

**NORTH OF SCOTLAND  
PUBLIC HEALTH NETWORK**

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Sarah Taylor, NoSPHN Lead and Director of Public Health, NHS Shetland (*Chair*)  
Pip Farman, North of Scotland Public Health Network Co-ordinator  
Noelle O'Neill, Public Health Scientist, NHS Highland  
Linda Leighton-Beck, Social Inclusion Manager, NHS Grampian  
Ken Mitchell, Programme Manager, North of Scotland Planning Group (for Item 14.2)  
Louise Wilson, Director of Public Health, NHS Orkney  
Martin Malcolm, Health Intelligence, NHS Western Isles  
Elaine Garman, Public Health Specialist, NHS Highland  
Angus MacKiggan, Well North Co-ordinator, NHS Highland (for Item 13.3)  
Ann Conacher, ScotPHN, NHS Health Scotland  
Paul Barton, NHS Health Scotland (for Item 15.2)

Alex Medcalf, NHS Highland (*Minute*)

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.

## 10/11 Welcome and Apologies

**11/11 Minutes of last meeting (3 February 2011)**

AM

- **Civil contingencies – a common approach in the North of Scotland**

TL

## PF

### 13.1 Public Health CMO Overview / action plan

PF/ST

### 13.2 Review of NoS Surge Capacity MOU

Pip advised that the final Surge Capacity MOU had been signed off but a number of issues had been raised in the process which required clarification - these had been summarised in an addendum to the MOU. The members considered that the clarifications did not materially alter the MOU and approved the addendum agreeing that it should be attached to the MOU for future reference and circulated to Boards.

PF

### 13.3 Anticipatory Care

#### 13.3i Well North Remote and Rural Anticipatory Care Project

##### a) Well North Update

Elaine spoke to the update paper and advised that the Well North Group was due to meet to finalise issues the following week with the intention that the Group would continue to meet until the end of the funding period. The update was noted.

##### b) Final Evaluation report

Speaking to the main Well North Evaluation report Elaine reminded members that the focus of the evaluation was on targeting and reach (and not on outcomes). Elaine highlighted key issues including the Literature Review which was considered helpful (although there were concerns this had not been linked to the main body of the report), noted the ongoing challenges with targeting and inequalities and the success of the programmes in engaging target groups

The Group commented very positively on the report noting that the work had been valuable and that Boards were in a better position now to look to mainstreaming as a result, although recognising that there were ongoing concerns about the cost effectiveness of health checks. Members highlighted a number of key themes arising from the report and further NoSPHN perspectives which it was agreed should be more explicitly stated in a two sided covering paper directed at a number of audiences (Board Chief Executives, NoSPG, Keep Well Extension Board, Keep Well Programme Board, NHSHS, the Primary Care Prevention Group and other colleagues). It was agreed the paper should include key messages about the impact of the work for mainstreaming, where appropriate more tentative messages for information and to group the lessons learned broadly nationally and locally. It was agreed the paper should be drafted for comment so that it could be submitted with the final report to the Keep Well Extension Board at the end of May.

EG/AM  
/PF

The Group formally approved the evaluation report and members noted the huge amount of work that had gone into both the delivery of the evaluation, the implementation of the programmes the significant amount of learning that had been gained. The Group noted their thanks to all those who had been involved at local, regional and national levels.

#### 13.3ii Mainstreaming Health Checks and

#### 13.3iii HEAT targets and targeting Remote and Rural Inequalities

Noting the mainstreaming guidance issued from the Scottish Government and previous NoSPHN discussions re the need for a consistent NoS rationale for targeting of inequalities, members discussed the papers presented. The Group agreed that it would be challenging by June nor would it be appropriate to agree final rationales for targeting but agreed to explore further locally a rationale based on use of:

- Datzones
- Domains
- Local intelligence (ie an understanding of local communities and the factors required to achieve successful outcomes in local communities – as noted in the Well North Evaluation report).

All

The group further agreed to support ongoing work to explore knowledge development and more systematic approaches to targeting.

CG/PLH  
/HI  
Leads

### 13.4 Public Health Faculty Conference 10<sup>th</sup> to 11<sup>th</sup> November 2011

Pip highlighted key developments for the Conference noting that Margaret was chairing the working group, the event was to be held on the 10<sup>th</sup> /11<sup>th</sup> November in Aviemore and that the proposed theme / focus was on Quality (in a climate of change) – picking up on quality in particular, the Public Health domains and climate change – as well as the usual topical items. It was expected that the call for abstracts would go out by end of April with a deadline of the end of June.

Pip asked for feedback on the focus/title, any speakers that members would like to suggest, suggestions for an interactive session at the event and on whether members would be willing

to support a NoSPHN prize at the event (eg for best abstract / poster with rural focus) or support the videoconferencing package?

Members supported the theme noting the need to ensure the programme was relevant to current practice / issues. The group highlighted NoSPHN work that was felt should be submitted as abstracts (eg Well North, Horizon scanning and Child Health). All were asked to further feedback ideas as requested to their local representative on the working group.

All

### **13.5 NoSPHN Workplan 2010 – 2011 / 2011- 2012**

**a) Workplan update 2011/12** - Members approved the 2011/12 workplan. Noting an initial approach from NSD for support with a review of the PICU beds nationally Pip proposed speaking to Ann Conacher / Phil Mackie in the first instance which was supported.

