

	Assynt House Beechwood Park Inverness IV2 3BW Tel: 01463 717123 Fax: 01463 235189 www.nhshighland.scot.nhs.uk/	
MINUTE of MEETING of the AREA CLINICAL FORUM	4th November 2021 – 1.30pm Microsoft TEAMS	

Present

Catriona Sinclair, Area Pharmaceutical Committee (Vice Chair)
 Alan Miles, Area Medical Committee
 Alex Javed, Area Healthcare Science Forum
 Calum Fraser, Area Optometric Committee
 Catriona Dreghorn, Area Nursing, Midwifery and Allied Health Professionals Committee
 Claire Watt, Adult Social Care and Social Work Advisory Committee
 Eileen Anderson, Area Medical Committee
 Heidi May, Board Nurse Director (until 2.15pm)
 Ian Thomson, Adult Social Care and Social Work Advisory Committee (from 2.45pm)
 Laura Menzies, Area Nursing, Midwifery and Allied Health Professionals Committee
 Manar Elkhazindar, Area Dental Committee
 Stephen McNally, Clinical Representative (Raigmore Hospital)
 Wendy Van Riet, Psychological Services Advisory Committee
 William Craig-MacLeman, Area Nursing, Midwifery and Allied Health Professionals Committee

In Attendance

Karen Doonan, Committee Administrator (Minute)
 Alison Felce, Senior Business Manager, Medical Directorate
 Lorraine Cowie, Head of Strategy, Strategy Update (Item 2)
 Boyd Peters, Medical Director (until 3.50pm)

Not in Attendance

Frances Jamieson, Area Optometric Committee
 Kitty Millar, Clinical Representative (Argyll and Bute)
 Jo McBain, Deputy Director for Allied Health
 Gerard O'Brien, Non-Executive Board Member

1 WELCOME AND APOLOGIES

The Chair welcomed those present to the meeting and thanked them for attending and also welcomed new committee administrator Karen Doonan as well as thanking Kayleigh Fraser for attending in support. Apologies were received from Ian Thompson who joined meeting later. Heidi May also apologised for not being able to attend for the entire meeting due to a clash with other meetings.

1.1 DECLARATIONS OF INTEREST

There were no declarations of interest.

2. UPDATE ON STRATEGY

Lorraine Cowie, Head of Strategy

Lorraine Cowie introduced herself and explained her role was to be the “glue” in respect of the Strategy. Lorraine Cowie then spoke to her presentation:

- “Together we care” – focus on the future
- The strategy covers from 2022 – 2027
- Provides support for our workforce and partners
- Mission – partnering with our communities to improve health & wellbeing in Highland and Argyll & Bute
- Looks at how to maintain a sustainable service.
- Need to have a focus on preventing harm
- Need to partner with our population to develop services together as we have services that are not sustainable due to increasing demand
- Strategic Imperatives – Population, People, Pathways, Performance, Progress
- Framework will help to move to 2027
- It’s an ongoing conversation with people & communities, workforce and partners.

Discussions were had around the need to have conversations with everyone and these required to be active conversations. The Committee agreed that the presentation was helpful to share with others in order to generate the feedback that was required and that this would help shape the strategy. Discussions were had around the slide pack that would be put together as an aid to the conversations that needed to be had across the organization. Linda Currie asked that the rurality of Argyll and Bute be acknowledged and it was agreed to invite Argyll and Bute to provide a statement. Discussions were had around the blending of Highland and Argyll and Bute together.

Eileen Anderson enquired about the discussions and asked if the discussions in community also encompassed Realistic Medicine. Lorraine Cowie explained that there had been discussions around the “home is best” approach and how to embed this especially with regard to our frail, elderly population. There is a piece of work starting around this and focus will be upon how to incorporate this within the strategy. The Chair reiterated the need to have a two way conversation as it is not about creating guidelines for people as part of the strategy, it is an overarching umbrella under which conversations are had and that Realistic Medicine would be incorporate into the discussions that are had. The Chair stated that Kate Arrow, Clinical Lead for Realistic Medicine was now in post.

