

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

Wednesday 19th December 2012, 2:00 – 4:30 pm
All members joined by videoconference

**NORTH OF SCOTLAND
PUBLIC HEALTH NETWORK**

Present:

Margaret Somerville - NoSPHN Lead, Director of Public Health, NHS Highland (Chair)
Sarah Taylor - Director of Public Health, NHS Shetland
Susan Webb – Deputy Director of Public Health, NHS Grampian
Louise Wilson – Director of Public Health, NHS Orkney
Phil Mackie – Lead, ScotPHN
Pip Farman - North of Scotland Public Health Network Co-ordinator
Peter Gent – Interim Director of Regional Planning, NoSPG
Christine Duncan - Head of Strategy & Engagement, NHSHS

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 internet.

44/12 Welcomes and apologies

Margaret welcomed Peter Gent (NoSPG) and Christine Duncan (NHSHS) to the meeting. Apologies had been received from Ken Black, Tom Lavery, Martin Malcolm, Elaine Garman, Noelle O'Neill, Ken Oates and Ray Watkins.

45/12 Minutes of the last meeting 31st October 2012

AM

Members approved the minute of the last meeting and gave no reason why the papers / minutes of the last meeting should not be made available by open access on the internet.

46/12 Matters arising from last meeting not on the agenda (matters arising also updated at Item 47.1b)

Pip advised that under Item 39.1a the Newsletter had still to go out. Under AOCB Paddy Luo-Hopkins had emailed colleagues with regard to NHS concerns about the quality of the data made available nationally for Healthy Start but as he had not had a response he was assuming that this was not an issue for other Boards. Pip further noted that there had been a number of agreements to share information between Boards at the last meeting and that this was being collated and would be circulated in one email when all available.

PF

PF

47/12 North of Scotland Planning Group / programmes

47.1 Feedback from NoSPG meetings (IPG 21st November 2012 (cancelled) and NoSPG 12th December 2012)

Sarah noted a presentation at NoSPG on the National Review of Regional Planning which had prompted a number of discussions including the need to look at sustainability issues and issues which hindered cross boundary working eg staff contracts. Sarah suggested there were themes emerging from the report that were relevant to the Horizon Scanning work and supported the development of the previously discussed 'new rules' which it would be useful to pick up on.

ST/PF

Further discussion at NoSPG had highlighted that mobile phone coverage in the North remained a problem.

Peter updated on discussion at the NoSPG and NoSPG Chairs meeting the same day which had highlighted positive developments and the need for the NoSPG workplan to be reviewed and focus on SMART / outcome focussed objectives.

47.2 Update re NoSPG and programmes

a NoSPG updates and developments possibly requiring Public Health input

Peter spoke to the paper circulated and highlighted potential future work for NoSPG for which support from NoSPHN might be required including the Major Trauma Review, Services for Military Amputees and Breast Screening.

Members discussed each proposal and agreed that the work needed to be discussed again

once the requirements of work were clearer but that for the Major Trauma Review that there was a need to focus on outcomes and consequences for the sustainability of other local services. The Military Amputees work should focus initially at a national level. That Public Health input to the breast screening review once available would be to focus on whether any of the service changes proposed to support digital mammography would have any health impact and if there was no demonstrable health impact then it is a service redesign issue and not really a Public Health issue. Members noted that Cardiac work was under discussion eg Cardiac Electrophysiology review and that there may be support needs to the Paediatric Unscheduled Care Evaluation which Pip had briefly discussed with NHS24 colleagues.

PF/ PG/
NoSPG
colleagues

Members further agreed that whether Public Health support was required or not for these areas of work that the 'new rules / intelligent questions' (see Item 47.3) could be developed to ensure a consistent set of questions was asked / a systems approach to assessing and agreeing work was supported.

b Short Life Working Group for National Hepatobiliary Cancer and Surgical volumes / QPI's for Upper GI cancer malignancies and potential implications for NoSPHN

Building on the previous discussion Pip noted a potential for NoSPHN to support a Hepatobiliary (HPB) Cancer Review Group established to look at HPB Cancer QPIs and in particular small volume / outcomes issues. Discussion on this had prompted the need to consider whether there would be other regional requirements arising from the Cancer QPIs eg regional information needs and / or further concerns re low volume / outcomes for other low incidence tumour groups. This had suggested that there may be a need to focus NoSPHN resources on understanding sustainability issues in relation to volume / outcomes across NoS services and its implications (as had been previously discussed by NoSPG in relation to vascular services) eg to seek to understand where best to secure / sustain services in the future in the context of local, regional and national imperatives.

