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DRAFT MINUTE of MEETING of the AREA CLINICAL FORUM	Thursday 4th July – 1.30pm Microsoft TEAMS	

Present

Catriona Sinclair (Chair)
Zahid Ahmed, Area Dental Committee
Elspeth Caithness, Employee Director (until 3.05pm)
Linda Currie, NMAHP Advisory Committee
Helen Eunson, NMAHP Advisory Committee
Alex Javed, Area Healthcare Sciences Forum
Alan Miles, Area Medical Committee (from 2pm)
Kara McNaught, Team Manager, Adult Social Care
Eileen Reed Richardson, NMAHP Advisory Committee

In Attendance

Tim Allison, Director of Public Health
Gareth Adkins, Director of People and Culture (Item 4.5)
Ann Clark, Non-Executive Director
Heledd Cooper, Director of Finance (Item 4.5)
Karen Doonan, Committee Administrator
Jo McBain, Director of Allied Health Profession's (Item 4.4)
Joanne McCoy, Non-Executive Director
Gerard O' Brien, Non-Executive Director
Boyd Peters, Medical Director
Allyson Turnbull-Jukes, Director of Psychology (Item 4.3)
Nathan Ware, Governance & Corporate Records Manager – (Item 4.1)

1 WELCOME AND APOLOGIES

The Chair welcomed everyone to the meeting. Apologies were received from Gavin Smith, Grant Franklin, Kaye Oliver and Patricia Hannam.

1.1 DECLARATIONS OF INTEREST

There were no declarations of interest.

2. DRAFT MINUTE OF MEETING HELD ON 14 March 2024

The minutes were taken as accurate and correct.

The Forum **approved** the minutes.

3. MATTERS ARISING

There were no matters arising.

4. ITEMS FOR DISCUSSION

4.1 Ophthalmic Committee - Constitutional Review – Nathan Ware, Governance & Corporate Records Manager

N Ware spoke to the updated Constitution document that was circulated to the forum and

highlighted the following changes:

- The operational units had been updated to ensure they reflected the area appropriately, namely Highland Health and Social Care Partnership and Argyll and Bute Health and Social Care Partnership
- Part 2 of the ophthalmic list had been added so committee better reflected the professional landscape across the organisation.
- Clarification relating to the election process with, highlighting if a member moved to another Board area then their membership of the committee would lapse.
- Confirmation the constitution should be reviewed bi-annually as a minimum and that changes would be formally agreed by the Area Clinical Forum.

The Forum **approved** the changes.

4.2 Feedback from joint development session held on 23 April 2024

The Chair spoke to the notes circulated from the joint development session. This was a good session which mainly focused on the Quality Improvement Framework. L Currie suggested that the session be held yearly and welcomed the opportunity to meet with members of the Board. It was noted the importance of gaining different viewpoints from participants especially those who had worked in different sectors in respect of the discussions that had taken place.

The Chair thanked everyone who attended for their participation.

The Forum **noted** the update.

4.3 PT Spec & Assessment Team Pilot with Scottish Government – Allyson Turnbull-Dukes, Director of Psychology

The Director of Psychology spoke to the circulated presentation and noted the following:

- There were three main drivers influencing Psychological Therapies which were the Mental Health and Wellbeing Strategy, the Core Mental Health Standards and the National Specification for the delivery of Psychological Therapies and Interventions.
- She noted work was underway to ensure robust governance arrangements were in place to ensure new staff fully understood the expectation upon them and what is expected of them.
- Additional funding had been provided by Scottish Government but in turn this had increased the level of scrutiny on the service and work was underway to benchmark against other Boards and identify how they maintain quality performance whilst driving down waiting list times.
- The core areas of focus were equitable service, quality interventions and treatments, governance and leadership, lived/user experience alongside service delivery, procedures and staff training/well-being.

During discussion the following points were addressed:

- The Director of Allied Health Professions (AHP's) highlighted the focus appeared to have moved to a data and service performance approach; The Director of Psychology confirmed this had changed due to the nature of the departments waiting list performance and since it was introduced NHS Highland are now the second best performing Board however acknowledged work was still required.
- H Eunson suggested the performance improvement should be celebrated through the organisations weekly communications as it would be useful for other disciplines.
- The Chair sought clarity on the process around no-show appointments and how

this was managed; the Director of Psychology confirmed the department had to submit trajectories to Scottish Government in an effort to anticipate cancellations/no-shows and plan appropriately with limited resources.

