

Present:

Louise Wilson	Director of Public Health, NHS Orkney / NoSPHN Lead (Chair)
Maggie Watts	Director of Public Health, NHS Western Isles
Susan Webb	Director of Public Health, NHS Grampian and NHS Shetland
Hugo van Woerden	Director of Public Health, NHS Highland
Jim Cannon	Director, North of Scotland Planning Group (NoSPG)
Pip Farman	Public Health Specialist / North of Scotland Public Health Network Coordinator

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

		Action
11/17	Welcomes Apologies had been received from: Elaine Garman, Chris Littlejohn, Ann Conacher, Colin Gilmour	
12/17	Minute of the last meeting 7 th February 2017 The Minute of the last meeting 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.	LB
13/17	Matters arising from the last meeting and not on the agenda <ul style="list-style-type: none"> Yammer test – Pip noted she had still to set up a Yammer group for the Steering Group and that Health Improvement colleagues had asked to test the approach similarly. DISCOVERY (NoSPG level 2 access developments) – Jaime Lyon had advised that she had still follow this up and Pip noted increasing needs being highlighted for cross Board information sharing arrangements. FMLM leadership courses – Louise had highlighted to FMLM NoSPHN's interest in hosting a regional webinar session to share perspectives on leading in remote and rural settings. 	PF LW
14/17	Scottish Public Health Network (ScotPHN) - updates 14.1 Updates / workplan <p>a ScotPHN Workplan update – members noted the update with thanks.</p> <p>b Maintaining links with ScotPHN – Members discussed a proposal that ScotPHN no longer attend every NoSPHN meeting. Members noted: the importance of retaining strong links with ScotPHN; asked that Pip schedule regular meetings with Phil Mackie to ensure work remained complementary; that DsPH retain links with ScotPHN via the SDsPH Group and representation on the ScotPHN Advisory Board; and requested that update papers continue to be submitted for the NoSPHN agenda.</p>	PF DsPH LW
15/17	North of Scotland Planning Group / programmes 15.1 Feedback from NoSPG meetings (NoSPG papers available at http://www.nospg.nhsscotland.com). <p>a NoSPG meeting 15th march 2017 – Jim and Hugo advised that most of the relevant items were on the agenda but highlighted discussion on Cytology services (paper presented by Rob Henderson CPHM, NHS Highland) and Forensic services (optimal models of care) for which a paper was due to be presented to the June NoSPG meeting.</p> <p>b NoSPG Annual report – Pip noted the NoSPHN annual report to NoSPG was due by the 28th April and Pip agreed to submit the paperwork with sign off from Louise.</p> <p>15.2 Update on NoSPG workplan / programme developments <p>a NoS Clinical Strategy development - Jim thanked colleagues for feedback on the strategy to date (and on which he still welcomed feedback) - on the basis of which the strategy was being redrafted for discussion at consultation events scheduled for June. Discussion of the paper highlighted: the need to ensure recognition of the needs of peripheral areas and variation across these areas (eg the need to reverse population decline); have a strong focus on sustainability; include prevention and clarify why a North of Scotland clinical strategy was required (compared to for example a NoS approach to implementing the national clinical strategy). Members agreed</p> </p>	PF/LW

to send their comments direct to Jim.

All

b Regional Delivery Plan – Jim noted that the RDP (the building blocks for planning) would in effect be the implementation plan for the clinical strategy and outlined discussion with the other regions which had highlighted a model of information / support needs being outlined by the SEAT. Jim spoke to the paper and asked for feedback in terms of deliverability and gaps. Jim anticipated that in addition to the priorities currently noted in the strategy that further priorities may emerge from the evidence eg collaboration on facilities / master plans. Jim noted a draft plan was required by September 2017, to be finalised by March 2018 and that the appointment of the Regional Chief Executive Lead would be key to further developments.

Discussion noted: concerns about deliverability; ensuring equity for local populations; the level of the plan (should it focus more on high level instructions; priorities and evidence; and key outcomes for patients for the next 1-3 years); the need to assess whether some of the information might be generated on a once for Scotland basis (rather than gathered separately across the 3 regions); ensuring developments build trust in working across the Boards at a regional level; clarifying whether the focus was on specialist secondary services only or on whole system change; and having a clear focus on what was aiming to be achieved.

Members referred Jim to local commissioning plans as the baseline for some of the needs / data requirements; the NoSPHN criteria for regional action; the potential use of SOURCE data; and noted the need to make links to the work being developed through the Public Health Shared Services Review work programmes. Pip agreed to share links to the work highlighted and summarise previous NoS work which aligned to the information needs highlighted in the paper.

PF

Hugo agreed to contact public health colleagues in each of the regions to establish links, understand what work was being undertaken and explore NoS capacity to support developments and whether there was a case for seeking NoS funding to increase capacity.

HvW

c Cancer intelligence hub – Pip updated on the meeting on the 23rd March 2017 which had attracted a range of colleagues (cancer audit, planners, e-health, and public health) and at which there had been a good discussion on challenges, opportunities and joint work and the Terms of reference had been finalised. Pip advised that national funding had been secured for the Regional Cancer Information System Project developed by NHS Grampian colleagues but being progressed as a NoS development which was to report to the group. Pip noted that whilst NoSPHN had provided support to the setting up of the group, the administration was now being transferring to NoSPG and William Moore (NHSG – CPH) was chairing the group for the first year.

