

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

Wednesday 11th June 2014, 2:00– 4:30pm

All members joined by videoconference or teleconference

**NORTH OF SCOTLAND
PUBLIC HEALTH NETWORK**

Present:

Margaret Somerville - NoSPHN Lead, NHS Highland (Chair)

Bruce Archibald – Service Planning Lead, NHS Grampian (for Susan Webb)

Louise Wilson – Director of Public Health, NHS Orkney (by teleconference)

Sarah Taylor – Director of Public Health, NHS Shetland

Pip Farman – Public Health Specialist / North of Scotland Public Health Network Co-ordinator

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.

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

		Action
19/14	Welcomes and apologies: Margaret welcomed Bruce Archibald attending for Susan Webb. Apologies had been received from Maggie Watts, Phil Mackie, Jim Cannon, Susan Webb, Ann Conacher and Kerry Russell. Margaret noted that Elaine Mead (as Chair of NoSPG) and Jim Cannon had not as planned been able to attend the meeting to review NoSPHN / NoSPG work and future expectations and that this agenda had been rescheduled as part of an induction meeting for Louise Wilson (see Item 26/14) on the 16 th July and that she and Louise would be able to feedback at the next NoSPHN meeting in August.	MS/LW
20/14	Minutes of the last meeting 29 th April 2014 The minute of the meeting of the 29 th April 2014 was approved. Members gave no reason why the papers / minutes of the last meeting should not be made available by open access on the internet.	AM
21/14	Matters arising from the last meeting and not on the agenda <ul style="list-style-type: none">NHSG recruitment to Consultant posts – Bruce noted an appointment to the Consultant in Dental Public Health post had been made and the new post holder was due to start in September. Pip agreed to circulate the contact numbers of Dental Health Leads to Bruce for the induction programme. Recruitment to the Health Improvement Consultant Post was ongoing.ME/CFS – further to the national meeting in May 2014 Margaret agreed to follow up with Phil Mackie to understand if discussions at the event had an impact on what might be followed up regionally.NoSPHN terms of reference – the current terms of reference had been circulated following the last NoSPHN meeting http://www.nosphn.scot.nhs.uk/?page_id=11. Members confirmed they were happy with these and saw no reason to review them at this point in time.	PF MS
22/14	ScotPHN / NHSHS updates and developments 22.1 Scottish Public Health Network (ScotPHN) a Update - Members discussed the update from ScotPHN and asked that the New Ways of Working – NHS Lanarkshire Public Health Standards work be shared. Phil also to be asked advise how the Long Term Conditions, Learning Disabilities and Ophthalmology work were being scoped and who was being engaged in this. Members noted the rest of the report with thanks. b Welfare reform event proposal - Pip noted that following national and NHSH discussion of the proposal for a NHSH and NoSPHN event on welfare reform work and an assessment of appropriate remotely accessible venues, the event proposed at the last NoSPHN meeting was not being progressed but that this was to be reviewed following completion of the national pilot projects with the potential for a further or national event early next year. Meantime Pip agreed to invite members to share current work on welfare reform in the NoS Boards.	MS/PF PF/All

23/14 North of Scotland Planning Group / programmes

23.1 Feedback from NoSPG meetings - NoSPG meeting 28th May. The agenda for the NoSPG meeting had been circulated. Sarah discussed work relating to Sustaining Oncology Services, the NoSPG regional sustainability event in November, the appointment of and objectives of Kerry Russell – Programme Manager for Regional Sustainability (aligned to the intelligent region) and the evaluation of the Paediatric Unscheduled Care programme noting the management group for this had requested an extension of funding to plan the service beyond the pilot stage but that NoSPG had requested further work prior to making a decision and Sarah suggested members look out for further updates.

The next NoSPG is 3rd September and NoSPG meeting the 24th September.

