

NHS GRAMPIAN
Minute of the Area Clinical Forum Meeting
Wednesday 5th May - 3.00 pm
Microsoft Teams

Board Meeting 05.08.21 Open Session Item 13.6
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Present:

Mrs Kim Cruttenden, ACF Chair and Chair, Area Pharmaceutical Committee
Ms Karen Boyd, Vice Chair, Healthcare Scientists Forum
Ms Catriona Cameron, ACF Vice Chair and Chair, AHPAC
Mr Craig McCoy, Vice Chair, Area Optometric Committee
Dr Alastair McKinlay, Chair, Area Medical Committee
Mrs Elaine Neil, Vice Chair, Area Pharmaceutical Committee
Dr Rachael Smith, Chair, GAAPAC
Ms Debbie Thomson, Chair, Area Dental Committee

In Attendance:

Professor Lynda Lynch, Chair NHS Grampian Board
Mr Siddharth Rananaware, Public Representative
Ms Lorraine Scott, Director of Planning, Innovation and Programmes
Dr Marion Slater, Vice Chair, Consultant Sub-Committee
Dr Mike Steven, Chair, GP Sub-Committee
Ms Else Smaaskjaer, Note

Item	Subject	Action
1.	<p>Welcome</p> <p>Mrs Cruttenden thanked everyone for attending and welcomed Mr Siddharth Rananaware (Sid) to his first meeting as a public representative.</p> <p>Apologies were noted from James Bidwell, Mark Burrell, Adam Coldwells, Emma Hepburn, Sue Kinsey, William Moore, Les Petrie, Vicky Ritchie, Kathryn Trimmer and Julie Warrender</p>	
2.	<p>Minute of meeting held on 10th March 2021</p> <p>The minute of the previous meeting was approved as an accurate record.</p>	
3.	<p>Matters Arising</p> <p>Recruitment Issues – Ms Cruttenden and Dr Smith reported a useful meeting with Tracey Hicks, Recruitment Manager. There are still some challenges in the system but there had been streamlining of processes for some groups/grades of staff. Members were encouraged to contact HR staff with any difficulties.</p>	