Members agreed to support the HPB work (with a light touch) on the understanding that it was essential to do the work in the context of ensuring learning / development of approaches that could be applied to other relevant QPI groups. It was again suggested that if a set of 'intelligent questions' / a model template could be developed to guide the HPB work this could then be applied by others in consideration for further work. It was agreed that the work needed to consider for example workforce needs, new ways of thinking, infrastructure needs, MDT support, end of life care and travel etc and might then be used to drive policy. Members agreed to pursue discussions with regard to the wider piece of work on sustainability. Pip agreed to progress discussions and seek nominations from colleagues to support both the HPB and wider work.

All
PF / All

47.3 Horizon Scanning to Inform NoSPG Decision Making in the Future – NoSPHN focus

a Review of Horizon Scanning work.

Speaking to the paper that had been circulated to members that day Pip summarised the approach to the review and the initial findings and sought feedback on the findings and proposed recommendations.

Pip highlighted that the review had been conducted through questionnaire and interview – the overall response rate was 32% (24/76).

The review had sought to explore respondents use of the Horizon Scanning work, its impacts and understand why respondents had not used / or what had limited respondents use of the work.

- 58% of respondents reported that they had used the work eg reference materials / concepts
- 42% of respondents indicated that they had not used the work (materials etc)
- 83% of respondents indicated that the work had an impact (or influence) on them as individuals / organisations (eg thinking/ decision making / practice)
- 17% of respondents indicated that work had no impact on them.

Respondents had cited examples of evidence of where the work was being used / had an impact.

Initial findings suggested the need to keep the work going and:

- 'Make the work real' ie further translate/apply the concepts into practice
- Revisit / share the work more widely
- Develop further the Horizon Scanning methodologies (methods, terminology etc)
- Highlighted a number for issues for both NoSPG and NoSPHN to reflect on if the work is to be further supported / progressed.

Pip noted that feedback had been very helpful and constructive and had encouraged ongoing development and thanked all that had responded to the review.

Sarah highlighted examples from respondents in her interviews of how the work was being used and the expressed desire to keep the momentum up with the work and ensure that this was in a practical way. She suggested that the examples suggested should be added to the recommendations as a specific set of actions eg the development of a set of education tools / debate with the public.

Agreeing that the report should go to the NoS Integrated Planning Group for further discussion Sarah also noted there were things that NoSPHN could be getting on with.

Louise suggested that if education tools were developed it would be helpful to have them in a format that could be used for example with Board Executives / Non Executives and to develop a set of prompts to support the work.

Phil noted the power of the quotations highlighted in the report and suggested that these be used to guide the developments eg tools needed to be developed for both those who were comfortable with the approaches and those who were not. Recognising the need for subsidiarity Phil suggested looking at the recommendations and identifying what in the next steps could be supported nationally.

Members welcomed the report and acknowledged the very positive feedback which it was felt should be celebrated and the work further promoted.

Members agreed to feedback comments on the draft report to Pip by the 10th January at the latest so the paper could be revised and submitted to NoSIPG.

All
attending
meeting

b Update on developments - The Intelligent Region

Pip advised that following the presentation of the Intelligent Region concept to NoSIPG they had requested the development of an implementation plan. Jillian Evans, Susan Webb and Pip had proposed a set of next steps to review current NoSPG processes against the Intelligent Board principles eg reviewing meeting cycles and information flows, developing a set of intelligent region questions to guide thinking and a minimum data set for NoSPG programmes. They had further suggested that NoSPHN should by example review NoSPHN processes.

In discussion Phil noted the need to ensure longer term change in information systems was embedded in the process. Louise further suggested that it would be helpful to present the work to IPG in a way that highlighted the constraints of our current ways of working and that something was required over and above this for example a North of Scotland systems dynamics model that would help with local modelling and might help us to think in different ways. Peter highlighted that the work would be useful to drive a more consistent line between Boards and NoSPG and would help in the discussion re the future NoSPG workplan. Discussion highlighted the need for a set of questions to guide thinking and that these aligned to the 'new rules' also being considered as part of the Horizon Scanning follow on work.

