Lanarkshire NHS Board

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Minute of the Meeting of the Area Clinical Forum held on Thursday 15th February 2018 at 2.00pm in Meeting Room 3, Kirklands Hospital, Bothwell

PRESENT

Mrs M Lees	Chair, Area Allied Health Professions Advisory Committee (Chair)
Mr F Munro	Chair, Area Optometric Advisory Committee
Mrs L Milby	Area Dental Committee
Dr G McCurragh	Chair, Area Healthcare Sciences Advisory Committee
Dr K McIntyre	Chair, Area Medical Advisory Committee
Mr P O'Neill	Vice Chair, Area Nursing and Midwifery Advisory Committee
Ms M Simpson	Chair, Area Nursing and Midwifery Advisory Committee
Dr S Walton	Chair, Area Psychology Services Forum

IN ATTENDANCE

Dr Iain Wallace	Medical Director
Dr V Carmichael	shadowing Dr Wallace
Mr P Cannon	Board Secretary

APOLOGIES

Mrs G Richardson	Chair, Area Pharmaceutical Committee
Dr G Tanner	Professional Advisor for Psychology and Head of Psychological Services
Ms C James	Vice Chair, Area Allied Health Professions Advisory Committee

1. WELCOME

Mrs. Lees welcomed colleagues to the meeting.

2. MINUTE

The minute of the meeting held on 16th November 2017 was approved.

3. MATTERS ARISING

In relation to the Flu vaccination uptake issues raised at the last meeting, Mrs. Lees provided an overview of the initiatives being taken forward by the Board which had led to an improvement on the level of uptake achieved last year.

It was noted that the Forum was still looking to appoint a Vice Chair for the Committee and it was agreed to canvas for nominations and discuss this at the next meeting.

4. **<u>NEW GMS CONTRACT</u>**

Members noted an update on the GMS contract which was presented to the NHS Board in January 2018 and which set out the governance arrangements around the implementation of the new contract. Dr McIntyre provided a detailed overview and an updated position.

It was noted that the implementation date was 1 April 2018 and Dr McIntyre was working very closely with Board colleagues on the detail.

Dr McIntyre also highlighted the Primary Care Improvement Plan as a key focus for the Board. The Plan was very wide ranging and involved the recruitment of additional staff to support primary care, including Pharmacists, Advanced Nurse Practitioners, Physiotherapists, and an increasing focus on the use of Treatment Rooms. In addition, vaccinations will no longer be provided by GPs, and this responsibility will transfer to the Board, although it was noted that NHS Lanarkshire had been providing a wide range of immunisation services in any event, and the impact was not thought to be significant.

The Plan also included provision to collect and analyse activity data, had wider Data Protection implications, and the future use and ownership of Practice Premises was also being taken forward. It was noted that the Plan required to be signed off by the Board in June 2018.

Dr McIntyre referred to around 7 working groups of managers and clinicians who were working their way through the implications of all of the changes within the new contract, which was a complex and detailed task.

Members thanked Dr McIntyre for his very helpful and timely update. It was noted that there were a great many issues that arose as a result of these changes, most notably the workforce challenges that would be faced. Nursing colleagues pointed to the high number of retirals in the system and the significant skills gap that might emerge. The knock on effect of changes on Psychological services and Optometry provision was also highlighted as a concern. Changes in the ownership of Practice Premises, which comes into effect from 1 April 2018, were being managed in conjunction with Board colleagues on a transitional basis.

The Forum Chair thanked Dr McIntyre for taking colleagues through the complex changes being addressed.

5. **<u>FINANCE</u>**

Mr. Cannon referred to the circulated paper which had been presented to the Board on 31st January 2018, which showed the financial position for the Board as at 31st December 2017, which was noted.

Members reflected that the key financial challenges continued to be in the Acute Division and noted that the report highlighted the need to reduce reliance on agency and bank staff, which was supported. It was noted that overall the risk of not breaking even had been reduced and there it was anticipated that the Board would meet its revenue and capital targets for 2017/18.

Dr McIntyre stated that the changes envisaged through the new GMS contract were being supported by Scottish Government, over a three year phase, and allocations would be made to NHS Boards based on the NRAC formula.

6. <u>ACCESS REPORT</u>

Mr. Cannon referred to the circulated paper which had been presented to the Board on 31st January 2018, which showed the Waiting Times & Access positions across the Acute Division, and the two Health & Social Care Partnerships.

Mrs. Lees highlighted the main features of the report and the discussion at the Board meeting, which noted the performance by CAHMS, Unscheduled Care, Delayed Discharges, and Waiting Lists.

Colleagues noted the report and also that many of the targets were being missed because of a shortage of skilled professionals and high levels of sickness absence, particularly in the nursing profession.

7. <u>ACHIEVING EXCELLENCE</u>

Members noted a paper which had been presented to the January 2018 NHS Board meeting which set out an update on the Healthcare Strategy "Achieving Excellence".

Dr McIntyre referred to the HEPMA developments and the need to involve the GP community in planning the implementation of new IT developments so that these new systems and processes bring advantages to both the hospital and primary care settings.

Members noted the update.

