

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

Tuesday 10<sup>th</sup> November 2015, 3:00 – 5:30pm  
All members were videoconferencing

**NORTH OF SCOTLAND  
PUBLIC HEALTH NETWORK**

**Present:**

Maggie Watts	Director of Public Health, NHS Western Isles (Chairing meeting)
Chris Littlejohn	Consultant in Public Health / Head of Health Improvement, NHS Grampian on behalf of Susan Webb
Hugo van Woerden	Director of Public Health, NHS Highland
Susan Laidlaw	Consultant in Public Health, NHS Shetland on behalf of Sarah Taylor
Jim Cannon	Director, North of Scotland Planning Group (NoSPG) for Item 46
Ann Conacher	Manager, Scottish Public Health Network (ScotPHN)
Jonathon Iloya	Consultant in Dental Public Health, NHS Grampian (for Item 46.3iv)
Pip Farman	Public Health Specialist / North of Scotland Public Health Network (NoSPHN) Co-ordinator

NB Not all members were in attendance for all items, items were not taken in order but are reported in numerical order.

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|--------------|--|------------|
|              |  | Action     |
| <b>42/15</b> | <b>Welcomes and apologies</b> – Maggie welcomed Susan Laidlaw to her first meeting and noted apologies had been received from: Louise Wilson, Susan Webb, Sarah Taylor and Kerry Russell.  |            |
| <b>43/15</b> | <b>Minute of the last meeting</b> 25 <sup>th</sup> August 2015<br>The group approved the note of the previous meeting and gave no reason why the papers and minute of the last meeting should not be made available by open access on the internet.  | LB         |
|              | <b>NoSPHN Vice Chair role</b> – in the absence of the Chair Maggie asked members to consider whether a vice chair should be appointed to the network. Members agreed to defer the discussion to the NoSPHN planning meeting on the 4 <sup>th</sup> December.   | PF         |
| <b>44/15</b> | <b>Matters arising from the last meeting and not on the agenda</b><br>31/15 – a note of thanks had been sent to Bruce Archibald (NHSG).<br>33/15b – Pip asked that members share Board Joint Commissioning plans as they became available noting that LDP plans had been shared after the last meeting.<br>37/15 - the next Inter-island conference (2017) had been logged for review in the 2016/17 NoSPHN workplan<br>38/15ei – Margaret Hannah's 3 Horizons slides had been circulated with the agreement of Margaret, in PowerPoint form (not PDF form)<br>38.3c – Pip asked that any text for 'feedback bubbles' for the NoSPHN annual report / newsletter should be sent to her by the end of November. Pip agreed to resend the draft document. | All/<br>PF |
|              | <b>a Public Health Governance arrangements in Boards</b> (NHSG) – colleagues reiterated support to NHSG to sense check any governance work that they progressed and Maggie noted that her first Public Health Governance meeting was to be held the following week and that she would feed back to Susan on this.  | MW         |
|              | <b>b Civil contingencies</b> – Chris clarified that Susan Webb's query to the last meeting related to aspects of civil contingencies practice that might be shared and that Susan intended to speak to local resilience staff and feedback. Noting the recent Silver Swan exercise, Maggie suggested highlighting this for the planning session on the 4 <sup>th</sup> December to understand how the exercise had helped locally and how the issues that Susan had raised dovetailed.   | PF         |
|              | <b>c Clyde and Hebrides Ferries Review Procurement</b> request for NoSPHN representation – Pip noted that she had declined the invitation to sit on the group (in her NoSPHN and HITRANS / NHSH capacities) but reassured members that relevant Health Boards were represented on the Health and Social Care Ferries Accessibility Group and that HITRANS colleagues had agreed to highlight if any further health input was required.   |            |
|              | <b>d NoSPHN and ScotPHO and ISD links</b> – Pip noted that she had spoken with Gerry McCartney (ScotPHO) who was keen to continue to explore ways to work with NoS Board issues. He had shared an idea re inequalities which Pip had asked that he share with Martin Malcolm (NHSWI) in the first instance.  |            |
| <b>45/15</b> | <b>Scottish Public Health Network (ScotPHN)</b><br><b>45.1 Updates</b><br><b>a Workplan update</b> – Ann noted the new ScotPHN website and a Twitter account were now live and that DsPH had been emailed about the obesity route map work which was now available.  |            |

Members noted the workplan update circulated with thanks.

Hugo asked if ScotPHN had or should have actions in their workplan relating to the Public Health Review Leadership theme. Ann agreed to raise within ScotPHN noting existing links with the national DsPH group and related work streams one of which was leadership. Members discussed the need for a unified voice with regard to leadership through the Faculty and DsPH and the need to unpack some of the issues recognising this needed some resource and thinking.

AC

Pip advised that she had been invited by Susan Webb to support a national piece of work on leadership (aligned to both the DsPH Group and the national workforce planning group led by Andrew Fraser) and reassured members that this was in addition to not part of her NoSPHN work.

#### 46/15 North of Scotland Planning Group / programmes

**46.1 Feedback from NoSPG meetings** (NoSPG papers are available at <http://www.nospg.nhsscotland.com>). The next NoSPG meeting is 16<sup>th</sup> Dec 2015.