Members agreed to feedback comments on the proposals to Pip by the 10th January at the latest so the paper could be revised and submitted to NoSIPG.

All

48/12 ScotPHN / NHSHS developments

48.1 Scottish Public Health Network (ScotPHN)

a Update. Phil spoke to the paper circulated highlighting that a lot of work was due to be coming out to colleagues shortly. Members noted the update with thanks.

b New Ways of Working / workstreams – Phil advised that the Disinvestment paper circulated had been discussed at the National Planning Forum who were now looking for

examples of change in this area and that previous work in NoSPHN for example on the logic model could support this. With regards to the Asset Based Approach the Scottish Directors of Public Health were supporting proposals for action research in Boards. Phil noted proposals to look at New Ways of Working suggested under Item 49.4 and that he would welcome exploring this further in the context of the disinvestment work and financial sustainability.

c Public Health support to National Groups: Scottish Health Technologies Group and National Specialist Services Committee

Phil advised that a Memorandum of Understanding was being developed between ScotPHN and the Scottish Health Technologies Group with regards to Public Health support requirements and noted that there was strong Public Health representation on both SHTG and the new National Specialist Services Committee which would ensure that Public Health needs would be fed back nationally/regionally/locally – building on previous support developed through NoSPHN.

Margaret noted that it would be helpful too to build the small volumes/outcomes approach into the Specialist Services discussion at local, regional and national levels.

48.2 NHS Health Scotland - Christine Duncan, NHSHS Head of Strategy & Engagement – ‘A Fairer Healthier Scotland’

Christine spoke to her paper circulated which summarised at a strategic level how NHSHS were refocusing their work on inequalities particularly through policy and planning. Recognising this was not achievable in isolation, NHSHS intended to focus on work with key stakeholders, Community Planning Partnerships and through national groups and the third sector.

Margaret asked whether NHSHS would be taking forward work on the Audit Scotland report in particular the need for national indicators. Christine advised that this had not as yet been agreed.

Members proposed ensuring that channels of communication were kept open between NHSHS and NoSPHN and to have further discussion when the products of the NHSHS work were coming through and noted too the need to continue to include NHSHS in NoSPHN CPD developments.

CD/PF

49/12 Public Health Network Workplan
49.1 NoSPHN Workplan 2012-2013
a Workplan update (2012/13)

Members noted progress on the workplan and agreed to forward any suggestions for the forward planning / priorities for 2013/14 to Pip to present to the February NoSPHN meeting.

All

b Specific updates from key groups / programmes not on the agenda
Members noted the updates.

49.2 Scottish Centre for Health Working Lives (SCHWL)

Noting ongoing discussion at a NoS level re the SCHWL review Louise asked about the financial position of Boards in relation to the new funding proposals for SCHWL. Those present noted losses with the exception of NHSG. Pip advised that the NoSPHN working group was meeting in January to discuss this further and options for alternative models of working / a more networked approach across the North.

Susan further noted that the Hep C / BBV formula was also being reviewed with likely reduced funding impacts for the North because of use of the NRAC formula and weighting towards SIMD.

Sarah noted the TAGRA Group developments in particular the need for de-minimis costs for services and the challenges for Public Health activities in remote and rural areas in particular reaching dispersed groups and suggested a discussion with colleagues on TAGRA and Paddy Luo-Hopkins to see if any of the issues rehearsed there might be used in discussions with regard to SCHWL or the BBV review.

PF/SW/ST

49.3 GIS Mapping – update on developments (national / regional).

Pip summarised the key issues highlighted in Ian's paper noting the new funding model emerging from the Scottish Government / OSMA discussions for which the cost to the NHS equated to 12.5% of the total OSMA cost over the life of the agreement (an increase on the previous agreement). Ian recommended that:

- Assurances should be sought from the Scottish Government Health Directorate that funding will be centrally provided and not cascaded to Boards.
- Assurances should be sought from the Scottish Government Health Directorate that there will be appropriate engagement with the new governance arrangements and a mechanism to ensure that NHS Boards are informed about and engaged with these developments.
- To ensure continuous improvement in the delivery and efficiency of services over the course of the new partnership agreement, a dialogue with the SGHD is required to discuss how Boards can be supported and resourced to realise the benefits of OSMA.