8. INITIAL AGREEMENT FOR THE REPLACEMENT / REFURBISHMENT OF MONKLANDS GENERAL HOSPITAL

Mrs. Lees provided a verbal update on the progress being made in relation to moving to an Outline Business Case for the Replacement / Refurbishment of Monklands Hospital, which was noted.

Dr McIntyre indicated that the Area Medical Committee was aware of the developments but not involved in the process, and he was going to raise this with the Director of Strategic Planning & Performance to ensure that the views of the Committee were sought.

9. **<u>REPORT OF THE DIRECTOR OF PUBLIC HEALTH</u>**

Members received a copy of the report submitted to the NHS Board on 31st January 2018 from Mr Gabe Docherty on Public Health and it was agreed that it would be helpful to invite Mr Docherty along to a future meeting to provide for a more detailed discussion of the actions arising from his report. **ACTION: BOARD SECRETARY UNIVERSITY BRANDING**

10. UNIVERSITY BRANDING

Members received and noted a short update from Mr Cannon on the steps being taken to recognise the links with the University sector. Members were reminded that in 2017 'University status' was awarded to NHS Lanarkshire by two Universities, Glasgow Caledonian University (GCU) and the University of the West of Scotland (UWS) via Strategic Partnership Agreements.

In general it was noted that good progress was being made in developing these relationships, in keeping with a vision of changing how NHS Lanarkshire is perceived by clinicians and staff in general as a centre of excellence, a first class organisation within which to develop interesting and rewarding careers, and as an academic centre. It was hoped that this will help with both recruitment and retention of clinical staff in the longer term and drive forward innovation.

The next steps involved working with both bodies to establish university departments in, for example, podiatry, physiotherapy, nursing & community practice and establishing jointly funded NHS Lanarkshire / University clinical / academic posts within nursing and allied health professions, which hopefully in time will attract suitable clinicians, who may in the past never have thought of working within NHS Lanarkshire long term, due to lack of suitable career opportunities.

Members welcomed the approach, and were supportive of the direction of travel, however it was highlighted that there had been some negative comments within a wide range of professional groups that the appointment the first cohort of five Professorial posts was not reflective of the workforce. It was hoped that over time this would be addressed.

11. REPORTS FROM ADVISORY COMMITTEES

<u>Allied Health Professionals Committee</u> - Mrs. Lees reported that colleagues in social care had related difficulties in accessing material and information on FirstPort and that this was being addressed. It was also noted that Paul Graham, Head of Spiritual Care, had established a micro-web site for members to access papers and resources, through the Knowledge Network.

<u>Dental Committee</u> - Mrs Milby referred to the Oral Health Improvement Plan issued by Scottish Government and indicated that it contained over 40 discrete actions. This would be discussed in greater detail by the professional bodies but it represented an opportunity to improve oral health and influence the provision of services to patients in NHS Lanarkshire, albeit it was causing some concern within the profession because of the uncertainty around some of the detail.

<u>Healthcare Sciences Committee</u> - Dr McCurragh reported that the Committee was discussing a National Delivery Plan which highlighted variation in service delivery and standards across Scotland. It was closely linked to the Digital Health & Care Strategy

and the Regulation of Professional Standards work being taken forward nationally. It was with concern that the Committee had noted that reductions in NES funding was impacting on training. It was also noted that the changes in relation to Ionising Radiation Regulations had been raised at the Corporate Management Team to make Directors aware of the changes being embedded and the implications for the service and for patient care.

<u>Medical Advisory Committee</u> - Dr. McIntyre had left the meeting but had provided members with a detailed update on the new GMS contract and highlighted the Committee's concerns around the Trauma & Orthopaedic changes which secondary care colleagues had raised, and the Committee's aspiration that the implementation of HEPMA would bring significant benefits to primary and secondary sectors.

<u>Nursing & Midwifery Committee</u> - Ms Simpson reported that the Committee's working arrangements had been discussed at the last meeting and processes refreshed, and that revalidation issues were continuing to cause concern.

<u>Pharmaceutical Committee</u> - Mrs. Richardson was unable to attend and provide an update. It was noted that steps were being taken to appoint a Vice Chair for the Committee.

<u>Psychology Services Forum</u> - Dr. Walton highlighted that difficulties were being encountered in dedicating time to support the Forum, and Mrs Lees agreed to meet with Dr Walton to discuss these concerns outwith the meeting. **ACTION: CHAIR**

Mrs Lees thanked colleagues for provide highlights from recent meetings.

11. ANY OTHER COMPETENT BUSINESS

a) Mrs Lees indicated that the Board Chair, Mrs Neena Mahal, had expressed an interest in attending the next meeting of the Forum, and that it was Mrs Mahal's intention to attend as many of the Advisory Committees as feasible over the course of the next few months. In addition, Mrs Lees indicated that she will be providing an update to fellow Board Members on the work of the Forum, and how clinical engagement might be enhanced and improved in NHS Lanarkshire, and this was scheduled for April 2018.

12. **DATE OF NEXT MEETING**

Thursday 19th April 2018 at 2.00pm, in the Conference Room, Kirklands, NHS Board HQ.