**a NoS IPG meeting 31st August 2015** – Jim noted the revised working arrangements for the NoS IPG and that he welcomed feedback on developments. Hugo asked if the NoSPG team were sighted on the major trauma review. Jim noted that NoSPG were engaged but that executive leadership for the work was with Graham Smith in NHS Grampian and that the work was being project managed by Lorraine Scott. Jim reassured that remote and rural issues were being discussed.

#### **46.2 Update on NoSPG workplan / programme developments:**

**a NoSPG Clinical strategy event 30th September 2015** – Jim updated on the clinical stakeholder event on the 30<sup>th</sup> September noting that a report of the event would be available shortly. Conversations on the development of the clinical strategy were to continue at the NoSPG event on the 25<sup>th</sup> November and encouraged groups and individuals to feed in as the work progressed. Jim asked how best to ensure public health input to the strategy and the group agreed that a separate meeting with Mike Bisset and Kerry Russell would be helpful ideally as part of the NoSPHN planning event on the 4<sup>th</sup> December. Discussion noted the need to understand how the regional plan related to the national plan; whether its focus was on specialist or wider services (Hugo made a plea for wider issues such as primary care services to be considered); strategic and operational issues; and workforce issues particularly in a remote and rural context.

PF/  
JC

**b NoSPG Annual event 25th November 2015** – noting the event was to be held in Inverness with remote access Pip advised that it would be helpful to understand from Jim if there was any input needed from NoSPHN and from members which public health colleagues from across the NoS were attending?

All

**c Paediatric Dentistry** – Jonathon updated on the work stream noting that a paper had been presented to the last NoSPG meeting in June and that a business case was in development which required further consultation with specialists across the NoS / the NoS Oral Health and Dentistry Network. He anticipated that a revised plan would be presented first to a virtual meeting of the NoS IPG and then NoSPG in December.

**d Low volumes work – Upper GI Cancer SLWG** (testing of the low volumes framework) – Pip noted that the low volumes framework had been tested with the SLWG and it had been revised in response to discussion at the group. The group had now reported and Jim noted ongoing discussion with regards the outcome of the groups work given a range of other working groups (7 day task force work; surgical services review, clinical strategy and national work streams) emphasising the need to consider service co-dependencies and patient perspectives.

**e Population of 1.3 Million developments / cancer intelligence developments** — Pip advised that it was still the intention for a cancer health intelligence scoping meeting to be called by NOSCAN to scope the work and given delays due to capacity Pip had offered to support this. Noting meetings being held by Aileen Keel re a potential National Cancer Intelligence Framework (through the Innovative Healthcare Delivery Programme / Farr Institute) it was suggested that the NoSCAN meeting would now helpfully follow these in the new year.

**47/15 National Review of Public Health** – noting key themes highlighted at the Faculty of Public Health conference by the Minister for Public Health including leadership, workforce (ensuring its effectiveness) and partnerships (particularly through CPPs and integration) members noted that at this point there appeared to be no plans for radical change but there were key elements already clear for which the public health community should step forward and demonstrate leadership for at

national and local levels). Members noted a desire to strengthen regional level working within this and agreed to discuss this further at the NoSPHN planning session on the 4<sup>th</sup> December.

PF

Members understood that the final report was still being worked on and was expected to be available later in the year /financial year with an expectation that requirements for further work may be detailed in the report.

#### 48/15 **Public Health Faculty Conference – Peebles**

**a NoSPHN Stand** (recruitment opportunities) – NoSPHN had a stand at the conference with materials and t-shirts developed to support it. Pip thanked NHS Shetland and NHS Highland colleagues for their support at the event noting that whilst not inundated those that did approach the stand were interested in the NoS and opportunities including: an FY1 trainee who was thinking about specialising in Public Health / was interested in remote and rural issues; and three trainees interested in linking for work/projects. Others were interested job opportunities; the NoSPHN model of working and working with or through NoSPHN.

**b Remote access (webcasting)** – Pip noted that webcasting had been secured for the event funded through the conference organising committee, NHSG and NHS. Initial feedback was that it had worked well for participating boards and that this was being evaluated by the organising group and the IT company involved were feeding back data on usage which Pip would ensure was fed back to NoSPHN. Pip noted that recordings of the presentations were available to view at [www.video3uk.com/fph](http://www.video3uk.com/fph) with copies of the power point presentations expected to be uploaded to the conference website shortly.

PF

**c Abstract presentation (Low volumes)** – Pip had presented the low volumes work in one of parallel sessions with interest expressed in the work by NHS D&G colleagues.

#### 49/15 **Public Health Network Workplan**

##### **49.1 Update on NoSPHN programmes of work**

**a Health Protection** - NoS Island Health Protection Resilience. Maggie updated on recent developments noting an MOU had been agreed and was now in place between the island Boards for 2<sup>nd</sup> on call cover. The arrangement was to be kept under review with the potential to look at a wider more resilient NoS arrangement in the future and members agreed to discuss this further on the 4<sup>th</sup> December. Maggie had subsequently given notice to withdraw from the NHS Western Isles / NHS Highland arrangement for which Hugo noted his thanks for her input.

