

AREA CLINICAL FORUM

Minutes of the meeting held on Thursday 7th October 2021 at 4pm via Microsoft Teams.

Present

Amanda McDermott, Chair of ANMAC [AM] (Chair of ACF)
Simon Boyd, Chair of Area Pharmaceutical Committee [SB]
Dr Susan Laidlaw, Vice Chair, Area Medical Committee [SL] (*present from 4.15pm*)
Dawn Smith, Chair of Area Healthcare Scientists Committee [DS]
Jacquie Whitaker, Vice Chair of ANMAC [JW]

In attendance

Michael Dickson, Chief Executive (agenda item 9) [MD]
Elizabeth Robinson, Public Health and Planning Principal (agenda item 15) [ER]
Pauline Moncrieff, Minute-taker

1. Apologies for Absence

Apologies for absence were received from Wayne Badier, Krupa Muni, Jo Robinson, Claire Rogers and Denise Morgan.

2. Declaration of Interests

There were no declarations of interest.

3. Draft minute of the meeting on 12th August 2021

The draft minutes were approved with no amendments.

4. Matters Arising

There were no matters arising from the previous minutes.

5. Spiritual Care Deep Dive

AM presented the document from SGov which had been forwarded from Neil Brice, Spiritual Care Lead.

Members were invited to share with their individual PACs for information and Neil Brice could be invited to attend a future meeting of ACF if members wish.

6. Excellence in Care Awards for NMAHPs/Healthcare Science

AM explained there was half-day event planned for 12-4pm on 3rd December 2021 as opposed to over two sessions as in previous years.

The awards can be aligned with the national programme for Excellence in Care aimed mainly at nursing and midwifery and the local event is a celebration of excellence in care regardless of your profession. The format involves presentations from different professions detailing any projects of work developed over the year.

The categories this year are:

- Person Centred Care
- Practice Education
- Prevention
- Partnership working
- Innovation

Members were invited to discuss within their PACs and identify any pieces of work they could showcase at the Excellence in Care celebration event. Submissions can be made to Amanda or Kathleen Carolan.

ACTION: all ACF members

7. NHS Shetland/NHS Orkney collaborative working ideas

AM explained that at the previous meeting, the committee was asked for its clinical opinions about joint working with NHS Orkney. Responses had been collated and returned to the Chief Executive on Monday. If any PACs wish to add further comments, they can forward these to AM who will submit on behalf of ACF.

AM summarised that based on the feedback from PACs, it was not the vision of ACF to support shared clinical posts, but ACF do support joint engagement, joint working and providing mutual aid across boards as long as it was not at detriment to the quality of services or work/life balance. AM offered to share the ACF response with members for the information of PACs.

AM said that during the recent visit, Caroline Lamb had mentioned the timeline for recruitment for the post of Chief Executive for NHS Orkney so someone could be in post in the first half of next year.

8. Papers for NHS Shetland Board Meeting on 12th October 2021

AM highlighted the issues for members' interest from the papers:

- HAI report - an unannounced inspection had taken place last month which had a Covid focus, the findings from which were very positive. There were 2 straightforward recommendations around procedures rather than direct care to patients and an action plan to address these has been returned. The findings will be published on the HIS website by 5pm today.
- Finance monitoring report at month 5 – challenges continue to be recruitment and ways to drive down the locum cost whilst planning for the future demands of the service. SL said some of the issues recently in primary care had arisen because GPs had been unable to come up due to testing positive for Covid or having been contact traced. The model of 'GP Joy' appears to be working well in terms of GPs who come up for periods of time in the year and then return which is good for continuity of care. The difficulty is that in a small model, it just takes one person being unable to come to create major difficulties within the service.
- Clinical Governance Committee ToR – the addition of operational governance groups which will reduce the workload of the Clinical Governance Committee.