- J McCoy sought clarity around the timescales involved for the service change pilots noted in the report; the Director of Psychology confirmed the planned completion date was May 2024 but had not been achieved and work was underway to meet an autumn deadline.
- A Miles highlighted the 'no wrong door' principle and noted GP's experienced challenges around referring patients, as the department would come back and suggest referring to a different area consuming a lot of GP time and suggested it may be more useful if the receiving department redirected the referral, he also referenced the challenges faced in practices around providing psychological interventions with the limited resources available; The Director of Psychology acknowledged the issues raised and suggested she'd source the answers and discuss out with the meeting.
- The Director of People and Culture added it would be important to involve Community Link Workers to support primary care in NHS Highland especially around areas of socio-economic deprivation.

The Forum **noted** the update.

4.4 **NMAHP Professional Assurance Framework 2024** – Jo McBain, Director of Allied Health Professions

The Director of Allied Health Professions spoke to the circulated report and noted:

- The framework is NHS Highland's response to Scottish Governments Nursing and Midwifery professional assurance framework in 2014.
- The purpose of the framework was to provide clear guidance on how professional governance is implemented in Nursing, Midwifery and Allied Health Professionals (NMAHP) and focused on four domains; Safe Quality Care, Professional Practice and Accountability, Professional Workforce Standards and Development and Leading Service Improvement and Design.
- The new framework would facilitate a clear route of governance as anything solely AHP related would be dealt with via their professional for a and subsequently feed into the AHP Strategic Leadership Team; however if any changes would have implications across the Nursing and Midwifery professions it would go through those appropriate governance routes highlighted in the presentation.
- The Director of People and Culture welcomed the clarity provided and added it would be important to encourage an overarching approach for staff, particularly around corporate training and competency frameworks.

The Director of Allied Health Professions asked Forum members to send any feedback/questions directly to her.

The Forum **noted** the Update

Executive Update/Financial Plan – Executive Team

The Chair confirmed that the Annual Delivery Plan would not be covered as part of this update.

The Director of Finance spoke to the circulated report and noted:

- The funding allocation for NHS Highland in 2024-25 would be £807.1 million but there would be no baseline uplift in budget and there was no provision within it to cover the impact of pay uplifts, however Scottish Government would revisit this after

the pay negotiations had taken place.

- There was an expectation that additional funding would be provided for Vaccinations, Test & Protect, Additional Personal Protective Equipment (PPE) and some Public Health measures.
- It was noted that Scottish Government had confirmed 80% of any additional funding would be provided to Boards by the end of Quarter one 24-25; A revised three-year financial forecast was submitted to Scottish Government as which assumed the Adult Social Care gap of £23.254 million would be closed and the Argyll and Bute Health and Social Care Partnership would achieve an in year balance through their cost reduction/improvement plan that totalled £8.653 million.
- The brokerage cap had been set at £28.4 million however it was thought there would be potential opportunities to achieve £83.486 million in savings. It was also noted there was a £23 million opening gap in Adult Social Care and no agreed process to address this with Highland Council but work was underway.
- There were some key focuses taking place around minimising the use of supplementary staffing which was one of the biggest costs overall; part of the solutions suggested had been consolidating resources more effectively and considering a freeze on administrative type posts; she confirmed the Strategic Transformation Assurance Group (STAG) considered and provided the decision making around the suggested changes.
- The Director of People and Culture confirmed there was a People and Culture Portfolio Board that focused on workforce impacts from a variety of subgroups including the Health and Wellbeing Group, Employability Group and the Workforce Transformation and Planning Group; he added that some more detail would come to the next Forum meeting as part of the Annual Delivery Plan work.

