MINUTE of MEETING of the	9 th March 2023 – 1.30pm	
AREA CLINICAL FORUM	Microsoft TEAMS	
	Assynt House Beechwood Park Inverness IV2 3BW Tel: 01463 717123 Fax: 01463 235189 www.nhshighland.scot.nhs.uk/	NHS Highland

Present

Catriona Sinclair (Chair) Frances Jamieson, Area Optometric Committee (from 1.55pm) (Vice Chair) Eileen Anderson, Area Medical Committee Linda Currie, Associate AHP Director, A & B 9 (from 2.40pm) Kara McNaught, Team Manager, Adult Social Care Al Miles, Area Medical Committee Zahid Ahmad, Area Dental Committee Patricia Hannam, Area Pharmaceutical Committee Manar Elkhazinder, Area Dental Committee Alex Javed, Area Healthcare Sciences Forum

In Attendance

Boyd Peters, Medical Director (from 2.55pm) Claire Copeland, Deputy Medical Director (from 2.05pm) Ann Clark, Non-Executive Director Joanne McCoy, Non-Executive Director Sarah Compton-Bishop, Non-Executive Director Gaener Rodger, Non-Executive Director

Jane Gill, Whole System Transformation Manager, Item 4 Karen Doonan, Committee Administrator (Minute) Nathan Ware, Governance & Corporate Records Co-ordinator (from 2.20pm)

1 WELCOME AND APOLOGIES

The Chair welcomed everyone to the meeting. Apologies were received from L Bussell, E Caithness, H Eunson, C Dreghorn & S McNally.

1.1 DECLARATIONS OF INTEREST

There were no declarations of interest.

2. DRAFT MINUTE OF MEETING HELD ON 12th January 2023

These were taken as accurate and correct.

3. MATTERS ARISING

There were no matters arising.

4. ITEMS FOR DISCUSSION

4.1 Output from Professional Committees regarding Strategy and IPQR - Jane Gill, Whole System Transformation Manager

J Gill spoke to her presentation that provided some additional detail around the progress made in terms of NHS Highland's Strategy and how the Annual Delivery Plan (ADP) is designed around following a patient's journey through our services. She also provided detail on how each of the Strategy 'wells' are run and how committees feed into the assigned Programme Boards but they can also get involved more directly through Jane herself.

In discussion the following was raised:

- A Miles hoped that general practice could create more anticipatory care plans with more of a lead time into any proposed Winter Plan and provide more insight on how primary care can relieve some of the pressures on secondary care whilst retaining the focus on the similar pressure that comes directly to primary care and how best they could be supported in the wider winter plan.
- E Anderson referenced the constraints on diagnostics around cancer care and the pressures experienced around recruiting skilled people into the acute service especially within Radiology and things are extremely difficult so building that into the ADP is crucial in achieving the set targets.
- J Gill advised that recruitment and retention is a significant pressure overall and we have to look at transformation as a whole and look at resource based planning and whether we can or should deliver a particular service which may involve considering a 'North of Scotland' approach but at the moment that isn't a palatable initiative at this stage but something that could be considered.
- It was noted that we are supporting Aberdeen with cancer services despite NHS Grampian having many more surgeons and Radiologists so there is concern as to whether 'regional' collaboration is working.
- A Clark advised that the issues and specific challenges E Anderson has mentioned are known at Board Level and recruitment & retention is a key focus for the Board to try and address.
- M Elkhazindar referenced the Strategy/ADP and noted that it seems like a list of dreams that every Board would love to achieve but there seems to be a disconnect to the reality of the situation as for Dentistry it is not just a case of not having enough Dentists but rather some are no longer interested in NHS Dentistry and want to move to providing private services.
- C Sinclair also added that some of the Pharmacy standards were a significant challenge around what they can achieve locally compared to what is required nationally which could be due to local priorities not necessarily matching Scottish Government priorities within their day to day job and it's how they go about matching that which is the core challenge.
- J Gill noted that whilst Scottish Government have a specific view on services the Strategy team do push back and try to educate them around the mechanisms we have in place and the extensive engagement that has been ongoing in developing our long term Strategy and ADP aims.
- C Copeland mentioned that she and the services covers would welcome any opportunity to get involved in shaping the Strategy aims and helping translate that into more day to day meaningful guidance.
- It was also noted that it appears some of the culture programme boards were attended by a vast number of people but unfortunately only a handful of practicing clinicians were there further emphasising the disconnect that is present because

there should be a more even distribution of attendees including nurses, allied health professionals etc as at the moment there seems to be a consensus from other staff that working from home is great however that's really not an option for those seeing patients so a better overview needs to be taken into consideration.

- C Sinclair noted that this was an important point, however the Director of People & Culture has definitively said that the Culture programme is not finished, and it is only Phase 1 that is coming to an end so it is more the beginning rather than the end which will enable much more opportunity to influence and contribute moving forward.
- M Elkhazindar mentioned that there is still a disconnect and that Board & Committee meetings should stop or be significantly reduced and more Senior Managers, Directors & Non-Executive Directors out and about visiting different sites and speaking to those on the frontline to help shape the Strategy.
- A Clark confirmed that there are visits taking place but acknowledged there should be more taking place, but it was difficult during COVID but has now restarted, however there was still a significant opportunity for clinicians to contribute to culture.