Standing Items

9. Chief Executive Update

MD thanked everyone who had been involved in the visit of Caroline Lamb and Professor Jason Leitch. Jason was very happy to have the opportunity to visit a care home and hear about the 'House of Care' model in Shetland. They saw in practice how teams in Shetland can work in a more agile and dynamic way compared to larger mainland boards.

In terms of the wider NHS picture across Scotland, boards in the central belt colleagues are massively under pressure at present. Locally the health service is also busy with lots of competing demands but the fundamental challenge is the resilience of teams and how to take work forward is critical.

NHS Shetland faces a significant financial challenge and in particular the gap in relation to expenditure not solely related to covid. In the coming months and years the board will be required to design its services in such a way that they are as resilient and sustainable as they can be.

ACF were encouraged to consider and participate in the consultation on the National Care Service. It is expected there will be a broad legislative framework to enable the implementation and in Shetland organisations already work well in partnership so there is an opportunity for increased integration.

MD reassured members that any partnership working with NHS Orkney would not mean merging services or either board losing anything. Instead it could provide scope for more collaboration, working in partnership, and exploring opportunities strengthen resilience. Members discussed examples of potential impact on the clinical staffing teams if any partnership working models were formalised. MD said the expectation was more about sharing experience and then buddy-up to spend time with other colleagues who share protocols with NHS Shetland (eg. NHS Grampian).

MD reported that a meeting had been help with the Scottish Ambulance Service to discuss the outstanding responses to incidents that have occurred across Shetland and Orkney. Issues for discussion include helicopter transfers from North Sea platforms. AM added that she had already raised a similar issue at the Ambulance Liaison Group

MD confirmed that the board had purchased a property with a view to assist addressing the issue of short-term accommodation for staff which in turn would assist with recruitment. Further details could not be shared with ACF due to the information being commercial in confidence.

In response to a question from AM regarding funding for boards to facilitate international recruitment, MD confirmed SGov had announced assistance in connection with recruitment costs. It was acknowledged that there was the issue of the wider wrap-around pastoral support for new international but it may be possible to utilise endowment funding for this purpose.

10. Realistic Medicine Update

SL reported that there had recently been a meeting of the national leads and teams are resuming work on realistic medicine action plans. Plans must be submitted to SGov by the end of October so the intention is to present this first to EMT in the coming weeks.

Two projects had bid for some money (the Value Improvement Fund accessible through the Realistic Medicine Programme) but both were unsuccessful. Depending on the feedback on the bids, a decision will be made on whether to reapply before Xmas with an aim to have funding in place at the beginning of April. Work on evaluating the projects that received funding previously is being done (diabetes and pharmacies in care homes).

There is a project of work pulling together all the pieces of work going on that can be considered realistic medicine such as innovation, patient safety etc. The project will also look at the training resources available and ensure that staff have access as appropriate to their work and what they are interested in.

ACTION: SL will circulate the action plan for information.

11. Feedback from National Area Clinical Forum Chair's meeting, 1st September 2021

AM reported that Caroline Lamb had attended the meeting and wanted to get a sense from all the ACF Chairs across the country what the emerging pictures were and most

boards were concerned about staffing, the National Care Service consultation, and island boards spoke about staff accommodation. ACF Chairs described recovery from the pandemic as being hampered by vacancies and the need to review workforce in order to respond to the demands of more long term conditions and staff choosing to have a different work/life balance post pandemic. Members discussed experiences of this within their individual PACs/teams.

AM explained that when we give workforce projections, we mean numbers of WTE that we need, but the shift is now the requirement to recalculate for things such as time out for education. This is because the current predicted absence allowance is that factored into the funded WTE establishment is that 1-2% of the time staff will be requiring training.

AM described the funding granted from SGov to assist boards with recruitment:

- Funding to recruit HR advisers that will specialise in international recruitment. The advert for a full-time joint post with NHS Orkney has gone out this week.
- A larger piece of work going on with SGov about how recruits can come into the country and obtain their competency assessments. For nursing and midwifery that would be an OSCE certificate which would need to be done with the NMC. There's a short-life working group looking at this and also setting up an OSCE Centre in Scotland. AM is on the short-life working group as she was the Workforce Lead for the Healthcare Staffing Programme.