During discussion the following points were raised:

- A Miles sought clarity around how confident NHS Highland was that the proposed savings could be achieved and highlighted that some of the suggestions were significant and would require an element of cover from Scottish Government as they would likely appear unsavoury to the public. The Director of Finance confirmed that it would be extremely challenging and whilst noted, they weren't the preferred choices but rather an illustration of what would be required to meet the three per cent reduction in spending in one 12 month period.
- She added that whilst challenging and a risk of the reduction being unachievable, that should not prevent the transformation work from taking place as any reduction is a positive step in the right direction.
- A Miles added that it may be worthwhile being more realistic around the workforce budget, including the current 'no redundancy' policy across NHS Scotland alongside the challenges faced in GP Practices around locums and the mandated staff/skills mix reducing the opportunity to recruit full-time GP's.
- The Director of People and Culture added that supplementary staffing concerns were in part caused by the instruction to utilise this wherever needed around ten years ago which caused a shift in the labour market that will take some time to resolve in terms of a focus on substantive workforce. He also noted that work was underway to identify whether delivering care in the community may be more cost effective.
- L Currie queried whether enough engagement had taken place with staff to ensure they fully understood what efficiencies were required and how they could contribute appropriately; the Director of Finance confirmed an extensive level of engagement was taking place and regular communication was taking place to enable staff to provide feedback directly.
- K McNaught sought clarity around the challenge being faced with Adult Social Care between NHS Highland and Highland Council, particularly in relation to the funding disparity and how that would be resolved. The Director of Finance confirmed it was a historical issue and NHS Highland had raised concerns that Highland Councils budget setting process did not consider Adult Social Care budget pressures, and

whilst there was a legal process that could be followed it would not be conducive to the current financial situation therefore it's best to work closely with the council towards a mutual solution.

The Forum **noted** the update and took **moderate** assurance.

4.6 Representative from Area Clinical Forum for People and Culture Portfolio Board – Forum Chair

The Forum Chair confirmed the People and Culture Portfolio Board were seeking an Area Clinical Forum member to contribute appropriately and advised there were six meetings per year with an expectation to provide an update to the Area Clinical Forum at agreed intervals.

L Currie advised she would be happy to attend as a representative for the Area Clinical Forum.

5 MINUTES FROM PROFESSIONAL ADVISORY COMMITTEES AND EXCEPTION REPORTS

5.1 Area Dental Committee meeting – 27 March 2024, (May meeting cancelled)

There were no queries raised.

5.2 Adult Social Work and Social Care Advisory Committee – 25 April 2024 and 27 June 2024

There were no queries raised.

5.3 Area Pharmaceutical Committee – 12 February 2024, 15 April 2024, and 17 June 2024

There were no queries raised.

5.4 Area Medical Committee – 13 February 2024, 16 April 2024 and 18 June 2024

The Board Vice Chair highlighted the work underway to address sexual harassment issues within the NHS in conjunction with the Medical Director and the Director of People and Culture which was raised with committee through the British Medical Association.

A Miles added that the GP Enhanced Service negotiations continued and believed NHS Highland may be the first Board to successfully agree a way forward.

5.5 Area Optometric Committee meeting – 15 April 2024

There were no queries raised.

5.6 Area Nursing, Midwifery and AHP Advisory Committee – 21 March 2024 and 23 May 2024

There were no queries raised.

5.7 Psychological Services Meeting – no meeting held.

5.8 Area Health Care Sciences meeting – no meeting held.

The Forum **noted** the circulated committee minutes and feedback provided by the Chairs.

6 ASSET MANAGEMENT GROUP – meeting held on 22 May 2024

There were no queries raised.

The Forum **noted** the circulated minutes.

7 HIGHLAND HEALTH AND SOCIAL CARE COMMITTEE – Minute of meeting held on 6 March 2024, 8 May 2024, and 27 June 2024

The Chair of Highland Health and Social Care Committee spoke to the circulated minutes and confirmed that work was underway to resolve the sustainability issues experienced in relation to Care Home places. He also referenced the work underway around a revised vaccination delivery model due to the complex geographical issues faced.

The Forum **noted** the circulated minutes.

8 Argyll and Bute IJB minutes

There were no queries raised.

9 Dates of Future Meetings

29 August 2024
31 October 2024

10 FUTURE AGENDA ITEMS

- Leadership and Culture Framework update – July 2024.
- Discussion Over Physician Associates
- Invite to F Davies (Incoming NHSH Chief Executive) to Address Forum – proposed May 2024

11. ANY OTHER COMPETENT BUSINESS

There was no AOCB.

12 DATE OF NEXT MEETING

The next meeting will be held on Thursday 29 August at **1.30pm on Teams.**

The meeting closed at 16:00