



Minute of Meeting of the Population Health & Primary Care and Community Services Governance Committee held at 9.00am on Wednesday 19 September 18 in the Seminar room 1 Postgraduate Centre Monklands

CHAIR: Miss M Morris, Non-Executive Director
PRESENT: Mr M Fuller, Non-Executive Director
Mrs M Lees, Non-Executive Director
IN ATTENDANCE: Mrs A Armstrong, Director of Nursing, NHSCP
Mr C Cunningham, Head of Planning, Perf & Assurance, SHSCP
Dr T Sommerfield, Consultant PH Medicine
Mrs V de Souza, Director, SHSCP
Mr G Docherty, Interim Director of Public Health
Ms M Docherty Director of Nursing SHSCP
Dr L Findlay, Medical Director SHSCP
Ms J Hewitt, Director, NHSCP
Dr J Pravinkumar, Consultant PH Medicine
Mr R McGuffie, Head of Planning, Perf & Assurance, NHSCP
Mrs Celia Briffa-Watt Public Health Specialist
Mrs Neena Mahal Chair NHSL Board
Mrs Elspeth Russell Health Improvement Manager NHSCP
APOLOGIES: Mr P Campbell, Non-Executive Director
Dr I Wallace, Medical Director
Dr A Cook, Medical Director, NHSCP
Mrs M Hayward, Head of Health, SHSCP
D Mrs I Barkby, Director, NMAHPs
Mr P Cannon, Board Secretary
Ms M Reid, Interim Head of Health Improvement

MINUTE: Ms Mary Louden Operational Support Supervisor Public Health

2018/01	<u>WELCOME</u> Miss Morris welcomed the group to the fourth meeting of the Committee and a particular welcome to Mrs Mahal who was attending as part of her rolling programme of attendance at Board meetings.
2018/02	<u>DECLARATIONS OF INTEREST</u> Members were invited to declare any interests in relation to any of the agenda items, there were none.
2018/03	<u>Minute of Previous meeting 18/07/18</u> Noted and approved.
2018/04	<u>Matters Arising</u> Miss Morris noted that further to the previous meetings a road map would be developed to plot the route of the groups' workplan and focus for the coming months. It was agreed to review the route map in the early new year. Action 1

2018/05	<u>Terms of Reference</u>
	No amendments required at this time.
2018/06	<u>Cervical Screening Update</u>
	Dr Darnborough presented the report noting that early intervention is best providing the most successful outcomes however more effort is required to address the lack of uptake in the most deprived areas of the population and there are huge efforts going in to the target these areas introducing pop-up clinics, Saturday morning clinics, working with midwives and health visitors to focus on younger mothers. Miss Morris commended the report particularly in the efforts to address inequalities.
	Mrs Mahal commended the report and requested a firm set of actions be identified including resources required and who would be responsible for moving these forward. The cooperation of the H&SCPs was acknowledged and that there was a need to ensure there was no overlap in the initiatives in place.
2018/07	<u>General Screening Update</u>
	Dr Sommerfield noted a six monthly report is presented to CMT <ul style="list-style-type: none"> - The national screening committee oversees the screening programmes - Aortic Abdominal Aneurysm (AAA) NHSL programme exceeds the national target (83.9/70%), NHSL Board is the highest performing for the period. - Bowel Screening PPI target 66% exceeding the target by 6% however the number of referrals has increased since the introduction of a revised more effective test. It is hoped to review the business case, the uptake following the introduction of the programme has increased 10 fold. - Consideration should be given to the funding of the various services and if there could be economies of scale which could help yield results - Close working with Health Improvement is essential in linking in to existing screening programmes. - Diabetic Retinopathy; in the previous 12 months NHSL failed to meet the 80% target. Staffing issues have impacted on service delivery and staff replacement is underway. Non-attendance is also an issue and a 2 yearly screening programme is in place to free up capacity and in an effort to improve results. - Breast screening SBAR presented to CMT - no harm to patients at this time. Report to the group in 6 months. Action 2.
2018/08	<u>Mental Health Services</u>
a.	<i>Children and Young People</i>
	Mrs Hewitt advised the Children & Young Peoples mental health audit and had resulted in a Children and Young People's Mental Health Task Force being formed with COSLA. The Task Force is to provide recommendations for improvements in provision for children and young people's mental health in Scotland and in partnership develop a Task Force with COSLA on Children and Young People's Mental Health. The Task Force is to provide recommendations for improvements in provision for children and young people's mental health in Scotland and, in partnership, develop a programme of sustainable reform of services. The Scottish Government and COSLA have asked the Cabinet Secretary to provide initial recommendations by September 18 and identify issues and potential solutions. Mr McGuffie noted an action plan has been developed locally to meet the recommendations of the report.