16/17 NoSPHN Workplan 2016/17 and 17/18

a Determining NoSPHN priorities for the 2017/18 workplan

Members accepted the summary note of the NoSPHN development day (1st March 2017), discussed the NoSPHN priorities emerging from the day and sought to agree priorities and the top 3 NoSPHN visibility programmes for the year. Overall priorities emerging were:

- Social marketing stratification programme (for NoSPHN and feeding into eg NoSPG strategy/ programmes) (LW, HvW)
- Realistic medicine – with a focus on health literacy / hacking events (LW, HvW)
- Supporting the NoS clinical strategy development (LW, HvW)
- Influencing developments nationally eg SSR, PH review (HvW, MW)
- Workforce development - as a key enabler (SW)
- Health improvement (health equity) particularly as it might relate to the other developments suggested eg health literacy (SW)
- Health protection developments - resilience and sustainability (SW, MW)
- Wider determinants eg health and housing; transport (HITRANS/NESTRANS links); digital connectivity and how this might impact on promoting the NoS as a place to train and work (ie sustainability) (MW, SW).

In undertaking work Susan noted the need to be clear on what we were aiming to achieve for public health at: locality, IJB, Health Board, regional and national levels and in so doing being clear on how to position ourselves effectively.

The group agreed further work was needed to clarify and work up the proposals above for discussion at the next NoSPHN meeting.

All

b Workplan update 2017/18. Pip highlighted aspects of the ongoing programmes of work and noted that work completed in 2016/17 had been removed from the workplan.

c Specific updates from key groups / programmes and related actions not on the agenda – members noted the updates.

17/17 **National reviews/developments**

a Public Health Review – no update available.

b Public Health Strategy – a Statement of Public Health Priorities was expected.

c Shared Services Review (SSR) work streams:

- Health protection on call – Ken Oates was representing the NoS DsPH and following requests for nominations, Liz Smart (NHS) with Pip as deputy had agreed to represent NoS non health protection specialists – no meeting date had been set.
- Screening services – members were unclear now how this work stream was to be progressed but felt it would likely be subsumed into the SG screening review plans.
- National and regional planning (first meeting held 14th March) – Maggie noted that scoping work was being progressed, Carol Davidson had now stepped down as chair and that regional and national arrangements as they related to the other regions was being explored.
- Health Intelligence (first meeting held 22nd March) – Hugo advised that initial actions were being progressed including a survey of the health intelligence workforce and development needs.
- Knowledge services - no update was available.
- Developmental – Susan noted the work programme was still being scoped and she suggested that this be an item for discussion at the next NoSPHN meeting.

SW

Pip reminded colleagues about the Remote, Rural and Island proofing checklist which had been sent to Mahmood Adil as Chair of the SRR-PH programme and encouraged members to share the work through the work streams as work progressed.

All

d Screening services

Susan noted proposals to move to two cytology laboratories in Scotland (likely Edinburgh and Glasgow) and asked whether there was a case to make (geographically or for the wider system) to promote the NoS to be a centre / as a third centre and if so how best to make the case to Board Chief Executives? Members felt the influence might best come through the national networks and Maggie noted current NHSWI arrangements aligned to Glasgow and sought to understand whether there was capacity in the NoS to comply with quality assurance standards and also workforce capacity? Hugo noted the potential also to explore capacity out with Scotland. Jim agreed to speak first with Mike Winter to understand the current assumptions and whether there was a preference being worked up.

JC

Susan also noted that there was no one from the NoS on the National Screening Programme Quality Assurance Reference Groups – and asked if this was an issue? Members agreed to test with colleagues locally if representation was available and Louise agreed to highlight if this was the case.

DsPH/
LW

e Health and Social Care Delivery Plan developments – Members noted local plans to ensure public health elements were being recognised.

18/17 **Public Health Network Workplan** **Update on NoSPHN programmes of work**

a Health Protection

i NoS Island Health Protection Resilience / rota developments – Louise noted the rota was still working, issues of cover were being worked through as they arose (with others potentially interested in joining the rota) and highlighted financial issues that will need to be considered in the future.

ii Review of the island on call rota (meeting 24th April) – Pip noted that the meeting had been set up to reflect on lessons learned and asked for feedback on the agenda and who else might be invited to attend. Members agreed an outline agenda covering: what has worked well; what has worked not so well; lessons learned; planning going forward / sustainability; and any implications for NoS / national SRR. Members asked Pip to contact Susan to clarify if further colleagues from NHSS and NHSG should be invited.

PF

b Workforce planning / developments / CPD

i Scottish Faculty Conference 2nd/3rd November 2017 (Aviemore) – members noted the date of the conference and that the theme was Public Health in Scotland - Transcending Boundaries and Pip encouraged members to link with their Board representatives to identify speakers and events for the conference.

All

Maggie noted the next Public Health Islands Conference was to be held in Jersey 6/7th July 2017 and that she would circulate further information. (*Post meeting note:* <http://www.iiphf.org/>).

MW

c Futures thinking / planning

i Scenarios development – Louise updated members on the work and talked through the scenarios developed in the paper circulated. Members welcomed the work and appreciated seeing an example in practice. Discussion supported a continuance of the work and interest in exploring scenarios to support: health and health care public health developments; outputs to influence the NoSPHN workplan; the social marketing proposal and to explore links to the globalisation agenda (eg with impacts locally).

LW/PF

ii Reflections on the remote DPH role – Pip noted that Susan and she had started but had yet to completed the review process. Members highlighted the need to reflect on the impacts of having one DPH less in the NoS as well as the reflections from the position of the shared role and agreed that this should be the considered as an item on the agenda of the next meeting.

PF/SW

iii Local Integration updates – Hugo noted the development of a NHS Highland Strategic Quality and Sustainability Plan which he agreed to share. (*Post meeting note:* [NHSH Strategic Quality and Sustainability Plan](#)).

PF

HvW

19/17 AOCB – there were none.

20/17 Items to be brought forward to future meetings – please forward to Pip.

All

21/17 Dates of next / future meetings: 23rd May

22nd August (by vc/tc, 2 - 4.30pm)

5th December (by vc/tc, 2 - 4.30pm)