewing high volume activity also but that it would not be possible with this piece of work.

Pip agreed to further work up the scoping document and advised it was to be discussed at the next IPG meeting.

PF

15.4 Horizon Scanning to Inform NoSPG Decision Making in the Future – the NoSPHN focus

a Horizon Scanning work – Pip highlighted proposed next steps for NoSPHN for the Horizon Scanning work as summarised in the paper circulated. Members supported the developments highlighting in particular the development of educational support materials to support both regional and local Board work and noting that work was already ongoing on the Intelligent Region and that a workshop would be planned later in the year to review the work. Members suggested that further developments should be reviewed in the light of ongoing NoSPG developments.

PF/ST

PF

b Update on key developments.

Intelligent Region – Pip advised that a workshop held with NoSPG Team colleagues on the 12th March 2013 had highlighted that the approach aligned well with NoSPG thinking. A further workshop was planned for the 18th April with the wider NoSPG team to share and test the concept further and with a view to testing the approach on one programme of work. The Intelligent Region work had been incorporated into the 'blue print' and it was Pips intention to look at this with Jim in due course.

PF

16/13 Public Health Network Workplan

16.1 NoSPHN annual report 2012 – 2013 – members reviewed the draft annual report presented and approved it for submission to NoSPG and for wider circulation.

PF

16.2 NoSPHN Workplan 2013/14

a Workplan update (2013/14) – Pip advised that having spoken with key stakeholders, plans for the 2013/14 workplan (and noted in the first of the two papers circulated) had been supported. A number of other issues had been highlighted as potential further work on which Pip sought member's views. In discussion the following was noted / agreed:

- Feedback from Tom Laverty that as the current structures for Resilience / Civil Contingencies were under review he suggested that planned work on common approaches

<p>should be removed from the NoSPHN work plan. Members supported the proposal but requested that they be updated in 6 months time as to developments.</p> <ul style="list-style-type: none"> • The need to ensure that equalities, inequalities and welfare reform work were continually highlighted to ensure work demonstrated that it was not disadvantaging particular groups. • To review the potential of the Carbon Calculator as an improvement tool (and link to the blue print). • To suggest that work on the Public Health implications of Francis Review might best be reviewed nationally. • To ask the NoS Health Promotion Managers if there was a need for other Health Improvement work regionally for example to focus on one issue (eg physical activity as part of the Health Promoting Health Service or smoking cessation) and to understand if there were any gaps in learning nationally on health improvement work. • To explore with the national Health Impact Assessment interest in their rural programme of work. • The need to discuss further as part of the Intelligent Region discussions, tools such as SIMUL8 and understand how they were being used elsewhere. 	TL
<p>Members agreed to keep the suggested other work under review over the year. Members approved the proposed developments for 2013/14 and asked that the workplan be finalised in this respect.</p>	PF
<p>b Specific updates from key groups / programmes not on the agenda were noted with thanks.</p>	
<p>16.3 NoSPHN Budget: final for 2012/13 and forward planning 2013/14 - Members were advised that the final end of year position was that NoSPHN funds would be spent. Pip advised that the invoices for NoSPHN for 2013/14 would be issued in May on the assumption that no uplift would be applied to the NoSPHN funds as in previous years. On this basis it was anticipated that about £6.5K would be available for projects in 2013/14.</p>	PF
<p>16.4 CPD planning / event(s) a Referring to the paper circulated members approved the plans for CPD for the year noting that work on GIS would likely be deferred to later in the year pending national meetings (as discussed under matters arising).</p>	
<p>Pip reminded members of the invitation extended to all NoS Boards to attend the NHS Highland Asset Based events on the 31st April and 1st May – information on which had been circulated and Pip understood NoS colleagues were attending.</p>	
<p>b Workforce planning event – Pip asked members to discuss the themes emerging and highlighted in the paper circulated with regards to a session on workforce planning – noting that these were varied including capacity /sustainability issues; horizon scanning for Public Health / NoSPHN; new ways of working; designing for competent Public Health functions, Public Health performance indicators and better understanding CPD needs in relation to workforce developments.</p>	
<p>Discussion highlighted that the issues focussed on work that needed to be done, joint working approaches and CPD related issues, some of which were being addressed through the leadership programme by the SDsPH. Phil noted that it would be helpful to further explore the themes and where they might best be addressed eg at national or regional level highlighting that buy in of staff / colleagues was key.</p>	
<p>Margaret suggested further discussion of the issues prior to the next meeting and in the light of national discussions and that a workshop might be one way of understanding how best to take all the issues forward. Phil welcomed the emphasis on new ways of working and that he would be happy to participate in regional discussion on this and how best to understand the national and regional dimensions. Members were asked meantime to feedback to Pip comments on the paper circulated and suggested priorities for action.</p>	ALL
<p>16.5 A Regional approach to Dental Public Health – Ray advised members that the concept tested at the NoSPHN meeting in December 2012 of taking a regional approach to the funding and appointment of a NoS Consultant in Dental Public Health had been supported in discussion between colleagues in NHS Grampian and Highland and that he intended to produce a discussion paper shortly. He outlined the success of recent dental health developments in the North and the improvements in and standards of oral health in the North.</p>	RW

