GREATER GLASGOW AND CLYDE NHS BOARD

Minutes of a Meeting of the
Area Clinical Forum
held in Meeting Room A, J B Russell House, Corporate Headquarters,
Gartnavel Royal Hospital,
1055 Great Western Road, Glasgow, G12 0XH
on Thursday 12 April 2012 at 3.00 pm

PRESENT

Nicola McElvanney - in the Chair (Chair, AOC)
Heather Cameron Chair, AAP&HCSC
Val Reilly Chair, APC
Carl Fenelon Vice Chair, APC

IN ATTENDANCE

Shirley Gordon Secretariat Manager
Jennifer Armstrong NHSGGC Board Medical Director
Adele Pashley Chair, Psychology Advisory Committee
Catriona Renfrew Director of Corporate Planning and Policy (for Minute Nos 14 and 15)
Doug Mann Head of OD, NHSGGC (for Minute No. 14)

ACTION BY

11. APOLOGIES AND WELCOME

Apologies for absence were intimated on behalf of Pat Spencer, Andrew McMahon,
Maggie Darroch, Nancy Reid, Linda de Caestecker, Anne Hawkins, Andrew
Robertson and John Hamilton.

Ms McElvanney welcomed Area Clinical Forum members to the formal session and
thanked them for their input to the earlier one hour informal session. She also
welcomed Dr Jennifer Armstrong (replacing Dr Brian Cowan), the newly appointed
Board Medical Director, to her first meeting of the Forum.

NOTED

12. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting of the Area Clinical Forum held on Thursday 2 February
2012 [ACF(M)12/01] were approved as an accurate record.

NOTED
13. MATTERS ARISING

(i) In respect of Minute No. 3 (i), Heather Cameron reported that the workforce planning event she had been due to attend, on behalf of the ACF, had been cancelled and she awaited confirmation of a new date.

(ii) In respect of Minute No. 5, members noted that it was the intention of Pat Spencer and Donald Sime (Chair, Area Partnership Forum) to arrange a joint event for both Forums’ members. This would be particularly helpful in understanding further each other’s areas of work and establishing mutual areas of interest to bring up at the NHS Board’s Annual Review. A tentative date of 3 November 2012 had been agreed with the SGHD for this years Annual Review and it had been confirmed that the Cabinet Secretary would be in attendance. Pat and Donald would now go ahead and arrange the joint event with this timeframe in mind and it would be discussed in further detail at the June ACF meeting.

NOTE

14. FACING THE FUTURE TOGETHER PROGRESS / UPDATE REPORT

Ms McElvanney welcomed Catriona Renfrew and Doug Mann to the meeting. They were in attendance to provide an update on progress made with FTFT. This initiative represented a fresh look at how we supported each other to do our jobs, provided an even better service to patients and communities, and improved how people felt about NHS Greater Glasgow & Clyde as a place to work.

Addressing a point made at the last ACF meeting Mr Mann had attended, he confirmed that all FHS practitioners (except optometrists) had access to the Board’s Staffnet. This meant they were able to access the FTFT pages and resources in a similar way to all of NHSGGC staff. In terms of taking this forward for optometrists, Ms McElvanney reported that an AOC website had been set up. Although this was open to members of the public, there may be a procedure whereby optometrists could access a secure section of the site with associated log-on procedures. Given that no timescale had been put on optometrists having the necessary IT locally to be able to access Staffnet, it was agreed that Ms McElvanney and Mr Mann discuss further any opportunity to have FTFT information/links placed onto the secure section of the AOC site.

Ms McElvanney
Mr Mann

Catriona Renfrew suggested that FTFT be placed on the next cycle of all the advisory committee meeting agendas. She was keen to get their feedback and views on how useful it was; were there any barriers to it working effectively; any other challenges and, in general, how best their contributions could help to move the spirit of FTFT forward to keep it dynamic. To help focus their discussions, it was agreed that Doug Mann produce a short summary paper to include on each advisory committee agenda. This would be forwarded to the secretary as soon as possible.

Doug Mann
All Advisory Committees

Ms Renfrew described some of the latest work being undertaken, that of “Patient Facing Teams” and how they could work more effectively. This term had been selected to try to encompass all teams that worked together across the NHS Board’s area but where there was often no formal or managerial reporting structure. The priority for all team members in such situations, however, was to mirror the patient pathway so that patient care was seamless regardless of what part of the service someone was accessing. Members recognised the challenges with this work especially in an organisation the size of NHSGGC where so many multi-disciplinary
teams existed but were agreed that what staff ultimately wanted was the best for patients. Ms Renfrew echoed the challenges but re-iterated that all staff had to take responsibility and recognise they worked in many different teams (formal and informal) on a daily basis. She looked forward to hearing the views of all the respective advisory committees shortly.