23.2 Update on NoSPG workplan / programme developments including Intelligent Region

Pip highlighted that ongoing NoSPHN work with NoSPG included:

- Oncology services review – a meeting had been arranged for the 18th July with the NoSPG leads for the work Jim Cannon, Lesley Forsyth and Grace Ball with William Moore and Pip Farman to assess any public health support required for the work WM/PF
- Intelligent Region – discussions with Kerry Russell in the development of her role and the approach (members asked that Kerry be invited to the next meeting of the group) PF
- Small volumes and outcomes work (see item 23.4)
- Sarah had also flagged the cardiothoracic surgery review also as needing a discussion. PF

Pip noted that Jim Cannon had asked if support would be available for feasibility work needed to support decision making re a move of the national learning disability service (national designated service) into the medium secure forensic unit (Rohallion Unit) in Tayside. William Moore was exploring contacts in NHS Tayside. Discussion noted that one option would be to approach the authors of the original scoping work and that seeking support nationally might be helpful. Sarah offered NHSS support for scoping the work more clearly if required.

(Post meeting note – following a meeting with NoS Chief Executives – this piece of work is no longer required at the moment).

Members noted the reports circulated and in particular the helpfulness of the exception report and workplan updates.

23.3 NoSPHN annual report to NoSPG – Pip noted that she had submitted a NoSPHN section for the NoSPG annual report focussing primarily on NoSPHN work with NoSPG over the last year with links to the NoSPHN website for a description of other NoSPHN work.

Margaret agreed to review the submission on behalf of the Group

MS

23.4 Small volumes / outcomes and sustainability work

Pip noted that she had still to finalise the paper for the work completed so far and that a date for the small volumes meeting had been set for the 12th September (the invite for which was to go out shortly). Pip noted that this clashed with the national DsPH meeting and it would be helpful if at least one NoS DsPH could agree to be available for the meeting. Members agreed to advise who best should attend once the agendas of both meetings were clarified. Pip noted that the aim was to ensure that the work fed into the NoSPG event in November.

All/PF

24/14 Public Health Network Workplan

24.1 Update on NoSPHN programmes of work

a Health Protection (outcome of meeting 20th May 2014) – members noted the minute of the meeting circulated and highlighted that the session had been very helpful in exploring NoS Board approaches to on call scenarios but that the variation in for example volume of work across the NoS remained unclear. Louise noted ongoing concerns re service sustainability in NHSO and Sarah suggested that she and Louise discuss short term sustainability issues before exploring these with the other Boards (noting the current arrangements between NHSH and NHSWI). Pip advised that the next meeting of the Health Protection working group had been arranged for the 3rd October with a planned focus on the Health Protection Stocktake and updating on HPZone.

ST/LW

b Health Intelligence meeting 5th June 2014 – members noted the agenda for the meeting of the group which had been held the previous Thursday. Pip fed back key elements of the discussion that related to:

- Gaining a better understanding of the varied structures for health intelligence / information in the NoS Boards (not including NHST) which she estimated included 50 staff (18 of whom had a Public Health focus)
- CPD: the Groups intention to gain a better understanding of Health Intelligence and Health Information CPD needs (specialist and non-specialist) locally using eKSF and generating a set of top 10 questions for non-specialist staff to ask themselves in assessing their CPD needs; to map currently available CPD programmes; to share current CPD opportunities and explore further CPD opportunities (for example discussion on information management systems, data visualisation and DISCOVERY)
- To explore the use of social media as a means of supporting networking between the group
- To further explore options for specific regional pieces of work.

Pip noted that the group recognised the need to encourage links between health intelligence, health information, eHealth and other information colleagues (eg in clinical audit) in progressing work but that the systems / structures were not necessarily in place yet to do this at a regional level.

Sarah suggested there was a role for the group to more clearly defined approaches to regional health intelligence work i.e. how to build health intelligence needs into the commissioning of regional work.

c Health Improvement - Pip noted that the next meeting of the Health Improvement Collaborative had been set for the 5th September when the added value of regional approaches would be discussed.

d Service Improvement - (discussion of priorities highlighted 7th March meeting which had been circulated) – the group noted that much of NoSPHN's service improvement work was through its work with NoSPG and noted further work would be of a lower priority. The group highlighted that given ScotPHN links and work through the national Service Improvement/Healthcare Public Health Interest Group – there was a need to understand whether suggestions for service improvement work should best be progressed regionally or nationally. CPD issues in relation to service improvement tools had been highlighted for discussion at agenda Item 24.3 and the group agreed to review these at that point.