PF

**b) Specific updates from Groups** - Members noted the specific updates from key groups with thanks.

### **13.6 NoSPHN Budget 2010/11 and 2011/12**

Pip advised that she had still to receive the final budget out turn for the end of March but noted the final commitments made. There had been a delay in receiving the ADTC Health Economic invoice and Pip advised that the 2010/11 costs for this may have to be picked up in the new financial year (£1k). Noting the financial position for 2011/12 Pip advised that she anticipated there would be approximately £2k available to spend on programme work (that was not already committed). Members noted the position and supported the proposal for some support to the Faculty Conference (details to be agreed).

MS/PF

## **14/11 North of Scotland Planning Group**

### **14.1 Feedback NoSPG meeting (23<sup>rd</sup> February 2011)**

Sarah summarised key issues from the last meetings of NoS IPG and NoSPG including discussions on TAGRA (including the role of a working group looking at allocations and impacts on Remote and Rural Boards) and the Weight Management paper which had been well received and on which NoSPG outcomes were tied into a event that was being organised nationally by the NPF (2<sup>nd</sup> June 2011).

### **14.2 Child Health Evaluation**

Ken Mitchell advised that the Scottish Government had revised the date for submission of the final NDP reports to June 2011 and that the Child Health Evaluation report would now be considered at NoSPG, also in June. Work was ongoing to finalise the main body of the report including the regional and pan Scotland elements. The Appendices to the report had been circulated and Ken asked members for advice on whether the outputs of the work were felt to be appropriate or whether there were any gaps?

Members noted the need to address the various audiences of the work (NDP, NoSPG and NoSPHN) and suggested that the body of the report would need more detail on:

- the methodology, impacts and outcomes
- to show how the staffing elements were now more joined up as part of a networked approach
- state why NHSWI developments were not part of the report
- demonstrate how there had been improved equity of access to services
- improve consistency of presentation between the appendices.

Ken agreed to revise and circulate the complete report over the following 2-3 weeks to the NoSPHN working group and further to NoSPHN members and bring back to the June NoSPHN Group meeting (prior to submission to NoSPG).

KM

### **14.3 Horizon Scanning to Inform NoSPG Decision Making in the Future**

In Sarah's temporary absence Pip updated members on work highlighting that:

- A working definition of Horizon Scanning was being developed.
- An action plan had been developed (and circulated).
- A literature review was being scoped for wider consideration.
- A GROS Demographic review had been commissioned from NHSS.
- Pip was reviewing Board Clinical strategies, DsPH reports and diabetes plans (for evidence of horizon scanning).
- NHSH were reviewing local documents for evidence of horizon scanning.

Pip noted that the first meeting of working group will be on 5<sup>th</sup> May. Members noted feedback /progress to date.

#### **14.4 NoSPG workplan 2011/12**

Noting that NoSPHN had been asked to submit its key objectives as part of the NoSPG workplan Pip had submitted plans as detailed in the paper circulated. Pip advised that she and Sarah were to meet with Annie Ingram on the 26<sup>th</sup> April to finalise the plan but that she was confident that key work had been captured to date. Members approved the draft submission.

### **15/11 Further Business**

#### **15.1 Scottish Public Health Network (ScotPHN)**

Ann advised that the ScotPHN work plan was being finalised, highlighted work with regard to Communication and Engagement in ScotPHN and that ScotPHN were being reviewed as part of a NPF review of all national networks (as to quality and added value). Ann also noted that Phil Mackie's commitment to ScotPHN was being increased to 7 sessions a week within an overall full time secondment to NHSHS. Members thanked Ann for the report and noted the update given.

#### **15.2 NHS Health Scotland**

Paul spoke to the papers circulated highlighting the continuing NHSHS focus on Equally Well, early years, antipoverty and the quality strategy. The focus for the NHSHS business plan was on HEAT targets, other targets (not HEAT), Better Practice and Resource management. With respect to the latter Paul noted that Partnership Management arrangements were being reviewed particularly to support strategic connections with Boards (the consumer survey had indicated that operational links were seen to be working well) and that NHSHS would be talking with Boards about how best to achieve this. Paul anticipated that this would not affect working relationships with NoSPHN which NHSHS were keen to continue. All members were further asked to submit comments to Paul on the Business Plan. Members thanked Paul for the update.

All

#### **15.3 Review of Cairngorm National Park (CNP) Plan**

Pip advised that Margaret had been approached by the CNP who had asked for Public Health advice on their Park Plan which was due to be revised this year. As the Park covered NHSG, NHST and NHSH boundaries Margaret wondered if there was interest in approaching this as a NoSPHN piece of work? The Group supported the approach in principle asking for assurances of support from NHSG and NHST and clarification on what support would be required.

PF/MS

### **16/11 AOCB**

Pip advised that NoSPG had been approached by Dr Donald Morrison, Clinical Indicators Programme Manager ISD with a view to exploring how best to exploit and present data to Boards with smaller hospitals. The group supported a proposal that this discussion should be picked up by the NoSPHN Health Intelligence Group with reporting back to NoSPHN and NoSPG at a later date.

HI  
Leads

### **17/11 Date of next meeting:**

Wednesday 15<sup>th</sup> June 2011, 2pm - 4.30pm with video/ teleconferencing

#### **Following meeting dates – all 2-4.30pm**

Wednesday 3<sup>rd</sup> August

Wednesday 5<sup>th</sup> October

Wednesday 7<sup>th</sup> December