PF

**b Health Intelligence** – Pip referred to the health intelligence linked items already on the agenda and highlighted previous discussions focussing on the desire for a more systematic approach to health intelligence issues in the NoS which members agreed to discuss further on the 4<sup>th</sup> December.

PF

##### **c Health Improvement**

**i SHWL Hub developments** – Chris noted that he now sat on the national SHWL Programme Board on behalf of the Scottish Health Promotion Managers Group. Chris highlighted ongoing concerns about funding reductions which had not been phased as initially expected and that the national action plan had been agreed prior to finalisation of the funding agreements which meant the plan was felt now not to be deliverable. As a result priorities were being revisited.

Chris advised also that the second meeting of the NoS SHWL hub had been held at which it was felt that some of the efficiencies proposed may not be mitigated for due to geography and loss of staff. Members noted local disappointment with the current position.

**ii Single issue session: Alcohol Brief Interventions** – Pip advised that the next single issue CPD session on ABI's had been arranged for the 8th Dec 2015 4-5.30pm all by video conference and that representatives from each Board were attending.

##### **d Workforce planning**

**i Specialty recruitment information / opportunities** – summarising the work programme to date which had focussed on developing support materials and attendance at two conferences, the group agreed to review next steps at the meeting on the 4<sup>th</sup> December. Maggie suggested that the work programme might be reviewed with Ellie Hothersall (the new Scottish training Coordinator) as part of next steps.

PF

**ii UKPHR registration** – highlighting the pilot WoS practitioner scheme and known interest in the NoS of colleagues wishing to pursue specialist registration Pip noted that the NoSPHN workplan had highlighted the need to review arrangements on an ongoing basis to ensure NoS needs were being addressed. Members highlighted local interests and that national work was ongoing for both practitioner and specialist schemes and agreed to review the position further at the planning

PF

meeting on the 4<sup>th</sup> December.

**e Futures thinking / planning**

**i 3 Horizons developments** – members updated on local developments following the NoSPHN 3 horizons training events in May. A number of workshops had been held in Boards and the view was that the agenda was being moved forward. Members agreed to review locally whether further work/support was required at a NoS level; ensure that the thinking influenced the planning session on the 4<sup>th</sup> December and the development of the NoSPHN workplan; and that it be fed into other plans eg the regional clinical strategy.

All /  
PF

**ii Integration updates** - Members updated on local work which were at varying stages of development and agreed to continue to share updates / share papers as work progressed.

All

**49.2 Proposals for new work / other developments**

**a Meeting with MSP Maureen Watt 23rd November** – Pip updated on plans for the meeting with the Minister – Susan Webb, Hugo and Pip were attending. Pip asked for advice on the key messages members would wish to have shared at the meeting noting that in preparation she intended to speak to Heather Cowan (SG) who was also attending.

Members highlighted the need to emphasise that standard measures of deprivation were not helpful for remote and rural areas; to highlight with examples the extreme remoteness/isolation of some areas in the north and the need for support in working with national agencies to review the implications of this for national work / planning.

PF

**49.3 NoSPHN Workplan 2015/16 (and 2016/17)**

**a Workplan update (2015/16)** – members noted the workplan update with thanks.

**b NoSPHN budget 2015/16 and funding 2016/17** – Pip updated on the financial position noting there was approximately £500 left in the budget to the end of the financial year and asked that members highlight asap any likely difficulties for funding 2016/17.

All

**c Workforce Development meeting 4<sup>th</sup> December 2015 (Inverness)** – Pip shared the issues that had been highlighted to date for the agenda and asked for further suggestions. Maggie suggested that there was a need to explore further how to best deliver work on a NoS basis (eg methodologies) and to reflect on the changing public health landscape and how this was impacting at local and regional levels.

PF

**d Specific updates from key groups / programmes** and related actions not on the agenda – Pip noted the updates including the NoS ADTC Collaborative; the Homelessness, Housing and Public Health Event on the 25<sup>th</sup> January 2016 (in Inverness with remote access available) and NoS representation on the National Fuel Poverty Working Group through Mary MacLean (NHSWI).

**50/15 AOCB**

- **National Specialist Services usage** – Susan Webb had highlighted a query from NHSG re Board use of national services and Pip had re-shared the work NoSPHN had previously delivered for NoSPG and asked if there were similar queries in the other Boards that they let her know?
- In Hugo's absence Pip noted two items Hugo had highlighted for the agenda **ADP funding issues** and **UHI updates** and suggested that he share these issues by email.
- **NHSH research strategy** – Pip noted NHSH had completed a staff survey and drafted a research strategy (action plan) which could be shared with other Boards if interested.
- Maggie noted national correspondence seeking Boards representation on the national **Violence Prevention Special Interest Group** – which NHSG colleagues had agreed to attend on behalf of the NoS Boards.

All

HvW

**51/15 Items to be brought forward to future meetings:** there were none.

**52/15 Date of next meeting:** Pip noted that the meeting dates for 2016 were to be confirmed shortly.

LB

(Post meeting note: the next meeting is now confirmed as Monday 8th February 2016, 10-12.30).