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

Thursday 3 February 2011, 2:00 – 4:30 pm All members joined by video or teleconference

Present:

Sarah Taylor, NoSPHN Lead and Director of Public Health, NHS Shetland *(Chair)* Pip Farman, North of Scotland Public Health Network Co-ordinator Margaret Somerville, Director of Public Health, NHS Highland Susan Webb, Deputy Director of Public Health, NHS Grampian Ken Black, Consultant in Public Health Medicine Elaine Garman, Public Health Specialist (for Items 4.7 and 9.1) Angus MacKiggan, Well North Co-ordinator (for Items 4.7 and 9.1)

In attendance:

Alex Medcalf, NHS Highland (Minute)

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 web.

01/11 Welcome and Apologies

Apologies had been received from Lesley Wilkie, Phil Mackie and Ann Conacher (ScotPHN), Sharon Pfleger, Louise Wilson, Tom Laverty, Martin Malcolm, Susan Vaughan, Noelle O'Neill and Emma Witney, NHS Health Scotland

02/11 Minutes of last meeting (15 December 2010)

The minutes were read and approved for accuracy. Members gave no reason as to why the papers / minutes of the last meeting should not be made available by open access on the NoSPHN website.

03/11 Matters Arising not on the agenda

HEAT targets and Remote and Rural Inequalities

Noting previous discussions and ongoing concerns about HEAT targets, the use if SIMD and Boards' rationales for targeting inequalities, members supported a proposal to establish an email working group discussion to share Boards' rationales for targeting inequalities to inform:

- LDP submissions (with respect to child healthy weight, smoking and CHD/health checks) with a view to influencing LDPs before they are signed off mid March
- the Keep Well Extension Board (meetings Feb/ March) whose guidance was expected by April and
- To consider a paper being drafted by Colin Gilmour to describe the context to these issues.

Members agreed that Health Intelligence and Health Improvement/health inequalities Leads should be the key contacts for the discussion group and that Pip would support the discussion.

Members noted all other matters arising / items were on the agenda and that Pip would discuss PF/AK with regard to Item 46.2 if Ann Kerr had asked for/ received NHSHS customer feedback.

04/11 Public Health Network Workplan

4.1 Civil Contingencies – a common approach in the North of Scotland

Due to the inclement weather conditions Tom Laverty NHSWI Emergency Planning Officer had submitted apologies. In his absence members discussed the paper circulated and noted support for the principle of a common approach to Civil Contingencies but were concerned to ensure that local procedures/emphasises were retained in local plans particularly as it was noted that some plans were closely aligned to formats used in the Local Authority. In addition there was concern about how much work would be involved.

It was proposed that Tom and Emergency Planning colleagues would present back to the next TS meeting of NoSPHN a paper to detail further what the work would entail ie how much change was needed, on what, how much commitment beyond EPOs if any was required and whether

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Action

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any decision making was required in order to deliver the work. As previously noted NHSG were unclear of the added value the approach would bring in view of national approaches and Tom was asked to liaise with NHSG colleagues to assess this further.

4.2 Review of NoS Surge Capacity MOU

Noting the MOU paper circulated had been revised with the support of Helen Howie, Ken Oates and Mary Morgan HPS (the principle changes had involved changing references to SCIEH to HPS), Members approved the revised MOU and suggested that the HPS papers circulated should be referenced in the document. Members agreed to sign off the MOU electronically provided due process was adhered to and that the work should be noted to NoSPG.

4.3 Public Health Overview / action plan

In Lesley's absence it was agreed to seek an update following the CMO meeting on the 15th February. Pip noted also that Alison McCallum on behalf of SEAT had requested information on the NoSPHN work plan (particularly NoSPG related work) and funding. Members agreed that the updated work plan presented to the meeting should be circulated.

4.4 NoSPHN Workplan 2010 – 2011 / 2011 - 2012

(a) Workplan update (2010/11) and forward plan for 2011/12

The Group noted the work plan circulated combined this and next years work, that the need for the cross boundary work was under review and that for the 2011/12 plan completed work would be removed. Members were asked to submit to Pip any further suggestions for work next year who also noted that she and Sarah had a meeting scheduled with Annie Ingram for the 10th March to review NoSPG work and Pip had a meeting with Peter Gent to discuss NOSCAN work also. The plan in its current format was noted.

(b) Specific updates from Groups / programmes not on the agenda

The Group noted the updates with thanks and commented on:

- The Review of NSAG applications. Susan Laidlaw in NHSS and a Trainee in NHSH were nominated to be approached to support the work (noting Phil Mackie had also agreed to review one of the applications) and Pip would also support if required.
- Pip also updated on the Social Marketing courses which were running in or for all NoS Boards between the 24th February and 4th March.
- Pip noted the Child health evaluation report was to be submitted to the group by email prior to submission to NoSPG.
- Budget Pip summarised plans to conclude spend within the NoSPHN budget.

(c) NoSPHN draft Annual Report 2010/2011

NoSPG had asked for a NoSPHN Annual report to be submitted. Members approved the report asking that web links to the relevant documents be highlighted in the report. Pip noted that once finalised the report would also be converted into NoSPHN newsletter.