Dr John Harden also attended the ACF Chairs meeting. He is now the Deputy National Clinical Director who sits across the CMO, CNO and the other AHPs.

Caroline Lamb has been in Shetland since the National ACF Chairs meeting and ACF members had the opportunity to meeting Caroline at Mareel. On the day, ACF and APF had a joint conversation with Caroline about local issues which mirrored discussions held at ACF meetings.

There was also lots of discussion about how ACFs will try to strengthen input and engagement from their ACF and their PACs. AM has sent out an email to encourage some new members and there's been quite a lot of interest from that so we do have some new members across PACs and describe the role of the ACF.

12. Feedback from Board Standing Committees

Board Meeting – 17th August 2021

AM highlighted the main papers for members information.

- Quality Report update - there was improvement reported and recognition of the hard work that teams were undertaking to maintain quality during the pandemic. There were questions asked about the Tissue Viability service due to the pressure ulcers reported.
- Financial Monitoring – there was discussion around the board continuing to be overspent particularly on locums and recognition that was essential for service provision.
- There was some discussion about the lack of accommodation and the effect on recruitment to posts in the Shetland. It was acknowledged that it would be helpful if SIC would give priority allocation housing points to key workers such as NHS. Board members were informed that other solutions to accommodation were proposed.
- Performance – good results were reported and ensuring that clinicians are commended at all levels for maintaining that quality throughout the pandemic.
- There was a conversation around the concern regarding Mental Health waiting lists and this was discussed again the Board pre-meeting today.

13. Feedback from Professional Advisory Committee

AMC - SL said she had not been at the last meeting but was not that there had not been any interest from anyone in taking over the AMC Chair role. Various people had been suggested but SL would need to check the draft minutes to see the outcome at the last meeting. SL said because so many clinicians are locums, it may not be appropriate or they may not be willing to be involved which reduces the pool of people eligible to be Chair.

HCS – DS said they had still only met once and it was hoped to schedule a 2nd in a few weeks when the 4 members could attend. They have discussed iMatter and acknowledged the need to make use of the feedback that all teams have ie. the need for board members to be more visible. Making use of routes into APF and ACF.

AM said that the iMatter action plan for the Board had been informally discussed at the board pre-meeting and the suggestion that the board members are more visible. When board members meet formally to discuss the action plan, AM can share feedback from her teams that staff would like to know like who board members are and what they are responsible for etc.

APC – SB said they were having their meeting tonight and there were a few things for discussion that can be fed back at the ACF meeting.

ADC – there were no representatives from dental at the meeting

ANMAC – JW said the meeting was next week so there was nothing to report since the last ACF. The last meeting was 18/8/21 and members had gone through all the policies.

For Information

14. NHS Circulars – for information

Any other business

15. Remobilisation Plan v4

ER advised that the acute and specialist services sections have been presented to the Hospital Management Team so members will have possibly seen this already but not the more Community Health & Social Care Partnership pieces. The plan is basically in the same format as before, but it is more detailed in terms of timescales, outcomes and a RAG status which is the template that SGov have specified.

ACF are invited to feed back comments during the next 2 or 3 weeks including thoughts on what the board should be building in to what the ambition to government is from April next year. The board then moves to a 3 year operational plan rather than the 1 year one so any views on either ways of developing it or making it more inclusive would be very welcome. **ACTION: ACF members to forward comments to ER by 25 October**

Vanguard – it was agreed to add this to the agenda for the next meeting.

ACTION: Pauline to add to the agenda for 9 December

16. Date and time of next meeting

The next meeting would take place on Thursday 9th December 2021 at 4pm on Teams.

There was no further business and the meeting closed at 5.05pm.