Heidi May thanked Lorraine Cowie for her presentation which had been presented recently at the Nursing and Midwifery & AHP Profession Lead meeting. There was a lot of support for this and the feedback was very positive. Heidi May explained that they were slightly behind with developing the strategies for Nursing, Midwifery and AHP due to Covid but the timing now allowed for working on strategies together and this was a very positive step. Lorraine Cowie stated that she was very open to all feedback and that an honest conversation was the best conversation to be had. Linda Currie asked if there was a way that both Highland and Argyll & Bute could work to lessen any potential doubling of work in the writing of the strategic plans. Lorraine Cowie explained that there was a need to look for the golden thread that went thru both to lessen this and to highlight the rurality of Argyll & Bute. There were discussions around setting up a central email address to capture the feedback and it was suggested that a template be created to help structure the conversation. Lorraine Cowie highlighted that there was no requirement to stick to any template and that a good honest conversation was the way forward. Discussions were had around the way to best record feedback that was received. The timescale was challenging as the feedback required to go to the Board in May 2022.

Lorraine Cowie thanked everyone for their feedback and support and left the meeting at 2pm.

Actions – Linda Currie to provide a statement for Argyll and Bute to Lorraine Cowie

The Committee noted the presentation.

3. DRAFT MINUTE OF MEETING HELD ON 21st September 2021

The Committee accepted the minutes.

4. MATTERS ARISING

4.1 Minutes from Advisory Committees – Update

Ruth Daly explained that looking forward to 2022 the timetable for minutes would be looked at with a view to streamlining them. This would be done by reprioritising the work schedules of the Committee Administration team. It was agreed that it was important to have timely minutes.

The Committee noted the update.

Process to elect a new Forum Chair

4.2 Report by Ruth Daly, Board Secretary

Ruth Daly spoke to the circulated process document.

- Sets out the process that we will use
- Wrote out to members
- Election process will begin 13th December 2021, by the 21st December the forum will be notified.
- 4 year term
- Only forum members can vote

Eileen Anderson asked what would happen if there were no applicants and Ruth Daly explained that if this happened then Catriona Sinclair would be approached and asked if she would be agreeable with carrying on Chairing the meeting and then after a short while start the process again.

The process will now be started and the closing date for nominations will be the 26th November which includes the short provision of a personal statement and this should be sent to Ruth Daly.

Actions: Applications to be sent directly to Ruth Daly

Ruth Daly to send out reminder within 2 weeks.

The Committee noted the process.

5. MINUTES FROM PROFESSIONAL ADVISORY COMMITTEES AND EXCEPTION REPORTS

5.1 Area Dental Committee meeting held 29th September 2021

There was no one in attendance from dental services to provide update.

5.2 Area Optometric Committee next meeting scheduled in November 2021

Callum Fraser advised that there were no minutes at this time as this meeting had only taken place on the 1st November 2021. He explained that there was a concern around GP referrals and as there was a need to triage the patient already referred this was causing them to struggle with capacity. Discussions were had around the clarification needed in response to referring from GP's to Optometry. Alan Miles stated that there was an SBAR going to the GP Sub Committee to update GP's. Discussions were had around the referral process and how it can be unclear and how this is causing frustration for Optometry and also in patients that are waiting to be seen. Discussions were had around Optometry gaining access to the Care Portal. The Chair explained that she speaks for all contracted services with regard to gaining access to the Care Portal and that this is underway for Optometry and progress is being made.

The Committee noted the update.

5.3 Area Healthcare Sciences Forum meeting held on 4th September 2021

Alex Javed explained that there was no meeting that was held in September and the Forum had not met for some time. Colin Farman attended on behalf of Highland Health Care Science to the National Health Care Science meeting in Leeds a week or so again and he has fed back that there are lots of various strands of work going on tapping into money that may be available from DiSSG. It is important to maintain links with the national group. Work is ongoing to tighten the links between DiSSG and the Executive Board and for there to be a named person from each Board who can feed back information from them. There were emerging routes for Pre Undergraduates to keep them informed and work was being done to strengthen links with Universities. There is a good interaction with the Learning and Development team and they are looking to strengthen CIPD and how training is disseminated. Discussions were also had around a generic job description for health care scientists lead posts. Grampian is leading on this by pulling a job description together which will aid Highland in the long run in respect of recruiting lead health care scientists.

The Committee noted the update.