4.	<p>NHS Grampian Strategy (Lorraine Scott, Director of Planning, Innovation and Programmes)</p> <p>Ms Scott provided an update on the development of the revised NHS Grampian Strategic Plan and outlined the timeframe for developing the plan and for engagement. She explained that as the Grampian Clinical Strategy was coming to the end of its agreed timeframe the opportunity had been taken to refresh the Strategy and review priorities which would take the organisation forward over the next 6 years. The focus will be on renewal and building a single system of public health across Grampian. She highlighted the intention of developing a co-produced plan in consultation with public, staff, third sector organisations and other partner agencies. Ms Scott also confirmed commitment to ensure engagement with different demographic groups across Grampian. Several methods of engagement will be employed to try and capture all views. She noted that there will be alignment with the Strategic Plans of the three Health and Social Care Partnerships in Grampian.</p> <p>Ms Scott outlined the phases of work in developing the strategy:</p> <ul style="list-style-type: none"> • Phase 1 – creating framework in partnership through commissioning specific work to inform a shared agenda. (May – July 2021) • Next stage – time to reflect and analyse information gathered. (August 2021) • Phase 2 – co-creation of a developed plan building on the work and discussions during phase 1. (September – November 2021) • Final stage – seeking support and endorsement for the plan from all stakeholder groups and partner agencies. (December 2021 – January 2022) • Board Approval – February 2022. <p>Ms Scott asked the Area Clinical Forum to provide feedback on how best to reach out to the advisory structure and achieve meaningful collaboration.</p> <p>Ms Cruttenden noted the short timeframe for engagement and asked that Area Clinical Forum is included in the process sooner rather than later to ensure it would have the opportunity to make a meaningful contribution. Ms Scott reported that the proposed approach represented a genuine intention towards collaborative working during Phase 1 in creating the framework and Phase 2 when co-creating a developed plan.</p> <p>Professor Lynch asked if there would be a shared workspace for staff and others to feedback and make contributions. Dr Smith agreed and noted that the digital infrastructure should be open as</p>	
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	<p>there are often difficulties regarding access and functionality for those outside NHS Grampian. Ms Scott confirmed that the intention is to have a shared space similar to that provided during development of the remobilisation plan and eHealth will be asked to facilitate access to feedback routes through the NHS Grampian public facing webpage. Mr Rananaware highlighted the importance of engagement with sections of the population who do not use social media or digital methods of communication.</p> <p>Ms Cameron asked if wider issues would be included in the consultation as although most professional staff are aware that the future direction will be on developing a strategy to live with Covid, it would be important to manage the expectations of those who indicate a preference to go back to how things were pre-Covid. Ms Scott agreed and noted the importance of Phase 1 as an opportunity to engage with staff and public, and recognise the challenges in developing a flexible communications plan to gain an understanding of what matters to different population groups and different generations.</p> <p>Ms Cruttenden highlighted that development of the strategy would be taking place against a challenging context with staff moving between roles, some working in different teams and some expressing feelings of uncertainty. Some staff had also indicated they feel uninformed of changes and what is happening across the system. Ms Cruttenden noted that some tensions could be related to not having 'live' meetings and opportunities to network with colleagues and she cautioned that an on-line meeting with a very large group would not result in meaningful feedback.</p> <p>Dr Steven asked if engagement with the Primary Care sector would be direct or routed through Health and Social Care Partnerships. Ms Scott informed that the team would be working with HSCPs and currently plan to engage using the cluster model. Dr Steven suggested the Primary Care Bulletin which is issued regularly as a useful means of communication.</p> <p>Ms Scott asked the Area Clinical Forum to feedback directly and advise on how the engagement process would work best for their advisory committees and professional groups. In the meantime she would share the draft information packs and would be happy to meet with colleagues to gain feedback.</p> <p>Area Clinical Forum were keen to engage in development of the plan and it was agreed that Ms Scott would form a plan for ACF involvement and engagement and would distribute the draft engagement pack for feedback.</p>	
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5.	<p>Proposed Workshop</p> <p>Mrs Cruttenden reported that she and Ms Cameron had discussed the possibility of holding a workshop to review the purpose and role of the Area Clinical Forum and how it can feed in and make a meaningful contribution to strategic planning across the wider system. The workshop would include representatives of professional committees and colleagues from across NHS teams. They would be invited to participate in a broad discussion and provide suggestions regarding how the skills and expertise of professional advisory committees can be properly utilised.</p> <p>Area Clinical Forum were supportive of the suggestion and further details will be circulated with a view to holding a workshop mid to late summer.</p>	
6.	<p>ACF Chair - Election</p> <p>Mrs Cruttenden's first term as Chair would be due to end on 30th June and a brief paper had been circulated which outlined the process and timetable to elect a Chair for the Forum for the period 1st July 2021 to 30th June 2023.</p> <p>Mrs Cruttenden and Professor Lynch confirmed they would be happy to discuss the role with any members interested.</p>	
7.	<p>Staff Health and Wellbeing</p> <p>Mr Petrie had circulated the flash report from recent meeting of the Staff Health and Wellbeing Group. There were no significant issues highlighted.</p> <p>Members noted positive feedback regarding the treat packs which had been distributed to all staff through the 'We Care' programme.</p>	
8.	<p>ACF/SLT – 7th June 2021</p> <p>Mrs Cruttenden reported she would be meeting with Dr Coldwells and suggested the NHS Grampian Strategy should be on the agenda. She asked members to contact her with any further topics.</p>	
9.	<p>Updates from Advisory Committees and ACF Chair</p> <ul style="list-style-type: none"> • <u>Chairs Feedback</u> – no recent ACF Chairs meeting to report. • <u>Public Health</u> – no update at this meeting. • <u>AMC</u> – a revised constitution had been agreed and membership restructured around divisions. A new chair to be elected at meeting in June. Alan Gray, Director of Finance, had provided a 	