Pip further noted that as part of the NoSPHN CPD plan it was proposed to hold a discussion to review, understand the impacts and optimise the use of GIS products across the North.

Members supported the recommendations and Margaret agreed to email Alison McCallum (Chair of the SDsPH Group) to ask that they be discussed at the next DsPH Group and asked as she would not be there, that members attending supported the discussion.

MS/All

49.4 CPD planning / event(s).

Pip highlighted proposals for CPD plans to the end of the financial year following feedback from members including:

- A workshop on GIS tools
- An event/ workshop to widen discussion with regards to the Intelligent Region
- A workshop to look at Public Health workforce planning issues across the North eg understanding collective workforce interests and challenges and the implications of New Ways of Working in Boards.

In addition there was an intention to ensure local Board developments with regards to Asset Based approaches would be supported / shared and that work might be progressed with regard to promoting the Horizon Scanning work given discussion at Item 47.3. Pip advised that further ideas highlighted would be brought forward into 2013/2014 planning.

Members approved the plan.

PF

Pip spoke to a paper highlighting proposed principles for NoSPHN CPD planning in the North arising from discussions through the NoSPHN Health Improvement Collaborative which aimed to consolidate much of what was already happening into a more structured plan eg maximising access to CPD across Boards and sharing training needs assessments. Members supported the principles outlined and agreed that Boards should share their CPD plans and for example lunchtime sessions ensuring that where appropriate they would be made remotely accessible to other NoS Boards. Pip agreed to arrange with key leads in each Board.

PF/Leads

49.5 Oral Health and Dentistry / NoS Dental Public Health approach.

Margaret noted to members that the NHSH Consultant in Dental Public Health position would become vacant at the end of the month and that initial discussions with NSHG had been supportive of taking a regional approach to the post. Susan noted the position in NHSG highlighting that it was timely to review arrangements in NHSG. Margaret advised that she had still to understand the needs of the post in NHSH and across the North and sought advice from all members as to whether they would wish to engage in discussions or whether NHSG and NHSH should progress discussions alone?

Members noted arrangements in the Island Boards and how these were linked to existing posts/ arrangements with mainland Boards which might limit flexibility but agreed that it would be useful to review the benefits of a NoS approach and that they would wish to be involved. Margaret agreed to pick up with colleagues and progress in the new year.

MS

49.6 NoSPHN Budget update 2012/13 and forward planning 2013/14

Members noted the current financial position and provisional commitments to CPD planning and further agreed to highlight to Pip any further needs for spend before the end of the financial year. Louise noted possibilities for support for Civil Contingencies training and Pip agreed to assess the need for funding some of the Horizon Scanning developments discussed earlier (eg literature review / evidence for the HPB work) in liaison with Peter.

PF

PF/PG

50/12 AOCB

Substance misuse – Susan noted that NHSG had recently completed a substance misuse review and that discussion with NHS Lothian had highlighted similarities emerging particularly those specific to the NHS. Susan asked whether there might be an interest from other Boards in the North (or possibly nationally) to discuss the NHS role and challenges eg practical / service specific issues / how to work with ADP partners and what the NHS needs to do. Susan and Sarah noted good practice in NHS Forth Valley and that there might be a merit in sharing some of the issues and solutions.

Members expressed interest in further discussions and Margaret asked that Susan circulate information to Boards (either through NoSPHN or directly) so that they could forward information to ADP teams leads to further assess the appetite for more discussions.

All/SW

51/12 Items to be brought forward to future meetings:

Members were asked to agree proposals for items to be brought forward to the next meeting and highlight any further items for discussion.

a North of Scotland Community Justice Authority – members agreed to invite Peter Wilcox Chief Officer to attend the February NoSPHN meeting.

PF

b NoSPHN Quality Framework – it was agreed to defer this item to a future meeting noting that it might best be addressed through the planned workforce development event as discussed under Item 49.4.

PF

c Report on NESH bursary award report (Noelle O'Neill) – Margaret noted this should be available for the June NoSPHN meeting.

NO

52/12 Date of next meeting - Wednesday 6 February 2-4.30pm

Dates for 2013

Tuesday 16th April (please note this has been revised from the original date circulated of Wed 3rd April)

Wednesday 5th June

Wednesday 7th August (may need review)

Wednesday 2nd October

Wednesday 20th November (now clashes with NoSIPG meeting – will need to be reviewed)