4.5 Review of delivery of CAMHS Needs Assessment and support to NoSPHN Programmes of work

Discussing the paper circulated members thanked all those that had been involved in the review and agreed that the actions in the paper should be progressed principally by reviewing the NoSPHN scoping approach / requirements, guidance to those completing work on NoSPHN's behalf and developing guides on needs assessment and document etiquette in consultation with relevant NoSPHN and NoSPG colleagues. Members asked that the work be added to the NoSPHN work plan.

4.6 Public Health Faculty Conference 10th to 11th November 2011

Pip advised that Richard Snowden on behalf of the Faculty Conference organisers had made contact with regard to the 2011 conference and had requested names of staff to be engaged in the working group. Members agreed that NoSPHN should again be used as the NoS link for the event and members agreed to submit to Pip the names of staff (minimum one per Board) who wished to be involved. Members also agreed to suggestions through representatives on a theme(s) for the conference.

4.7 Well North – Remote and Rural Anticipatory Care Project

Update and Draft final evaluation report. These items were discussed at the end of the meeting in a closed meeting of the DsPH - Item 9.1.

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05/11 North of Scotland Planning Group

5.1 Feedback NoSPG IPG Group

Sarah highlighted for information those items not on the NoSPHN agenda including the National Telestroke Project, Modernisation Project for Wheelchair services, NPF Interventional Radiology out of hours work, Eating Disorders and national risk share and the Cardiac ORT bid.

5.2 Horizon Scanning to Inform NoSPG Decision Making in the Future

Members reviewed the information gathered and issues raised to date and the following was discussed:

- The priority was to see if there was evidence available to help Boards with their priorities / planning (eg changes in demography/ risk factors etc and impacts).
- To what degree horizon scanning elements were components in existing work as highlighted in the paper circulated?
- That the work was intended to direct NoSPG work but might also seek to ensure that Horizon Scanning was embedded in NoSPG/Boards practice in the future in this respect it was agreed it would be useful for Public Health intentions to be drafted into the work.
- Further work would be a recommendation of this work (not part of the initial work).

The following was agreed:

- Sarah and Pip would meet to review the work outlined by Boards and agree a framework for organising the work into subject matter (epidemiology/ topics etc) and timeframes and to review a sample of the work to test the feasibility of the framework / work.
- The first meeting of the working group would be deferred until March (to allow this initial work to be done).

5.3 ADTC Collaborative

Members noted the update from Sharon with thanks and asked that progress on delivery be reported as soon as possible.

6/11 Further Business

6.1 Scottish Public Health Network (ScotPHN)

The Group noted the reference in the ScotPHN workplan to a HIA on off shore wind farms. Margaret advised that this was a NHSH focussed piece of work but members noted their interest in the work and asked to be kept appraised. Sarah highlighted work that had been conducted on a proposal for an inshore wind farm on Shetland. Members noted the update given with thanks.

6.2 NHS Health Scotland

Members noted the report circulated with thanks.

07/11 AOCB

Pip noted changes in staffing at NoSPG and advised that Ken Mitchell and Neil Strachan would be taking on the Acute Services and CAMHS / Child Health programmes respectively from April 2011.

08/11 Date of next meeting:

Wednesday 20 April – <u>10am – 12.30pm</u> with video/teleconference venues.

2011 meeting dates- all 2 - 4.30pm

Wednesday 15 June Wednesday 3 August Wednesday 5 October Wednesday 7 December **Closed Discussion of DsPH -** it was noted that the following items were to be taken in closed session as the papers circulated for discussion were in draft format and were not to be made widely available.

09/11 9.1 Well North Draft Final Evaluation report (draft paper circulated by email to DsPH only).

Elaine advised that the Well North Evaluation sub group had met on Tuesday 25th February to consider the draft report and had asked for a number of amendments to be made which had been summarised on the front of the paper circulated. ODS were also still in the process of checking the accuracy of comments with contributors / WN programmes. The paper was to be further discussed at a meeting of Stakeholders on the 9th February.

Members noted the report with interest and agreed it was a useful summary and that it was essential that Stakeholders should be enabled to comment on the report. It was suggested that there were key elements that would be of interest to the Keep Well Extension Board and that these should be brought forward in the document. Members asked that where problems with developments were noted in the report that there was an understanding given of why they did not work (eg because approach was wrong or extenuating factors) with sufficient detail so that we would know what to do differently next time. The Group noted the final deadline for comments was 14th February.

The Group agreed that the final report should be brought to the April meeting of NoSPHN for EG/AM sign off before wider distribution and that a presentation to NoSPG should also be considered.

9.2 NoS Review of Weight Management Services in the North of Scotland (draft paper circulated by email to DsPH only).

Pip noted that Roseanne Urquhart was unable to attend the meeting but would value feedback from DsPH prior to its submission to NoSPG on the 23rd February as detailed on the cover page.

The group discussed the report and noted:

- The report was helpful.
- The need to ensure read across between the examples given in the demand and capacity section and the options proposed at the ends of the report (ie numbers/ detail).
- Margaret agreed to give detailed feedback.
- NoSPHN gave particular support to the recommendations ensuring a commitment to upstream approaches (levels 1-3 of the care pathway).

Pip agreed to feedback the issues to Roseanne.

PF

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