	<p>financial update and AMC had welcomed the large range of replacement medical equipment purchased during 2020/21. There had also been some discussion around the Review of Social Care Services for Adults in Scotland (the Derek Feeley report) and the impact this could have on Health Board funding. Concerns were raised around the ongoing challenges which will emerge for students who have not had the hands-on clinical experience during their training.</p> <ul style="list-style-type: none"> • <u>GP Sub-Committee</u> – recent election had resulted in changes to membership which now included representation from across Grampian rather than mainly Aberdeen City focused. Key topic at recent meeting had been the changes to arrangements for community nursing staff who would be locality based rather than aligned to specific practices. GPs understood the reasons for this but had been disappointed at the level of engagement from Aberdeen City Health and Social Care Partnership. GPs had also discussed ongoing challenges regarding flow at ARI resulting in prolonged waiting times for Scottish Ambulance Services. GPs will continue to work with colleagues to seek resolution. Many GP practices had resumed routine activity and where there is sufficient capacity enhanced services had also been reintroduced. An audit will be conducted at the end of June to identify levels and types of activity across practices. Primary/Secondary Interface Group continues to develop Community Hubs. Some patients had expressed frustration at having to attend at different venues outside their local area which some find difficult to access. GPs had noted they would be keen to be involved in the discussions regarding changes to the Elective Care Project and proposals for delivery of services. • <u>Consultants Sub-Committee</u> – no update at this meeting. • <u>AOC</u> – services for routine patients resumed and volume of appointments were almost back to pre-Covid levels. Optometrists had reported longer appointment times due to Covid compliance requirements. Ophthalmology had been asked to provide some guidance around community based services. • <u>GANMAC</u> – no update at this meeting. • <u>AHPAC</u> – no update at this meeting. • <u>APC</u> – general concerns raised about lack of information regarding what is happening in other services. Pharmacists had also asked for more information about the vaccination programme. Recent meeting had noted the volume of Community Pharmacy vacancies and significant disappointment regarding the prolonged time which new entrants into the profession remain on the provisional register. 	
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	<ul style="list-style-type: none"> • <u>GAAPAC</u> – had discussed the efficacy of digital therapies and noted a preference that NHS Grampian continue with the use of ‘Near Me’ which had been used successfully. • <u>Healthcare Scientists Forum</u> – aim to present work from the short life working group to review vulnerable services at the meeting of the Area Clinical Forum in June. There are ongoing discussions regarding the regulatory framework for Healthcare Science professionals and Professor Fluck, Medical Director, will attend a workshop with the group. • <u>ADC</u> – most Dentists had resumed services although limitations acknowledged in relation to capacity and ventilation requirements. Waiting lists still indicate a significant backlog and urgent care had been prioritised. Next meeting of ADC will discuss the situation around dental students and the impact this will have on availability of fully trained dentists in future years. Professor Lynch reported that this had been discussed with the University of Aberdeen who are aware of the risks. <p>Members are reminded that if there are important issues which advisory committees wish to raise at Area Clinical Forum they should ask to have them included as main agenda items.</p>	
9.	<p>AOCB</p> <p>Members were pleased to acknowledge the achievement of Vicky Ritchie, Chair of the Healthcare Science Forum, in her appointment to the Clinical Physiology Executive Board, which is part of the Diagnostics in Scotland Strategy Group. Members agreed that it was beneficial to have representation from Grampian at that level.</p>	
10.	<p>Key Messages from ACF to the Board</p> <p>Main Themes:</p> <ul style="list-style-type: none"> • Strategic Planning. • Workshop. • Training. • Vicky Ritchie – appointment to Clinical Physiology Executive Board. 	
	<p>Date of Next Meeting</p> <p>Wednesday 23rd June 2021. 15.00 – 16.30 by Teams</p>	