e Workforce planning

- Update on actions arising from meeting 7th March (paper circulated) - speaking to the paper circulated Pip advised that the majority of the actions from the session had been progressed with exception of Health Improvement and Service Improvement focussed proposals as noted in the discussion under Items 24.1c & d above.
- Speciality Meeting 28th May 2014 - noting the minute of the meeting circulated Margaret emphasised key points from the discussion with Jim Chalmers (Training Programme Director NES) which had been held to articulate some of the challenges to recruitment to speciality Public Health posts in the NoS and how to better promote the NoS as a training destination for Public Health. Key actions agreed included: the development of an information pack for next year's recruitment round; approaching the national Public Health Registrars Group for discussion of the issues; exploring funding to support placements across the NoS and amending job descriptions to encourage placements; promoting LATs and developing FY1 & FY2 taster sessions to encourage interest in Public Health. Jim had emailed the chair of the Registrars Group and was awaiting a response and Maggie Watts had circulated a paper highlighting successful approaches in Greenland which focused on the 'are you good enough to work here?' rather than approaches which appeared to plead for colleagues to come to an area (which members welcomed). Members supported the work described and offered the support of the current Registrars.
- Remote and Rural Public Health studies module – Maggie Watts had submitted a proposal she was developing in NHSWI (paper circulated) for a post graduate module in remote and rural Public Health and sought member's interest in developing this for NoS benefit. Members indicated that they would be supportive of the development and asked that if Maggie were to lead locally that she identify what sort of support would be required at a

PF to
link

MW

NoS level.

- Work experience enquiry (paper circulated) – Margaret advised of an email she had received from a third year medical student seeking a short period of work experience in the NoS. Members supported developing a programme and to use this as a basis for developing similar experiences. Pip agreed to progress discussions noting that there was no budget to support placements and to liaise with colleagues re a programme for the week of the 18th August. Members agreed to advise of meetings / events in their Board over that week that could be accessed remotely. PF All
- Next workforce planning meeting 23rd September – Margaret confirmed that the next scheduled session for the DsPH workforce discussion was the 23rd September in Inverness and suggested members identify items for the agenda by email over the summer for confirmation at the NoSPHN meeting in August. PF/All

f Futures thinking / planning

- IFF - Pip and Susan Webb had met with Margaret Hannah (IFF) on the 4th June to discuss options for support with using the 3 horizons approach. Support options agreed included providing individual coaching to a small number of colleagues actively applying 3 horizons thinking; the development of an action learning set (for a colleagues working through the approaches) and running learning sessions to introduce and share tools relating to the approach. Pip asked for feedback on colleagues in the North that might benefit from the different levels of support and agreed to update members on the final programme once agreed. Sarah noted interest in the action learning set and suggested the learning set(s) might need to be themed around common issues we are working on in Public Health. All PF/SW
- Integration agenda – Members updated briefly on the range of Board positions with regards to integration and Louise emphasised the need locally for joint strategic commissioning plans (i.e. to ensure future proofing of health plans for adults and mechanisms for achieving the desired outcomes). Noting the DsPH were to respond to the latest draft regulations and that there was a national DsPH learning set event planned for July, members agreed to review the need for any regionally focussed work at the August NoSPHN meeting. Meantime members agreed to share local developments on an ongoing basis by email. All

g Inequalities - with reference to the minute of the NoSPHN meeting 29th April pages 4-5 and proposals for research and/or work to support implementation of inequalities work members agreed that this should form the basis of discussion at a wider NoSPHN CPD event (see Item 24.3) to understand the appetite for work regionally as distinct from that being developed locally. PF

24.2 NoSPHN Work plans 2014/15

a Workplan prioritisation exercise - Members reflected on the outcome of the NoSPHN prioritisation exercise (paper circulated) and the discussion of work programmes during the meeting. Bruce asked how work had been prioritised previously and Sarah noted that suggestions for work were drawn from a variety of sources, that the key focus was on identifying the added value of progressing the work regionally (as compared to locally or nationally) and Pip noted the criteria previously agreed (page 3 of priorities paper Item 24.2a).

Following discussion members agreed that the priorities for NoSPHN for 2014/15 should be to:

- Continue core work (CPD etc) and existing work in progress
- Continue with programme of workforce development
- Scope work for the population of 900,00/1.3M project and what might be needed to influence the evaluation of Early Years Collaborative PF
- Maintain discussion re health protection work (discussion 3rd Oct 2014)
- Maintain the NoSPG work programme bringing any new proposals for work to NoSPHN for discussion
- Review Health Improvement objectives (following meeting 5th September)
- Review health service improvement and inequalities focussed suggestions with a view to meeting these through a NoSPHN CPD event
- All other suggestions for work to be kept on an 'ongoing review' list as part of the workplan.