In conclusion J Gill noted that some of the service planning templates developed do sound like a paper operation but some good benefits have already come to fruition but it's important this forum and the committees input as much data as possible such as 'what does the service actually look like?' so is it just a lack of resource or is there something else that needs looked at and take that risk based decision.

She also noted that it was important the data is gathered to make sure any decisions made are not done so based on anecdotal evidence and the journey needs to begin now otherwise the issues would continue to become worse over the course of the next year.

C Sinclair mentioned that the Area Pharmaceutical Committee (APC) had nominated various people from different sectors to be the key contacts for J Gill or her team with regards to pharmacy opportunities to contribute.

ACTION: J Gill to provide the ADP Summary document with the Committee.

5 MINUTES FROM PROFESSIONAL ADVISORY COMMITTEES AND EXCEPTION REPORTS

5.1 Area Dental Committee meeting – 1st February 2023

M Elkhazindar & Z Ahmad advised of a few issues:

- Ongoing issues with dental care in Skye which remains a widely publicised concern.
- The Child Smile scheme had been removed but discussions around this continued to take place.

5.2 Adult Social Work and Social Care Advisory Committee – 2nd February 2023

K Mcnaught provided an update on discussions:

- The Committee approved their reference and a lot of work had taken place to change the membership because it was very top heavy so the refresh would give us space for an adult social care member and six social work spaces.
- Moving forward, agenda items would include the National Care Service, Area Clinical Forum and Highland Health & Social Care Committee updates.
- A presentation around recruitment and retention was given to the committee by a Care Home Manager and hearing her thoughts/suggestions had helped

encourage the committee think differently in that area.

5.3 Area Healthcare Sciences Forum meeting - No Meeting took place

A Javed confirmed no meeting took place but he has met with Lorraine Cowie around getting this back in place so there is a conduit to Board Level.

5.4 Area Pharmaceutical Committee – 13th February 2023

C Sinclair and P Hannam confirmed the minutes were an accurate reflection and that as discussed earlier in the meeting a selection of individuals will arrange to speak with J Gill around potential Strategy/Transformation collaboration.

5.5 Area Medical Committee meeting – 7th February 2023

A Miles spoke to the minutes of the meeting and noted:

- The Chief Medical Officer provided some clarity around the NHS & Private Care interface and where the responsibilities lie and some information from other Boards on what advice they give patients deciding for follow a private route to treatment.
- There were discussions around the National Treatment Centre (NTC) which is at 80% staffing capacity but some concerns around loss of staff from Raigmore.
- The rollout of the GP IT project has continued to move forward which is aimed at a full launch around summer.
- Work has continued to revitalise the Hospital Subcommittee and E Anderson advised that attending for only a few minutes isn't helpful as it needs people to dedicate time to the committee.

5.6 Area Optometric Committee – next meeting April 2023

F Jamieson confirmed that the next Optometric Committee meeting will take place in April. In response to her NTC question based around staffing progress A Miles advised that they are nearly at full recruitment for Ophthalmology.

5.7 Area Nursing, Midwifery, and AHP Advisory Committee – 26th January 2023

L Currie spoke to the minutes of the meeting and noted:

- Work has continued on revitalising the committee membership to ensure it adequately reflects the Nursing, Midwifery & AHP workforce.
- Helen Eunson had now been confirmed in post as Vice Chair of the committee.
- Work has continued on overall long COVID concerns.
- There was a general feeling that the Strategy/Together we Care changes are quite overwhelming for the staff on the ground leaving little time for development etc.

C Sinclair recommended that L Currie consider asking Jane Gill to speak to her team around the overall Strategy & Transformation piece.

5.8 **Psychological Services meeting –** no meetings took place

The Forum **noted** the circulated committee minutes and feedback.

6 ASSET MANAGEMENT GROUP

A Javed confirmed the group had met in January and mentioned:

• At the end of month 10 they had spent eighteen and a half million pounds, but still 42 per cent left to spend by the end of March but it tends to be a perennial issue as everything is packed into the last couple of months.

- There hasn't been any notification of additional funding apart from the standard formula allocation.
- Work has continued to put together the priority list for next year.

7 HIGHLAND HEALTH AND SOCIAL CARE COMMITTEE

This meeting has been rescheduled to 15th March 2023

8 Dates of Future Meetings

04/05/2023 06/07/2023 31/08/2023 02/11/2023

9 FUTURE AGENDA ITEMS

- Environment & Sustainability
- Finance

10. ANY OTHER COMPETENT BUSINESS

None

11 DATE OF NEXT MEETING

The next meeting will be held on the 4th May 2023 at **1.30pm on Teams**.

The meeting closed at 3.20pm