5.4 Area Nursing, Midwifery, and AHP Advisory Committee

The Chair advised that the meeting did not go ahead and that Linda Currie had had to step out of the meeting to attend to an urgent matter. Committee were looking at an NCS Proposal and that they were looking to update the Constitution

The Committee noted the update

5.5 Area Medical Committee meeting held on 5th October 2021

These were circulated along with the papers for the meeting. Eileen Anderson advised that since then the minutes had been added to as it was felt that they were too spartan and that as these minutes had only been finalised yesterday they would be circulated in due course. Eileen Anderson stated that with regard to the re-organisation of Orthopaedic referrals she had spoken to various people about this after the last AMC. The only person to have replied was Christian Meikles, Orthopaedic Surgeon who had stated that he had no knowledge of the letter going out to patients saying that they had been on the waiting list for a very long period of time and unless they contacted (within a two week period of time) to confirm that they still wished to be seen they would be removed from the list. It was felt the time period for contacting was too short and this was causing much distress to patients and extra work for Primary Care. Eileen Anderson stated that she had not received any replies from the Senior Management Team but was

hoping that they will reply before the next meeting of the AMC.

With regards to Mental Health Services it was distressing to read the email that was sent out requesting help for staffing at New Craigs and this illustrated the challenges facing the service at this time.

Discussion were had about the results of the NHS Highland Listening and Learning Survey results.

Eileen Anderson asked if there was anything that Al Miles wished to add to the update. He thanked her for raising the issue about the Orthopaedic letter which is of concern to this Committee because it has a huge impact on patient welfare and Primary Care workload. It is alarming that no one seems to know where the letter came from or how it was circulated. This should be looked into as soon as possible. Order Comms which is the electronic system for test requests which will be used by both Primary Care and Secondary Care - NHS Highland has been waiting for this for some time now. It was supposed to be this year but this has now been put back to October 2022.

Boyd Peters explained that he too had been copied into various emails with regard to the letter sent out to patients. He was not aware of Christian Meikles reply but was aware of the letter that Aileen Anderson had written to him. Boyd Peters has texted one of the Deputy Medical Directors to see if he had received a response and where this had gone. He was still awaiting a final answer and would then be in a better position to give a response. With regard to the remobilisation plan, this is a draft document that has gone to Government. This covers various parts of the organisation and allows for various parts of the organisation to feed into the plan. The document is a large document and requires to be streamlined in order it is more easily digested. At the moment they are awaiting Government comment on the document. The document will probably go through some more changes and will see NHS Highland through the next approximate six months or so.

Eileen Anderson expressed her concern in regard to the no reply that she had received from her letter and she had escalated this higher. Eileen Anderson stated that she was currently doing an audit for Radiology referrals as to how well they are completed and how appropriate they are because once the move is made to electronic requesting within Radiology then if clinical information is not provided or contact details not provided then it will become a real problem.

The Committee noted the update.

5.6 Adult Social Work and Social Care Advisory Committee meeting held on 9th August 2021

The Chair asked if there were any comments and apologised on behalf of Ian Thompson and Clair Watt as both were unable to attend due to being called into other meetings. Alan Miles stated that with regard to the minutes and the idea that Social Work colleagues are not held in the same regard as other colleagues he would dispute this and stated that he held his Social Work colleagues in the same regard as all other colleagues. The Chair agreed and stated that he was not alone in this and that Social Work colleagues were held in the same regard as other colleagues and that they added value to this Committee.

5.7 Psychological Services Advisory Committee meeting held on 12th August 2021

Wendy Van Reit advised there had been no recent meetings. The pressure on this service was high and there was discussion on how to access Government funding. In relation to therapists there was Government funding available however there was a shortage of staff that could be recruited to posts. There was a need to recruit to posts that would make an impact on the waiting list targets.

CAMHS – similar problems if not worse, again there was Government funding available but there was a severe shortage of staff that could be recruited to posts. The impact on

patient care is concerning with long waiting lists. Discussions were had around the use of different skill mixes to address the challenges. There were discussions had around the impact that this is having on schools themselves with schools carrying a lot of the pressure. It was noted that there was a need to have both primary and secondary care services working with each other. There was a need to address issues quickly to avoid them developing into more serious issues later down the line. Discussions were had around the hiring of AHP's and their role in helping reduce the strain on the service.