	Pip agreed to update the NoSPHN workplan accordingly.	PF
	b Workplan update (2014/15) - Members noted the update circulated.	
	c Specific updates from key groups / programmes and related actions not on the agenda (paper circulated) - members noted the updates with thanks and supported a proposal for a discussion on the regional added value of work through ADTCS, Pharmaceutical Public Health and Pharmacy colleagues after the national ADTC event in July.	SF/PF
	d Responding to consultations (methodologies) eg rare diseases paper. Members noted confusion arising from emails on the consultation on the rare diseases paper and recognised that given the range of sources and types of consultations requested of Boards that one approach to responding would not fit all scenarios but that there was a need in suggesting a collaborative approach to responding to be clear on what type of methodology was required i.e. one person responding on behalf of all Boards; one Board preparing a response that all Boards then used in their response; Boards each sharing their responses for information etc.	PF
	24.3 NoSPHN 2014/15 CPD plans NoSPHN event proposal (paper circulated) – members supported the topics suggested for a NoSPHN CPD in particular those emphasised during discussion of the work programmes earlier in the agenda (inequalities, futures thinking including developing horizon champions and goals and service improvement tools), but expressed concern about the limitations of larger venues now available for videoconferencing and the affordability of the event as a result (in the context of the overall NoSPHN project budget). Members agreed that once Board access to web based conferencing was clarified (eg Cisco WebEx) that costings should be sought to provide a CPD session in one venue linked by web conferencing or providing the CPD suggested all through web conferencing focused on single issues (i.e. a series of smaller events all linked by Web Conference) noting that the face to face networking opportunities might be limited as a result and there was not a desire to charge participants for attending.	PF
	24.4 Scottish Affairs Committee Faculty Conference 2014 (Aviemore) <ul style="list-style-type: none"> Update on programme – Pip summarised the draft programme for the conference and the estimated costs of providing videoconference access to the event (approximately £2,000) for which the organising committee were having to look at options for charging. Members noted that if there was to be a charge the videoconferencing would need to work and agreed that that costed options should be explored including NoSPHN subsidising part of the cost for videoconferencing. Pip noted that web based conferencing was also be explored which was cheaper but was subject to Board accessibility. Abstracts deadline – Pip reminded members of the abstract deadline of the 23rd June 2014 and asked if members wished to see NoSPHN abstracts submitted? Members agreed there were no substantive pieces of work to submit on this occasion. 	PF
25/14	NoS MOU for Surge Capacity (paper circulated) - Margaret noted that a revised draft of the MOU had been forwarded to Health Protection Scotland (Kate Harley) on which we were awaiting comment but asked that on the assumption changes would not be significant that members sign off the changes proposed. Members approved the changes noted and Pip agreed to finalise the documentation once feedback form HPS had been received.	PF
26/14	NoSPHN Lead role - Margaret advised that Louise Wilson (DPH NHSO) had been nominated by all DsPH in the North to take on the NoSPHN Lead role from August 2014 and asked that members confirm this arrangement. Members thanked Louise for taking on the role. A handover / induction meeting had been organised for the 15 th July with the expectation of a formal handover at the next NoSPHN meeting on the 21 st August.	MS
	Margret proposed that the group explore a deputy role also but without a required commitment to subsequently move into the Lead role and suggested she write to all members not present to suggest this and explore interest.	MS
27/14	AOCB <ul style="list-style-type: none"> Members noted emails from Sarah Taylor with regard to national and local processes in response to the B. Cereus incident and suggested the issues highlighted be flagged at the national DsPH meeting. 	ST

28/14 **Items to be brought forward to future meetings:** members were asked to highlight and agree proposals for items to be brought forward to the next meeting (21st August 2014) and highlight further items for future discussion. These included:

- Integration agenda update
- Substance misuse developments (Susan Webb/ Chris Littlejohn)
- NoSPHN Quality Framework

29/14 **Date of next meeting:** Thursday 21st August 2 – 4.30pm

Dates for 2014: (all dates 2pm – 4.30pm with video/teleconference)

Tuesday 28th October

Wednesday 10th December