	Mr McGuffie advised the difficulty of recruiting to posts locally and a review of bank arrangements is underway as an interim solution. Referral rates to services remain high and early intervention crucial at tier 1 and 2. A number of fixed terms posts have been made permanent but the risks to remain high. New and innovative ways of working are being sought and a review of the referral pathway is in progress to triage referrals more appropriately. Mrs Mahal noted she was meeting with the Cabinet Secretary as part of the Chair's Programme and she would write formally to the minister to raise local issues. Action 3.
	Agreed the reports would be brought to PPRC Action 4.
<i>b.</i>	<i>Adult Therapies</i>
	Mr McGuffie noted a number of vacancies have been difficult to fill and this together with maternity leave was putting pressure on the service, however to note from the audit Scotland report NHSL is the only board meeting the target. Some fixed term posts have been made permanent and this is in line with neighbouring boards and is hoped to make the posts more attractive to applicants.
2018/09	<u>Period Performance Report: NHSCP</u>
	Mrs Hewitt noted the report has been presented to IJB. A one day programme to review unscheduled care in August 18 has resulted in some practical solutions, including Hospital at Home services; working with Scottish Ambulance Service and ways to address the social issues which can be an underlying cause of presentations to hospital not solely clinical issues. A pan-Lanarkshire group is in place and the report will go to Unscheduled Care Board on 1 October 18. Mr McGuffie will include the raw data in future reports. Action 5.
2018/10	<u>Speech & Language Therapy SBAR</u>
	Mr McGuffie presented the SBAR which had been produced for the Chief Executive to provide assurance that governance measures are in place for SLT services. Child and Young People's Speech and Language Therapy service is a pan-Lanarkshire service hosted by Health and Social Care North Lanarkshire. The service provides dedicated support for children and young people with a range of speech, language, communication and swallowing difficulties, covering a range of settings including clinics, schools, nurseries, domiciliary visits and hospitals. Since 2012/13, the demand for the Children and Young People Speech and Language Therapy service has increased by 74%, whilst staffing has only increased by 14.4% over the same period. Service redesign has supported a positive direction of travel, with strong performance against the access targets until summer 2017. The referral rate to SLT has been increasing every year since 2012, to 2017/18 an increase of 74%. A list of short and long term recommendations are in place including increase in staffing, revision of referral pathways, providing access to trakcare systems.
	Mrs Mahal commended the SBAR and work done to date. Mr McGuffie would provide regular updates to the committee. Action 6.
2018/11	<u>Fairer Scotland Duty</u>
	Mr Docherty noted the work was in the early stages and the action plan would be developed further and presented to the March 19 meeting. Action 8 The recommendations from Fairer Scotland Duty and addressing Health Inequalities is being assessed against the new Monklands Hospital Project and a short life working group was in place to develop that assessment. Action 7.
2018/12	<u>Review of Frequent Emergency Attenders</u>

	Dr Pravinkumar noted the frequent emergency attenders' data for 17/18 has been reviewed for both North and South Partnerships. 80% are identified in the Wishaw and Motherwell localities and a meeting has been arranged to discuss how this can be mitigated, possibly duplicating the Lothian model linking with Scottish Ambulance Services for triage and alternative services rather than Emergency Departments. Mrs Hewittt noted this work is being supported and raised with IJB to ensure there is an understanding of the issues.
2018/13	<u>CMO Health Promotion & Health Services: NHSL Annual Return</u>
	Mr Docherty advised the Chief Medical Officer (CMO) requests an annual review of health promotion and health services annually. Mrs Russell presented the summary report on the progress made by NHS Lanarkshire against the requirements of <i>Chief Medical Officer 19 (2015) Health Promoting Health Service: Action in Secondary Care Settings</i> and to advise that a new Chief Medical Officer (CMO) directive has been issued setting out the future direction for this framework. A self-assessment will be undertaken in March 19 and action plan will be developed with acute colleagues. There is a lot of good working going on across NHSL and the challenge is to capture it all. Mrs Russell has a twice yearly slot with Directorate Management Teams across the 3 acute sites to promote the review and local champions are in place to maintain momentum.
	Miss Morris noted the good work going on across the board but noted that since the 2012 report health inequalities had not improved. It was agreed that to make an impact 2 or 3 areas should be identified to focus on: <ul style="list-style-type: none"> - Financial Inclusion - Physical Activity - Health Eating The review was endorsed by the committee. Mrs Mahal requested that a briefing paper be brought to the board so the review could be tracked. Action 9.
2018/14	<u>Primary Care Improvement Plan</u>
	Dr Findlay advised all work streams are in place and are expected to report by 28 September. The GP sub-committee has been complimentary on the work to date which is encouraging.
2018/15	<u>Linkages with other groups</u>
	No further linkages identified at this time.
2018/16	<u>Risk Register</u>
	The Risk Register was noted.
	The Committee to consider whether, from the business discussed, any new, emerging risks need to be added to the Corporate Risk Register or whether the discussion materially alters the assessed level of risk/risk tolerance and/or the mitigating controls. No items were raised.
2018/17	<u>DATE OF NEXT MEETING</u>
	9 am on Wednesday 21 November, multipurpose meeting room, Houldsworth Centre, Wishaw.