Discussions were had around how this impacts the staff who are providing the services at the moment. Boyd Peters stated that there was a need to increase the staffing in the lower tiers of the service to prevent patients becoming more acute. The "pandemic effect" is also causing issues with the stress of the past 2 years having added pressure. Discussions were had around the fact that there was unseen harm within the waiting lists and that this also affected the staff delivering the services. Early intervention needs to be put in place. Boyd Peters asked if it was possible to have two streams running with one stream being the backlog and the other stream the new referrals. Discussions were had around how this could be seen by those who have been on the waiting list for some time. It was noted that this was affecting all health boards and there was a lack of Professionals across all disciplines. Discussions were had around the need to break the lists and to address the issues in a different way. It was noted that all health boards were affected and that various solutions had been looked at but the same issues kept arising in respect of hiring the appropriate staff.

Wendy Van Reit thanked everyone for their support and impute. The Chair stated that this was an important topic that could be talked about in its own right and that it had been discussed previously that an SBAR paper could be submitted to the Committee next year once there more of a plan in place.

The Committee noted the update

5.8 Area Pharmaceutical Committee held on 23rd August 2021

The Chair stated that there had been another meeting since August but the minutes had not been put out as yet.

A short break was taken between 3pm and 3.10pm.

6. ASSET MANAGEMENT GROUP

Stephen McNally and Alex Javed

6.1 Minute of Meeting of 18th August 2021 and 22nd September 2021

Alex Javed explained that the way in which the group was working was being changed and the new structure of the group was being ironed out. Discussions were had around the purchasing of equipment and it was agreed there was a need to purchase the right equipment at the right time and not be swayed by any deadlines that might be reached. Eileen Anderson stated that they had recently been put under pressure to accept a particular set of equipment by Peter Cook recently with respect to dates and they refused as more research was required to be done. There was a requirement to have the ability to refuse rather than submit to time constraints as this would be a false economy.

Alex Javid agreed with Eileen Anderson and stated that this would allow others access to the money for other purchases. Eileen Anderson gave the example of a CT Scanner that was recently purchased for the Radiology Department and the CT Scanner is too big for the designated room. This creates a problem due to issues with the walls and the ceiling the room cannot be altered in any way. So there is a CT Scanner that cannot be used. There is a need to purchase the right equipment at the right time for the right cost.

Discussions were had around the age of the current Raigmore Hospital building and the issues that this presented. Boyd Peters explained that the cost of Covid would cause

issues with funding and that this is being kept an eye on.

The Committee noted the update.

7. HIGHLAND HEALTH AND SOCIAL CARE COMMITTEE

Ian Thompson and Catriona Sinclair

7.1 Minute of Meeting of 1st September 2021

Ian Thompson explained that the last meeting was held on the 3rd November. There was intense pressure to recruit staff but there had also been guidance that in the coming year there was a need to make savings. This was a very difficult equation to work with and to find balance within. There is a challenge in recruiting staff in the sector. There was a focus on feedback from patients in respect of care but not a lot of engagement with service users. There was a need to have a bigger conversation around this and need to involve patients in the discussions. How people's needs are responded to in community requires a two way conversation to come to solutions. There is a need for more in depth conversations.

Conversations have taken place with respect to changing the model of care that is used and Ian Thompson stated that in relation to the demographics involved in NHS Highland there was a definite need to address this as soon as possible. There may be a joint model required and unless everyone gets involved in the discussion then there may be serious issues, there is a need to involve the service users in the discussions.

Catriona Sinclair stated that there needed to be improved communication in relation to vaccination as there was a challenge in communication in respect of vaccination boosters in general. There was a lot of discussion at the meeting in respect of vaccines. The minutes of the last meeting would be circulated before the next meeting of the ACF in January.

The Committee noted the update.

8. DISCUSSION ITEMS

8.1 ANNUAL REVIEW

Annual Ministerial Review

The Chair explained the Committee had been asked to submit a paper in December and that information required to be in by the 1st December and that they were being asked to look back and look forward. The Chair went on to explain that she was not required to sit as part of the review session, it was the paper itself that was being submitted. Although looking back was relatively straight forward, looking forward more challenging. Linda Currie explained that A & B were about to launch their long Covid service and that staff were coming into post for this. Work is being done around Health and Care Staffing Act and establishment setting for Professionals in order to get staffing up to safe levels. Al Miles stated that there were a large number of GP vacancies and there was a need to highlight that delivering healthcare in a remote and rural setting was expensive and that the Scottish Government required to recognize this.