16.6 Scottish Centre for Health Working Lives Pip updated members on the work of the NoS SCHWL collaborative. Meetings had been held and discussion and work had focussed on understanding and raising the challenges for NoS Boards of the proposed new national assessment process, understanding the training and support needs of colleagues in the NoS and exploring joint models of working for Occupational Health services. Work was ongoing and SCHWL colleagues had been involved. Members noted that Susan Webb (NHSG) had been nominated to sit on the SCHWL National Advisory & Advocacy Group.

Discussion highlighted the need to maximise the ways in which local organisations / businesses could support local care pathways eg access to services rather than provision of NHS services eg for smoking cessation and physical activity and the benefits of integrating HWL teams into operational management rather than being seen as part of a separate national organisation.

17/13 AOCB

Homelessness Hubs: Pip highlighted that the North Homelessness HUB was SG funded and covered the local authorities for: Highland, Moray, Aberdeenshire, Aberdeen City, Orkney, Shetland and Western Isles. There had been a query from Margaret Brown (NHSH) as to whether there was potential for discussion between the HUB and NoSPHN to see if there is any research or joint work around topics such as the impact of welfare reform – particularly given the overlap of geographies between HUB and NoSPHN and the ongoing multi-agency concern about the impact of welfare reform? Pip asked for members perspectives.

Members noted that there was a need to maintain contact locally with HUB members but were unsure of the regional dimensions and Pip was asked to gather more information on the HUB and members were asked to explore locally for discussion at a further meeting.

PF/ALL

Items to be brought forward to future meetings:

- Members agreed to invite Noelle O'Neill NHS Highland to present her work on the process of assessment and adoption of health technologies (medical devices as opposed to drugs) and its place in service developments at the June or August meeting.
- Margaret asked for further advice on what would be a helpful update (as had been requested) re the NHSH integration agenda. Sarah suggested it would be helpful to understand the Public Health learning from the process and Margaret suggested summarising this as a case study (noting that much of the learning might only be available retrospectively) and that the case study might be reviewed at a future CPD session or as part of the SDsPH leadership group programme.

MS

MS

Members agreed to email Pip with any further suggestions for future agendas.

All

Further items pending:

- Review of NoSPHN from an 'Intelligent Region' perspective
- NB Quality Framework to be considered as part of workforce planning event
- Substance misuse – Susan Webb (local report when available / if appropriate)

18/13 Date of next meeting: Wednesday 5th June, 2pm – 4.30pm

Further dates for 2013

Wednesday 7th August (confirmed)

Wednesday 2nd October

Wednesday 20th November (may need to be reviewed / clash with IPG)