Discussions were had around social care and the geographical challenges that were having an impact on how care was being delivered. More flexibility was required and a need for more support from the Scottish Government with regards to the challenges faced in the Highland region due to rurality and remoteness.

Ian Thompson stated that with regards to Health and Social Care the challenges were being more acute and there was an urgent need to address this especially with regard to the different age groups that they are trying to support. Need to have more person centred models of care and less centralisation. This needs support from Scottish

Government.

In Radiology there were issues around the retiral of staff with no replacements and no exit interviews being held. Discussions were had around the need to understand the early retiral and leaving of staff. There was a high degree of repetition of work going over referrals and there is a time delay in the recruitment of new staff with vacancies taking too long to go to press.

The Committee noted the updates.

8.2 Culture Update / Whistleblowing Standards Implementation Oversight Group

Manar Elkhazinder / Eileen Anderson

It was noted that the meetings for the Culture Update were moving around and it was challenging to attend due to the changes of date and time. Often these meetings clashed with the Whistleblowing Standards Group meetings. The Culture Update group were losing focus and not completing process. The Whistleblowing meetings were satisfactory.

The Committee noted the update.

8.3 Integrated Performance and Quality Report (IPQR) September 2021 Discussion and feedback from advisory committees

Change wording page 3 – bottom box of the chart should read “95% of patients should be seen within 62 days of the urgent suspected cancer referral”.

The Chair asked for feedback and comment and explained that this document is a developing document. Al Miles stated that with regard to Mental Health Services, colleagues were stressed due to the pressure placed upon them. It was noted that with regard to the Flow Navigation Centre some tweaking was required. There was a need to address issues within Secondary Care that were feeding into and overloading Primary Care. There was a knock on effect to Primary Care with waiting lists getting longer and a need to address this. Eileen Anderson stated that the sickness levels in the report seemed low. As the staff levels were low how was this being recorded. The Chair explained that Covid was reported separately and was not part of this report.

Action – Karen Doonan to update the wording in the IPQR document.

The Committee noted the update.

8.4 Declaration of Gifts and Hospitality Report by Ruth Daly, Board Secretary

Ruth Daly stated the need to socialise the document that she was speaking to. She keeps a central register for all gifts and hospitality that is offered to NHS staff. The ABPI publish details of all gifts that their members offer to healthcare staff and this is published publically. The centrally held register is checked against the ABPI register, having looked at the contrast between the two it has been found that:

2018 - 2020 APBI stated £133,000 was offered

2018 - 2020 Ruth Daly has recorded £32,000 has been offered.

It is important that all gifts and hospitality is recorded accurately and reported whether or not it is accepted or declined. Ruth Daly will now contact all those on the list who have not declared in order they can retrospectively declare and the register can be updated.

Boyd Peters left the meeting at 3.50pm

Discussions were had around what could be accepted by GPs from patients and the need to declare this in order that transparency is maintained. Al Miles asked if the spend amount of hospitality offered had increased over the years or had stayed the same and Ruth Daly agreed to look into this and report back.

Linda Currie asked for a copy of the document in order to update her staff, it was agreed that Ruth Daly circulate the document to all members of the Committee.

Action – Ruth Daly to circulate document to Committee members.

Action – Ruth Daly to report back to meeting whether the amount of gifts/hospitality had increased or remained the same.

9. FOR INFORMATION

9.1 Dates of Future Meetings

13 January 2022

3 March 2022

5 May 2022

7 July 2022

1 September 2022

3 November 2022

The Committee agreed the dates for future meetings

10. FUTURE AGENDA ITEMS – For Discussion

- Adult Social Care Response – Ian Thompson
- Physiotherapy First - Kieran McMann
- Cancer Diagnosis, Treatment And Waiting Times Update (2022)
- Remobilisation Plan

Linda Currie enquired about adding Establishment Setting to the agenda and this was agreed. Alex Javed enquired about adding Cost Cutting as a future agenda item and discussions were had around AHP's and Nurses being paid for work equally as pay given to Consultants. It was agreed that Cost Cutting should be added to the agenda as a future item.

Discussions were had around the NHS Climate Group as COP26 was currently being held and it was agreed that this topic be added as a future agenda item.

11. ANY OTHER COMPETENT BUSINESS

None.

12. DATE OF NEXT MEETING

The next meeting will be held at **1.30pm on Thursday 13th January 2021 via Teams.**

The meeting closed at 4:15pm