NOTED

15. CORPORATE PLAN

It was noted that NHSGGC was currently developing its Corporate Plan for the period 2013-16. A discussion paper, circulated with the agenda, set out the context, challenges and priority areas. The Director of Policy, Lorna Kelly, wanted to get a wide range of views on the questions in the Plan, and had asked all Directors across the organisation to enable local engagement on this.

In advance of discussion at the ACF with Ms Renfrew, all advisory committee Chairs were asked to share the discussion paper with each of their respective advisory committees. The ANMC response was attached for information and the APC response had been circulated prior to the ACF meeting today.

Ms Renfrew thanked the ANMC and APC for their responses. She mentioned that comments could also be submitted via Staffnet where the Clinical Services Review had also recently been added. The NHS Board was keen to get as much feedback as possible. She reported that a final draft of the Corporate Plan would be issued later in the summer for further consideration. This would also be circulated to the ACF, at that time, for any final re-drafting comments.

NOTED

16. REGULATION OF HEALTH CARE PROFESSIONALS

Members were asked to pivot the profile of this document as issued by the Scottish Law Commission on 1 March 2012. Each advisory committee had been asked to actively engage with this consultation given the fundamental changes proposed. This tied in with the professional workstreams emanating from the SGHD.

Ms McElvanney reported that this was due to be considered at the AOC meeting scheduled for Monday 16 March 2012. Ms Cameron confirmed that it would also be considered at a future meeting of the AAHP&HCSC. Mrs Reilly reported that the APC responded to the first draft of this consultation exercise and was in the process of cross referring its original response with the latest draft to establish if its comments had been taken on board.

NOTED

17. AREA CLINICAL FORUM – 2012/13 MEETING PLAN AND FORWARD PLANNING

Members were asked to note the ongoing Area Clinical Forum meeting plan for 2012/13 and were encouraged to make suggestions for forward planning of Area Clinical Forum activities.
Ms McElvanney also alluded to the work priorities of the National ACF Chairs Group. Members agreed that many of the themes were similar as would be expected and were reassured to note that much of the national work plan was being taken forward locally by NHHSGGC’s ACF.

NOTED

18. UPDATE FROM THE AREA CLINICAL FORUM CHAIR ON ONGOING BOARD / NATIONAL AREA CLINICAL FORUM BUSINESS

Ms McElvanney briefly summarized some of the topics discussed at the February 2012 NHS Board meeting as follows:-

- The appointment of the new Board Medical Director – Jennifer Armstrong.
- Two public health reports on Bloodborne viruses and public health screening.
- The Clinical Services Review

NOTED

19. BRIEF UPDATE FROM EACH ADVISORY COMMITTEE ON SALIENT BUSINESS POINTS

(i) AOC – The next AOC meeting was scheduled for Monday 16 April. Ms McElvanney reported on some of the items to be discussed including ongoing developments with the Teach and Treat Clinic; continuing dialogue with pharmacy colleagues that would allow local optometrists access to a certain amount of medications for direct use by their patients and ongoing talks on how best to develop the Committee.

(ii) AAHP&HCSC – The last meeting was 23 February. Ms Cameron summarised some of the key areas of discussion as including input to the Workforce Plan, Professional Leadership Review and National AHP Review; the arrangements of a further Committee Development Event and the need now to elect a new vice chair since Roger Carter resigned.

(iii) APsyC - Mrs Pashley referred to the last meeting held in March 2012 when members had discussed their Development Session and how to better raise awareness of the work of the Committee in order to attract new members; Service Redesign and a presentation from Unite and HEAT targets and local performance.

(iv) APC – the next meeting was arranged for 12 April. Mrs Reilly explained that they were going to discuss the Health Promoting Health Service: Action in Hospital Settings documentation; the Area Pharmaceutical Committee Quality Improvement Framework 2011-2012; Improving Care for the Elderly and the Committee’s contribution to various consultations.

NOTED
20. **ANY OTHER BUSINESS**

   (i) Val Reilly highlighted to Area Clinical Forum members the Review of NHS Pharmaceutical Care of Patients in the Community in Scotland: Evidence Gathering Exercise – March to June 2012. She encouraged all advisory committees to have a look at this and feed back comments if possible. The APC would be formally replying to this but it impacted on many other areas in terms of NHS pharmaceutical care to patients in the community across Scotland.

   **NOTED**

21. **DATE OF NEXT MEETING:**

   Date: Thursday 7 June 2012

   Venue: Meeting Room A, J B Russell House

   Time: 2 - 3 pm - informal Area Clinical Forum members only meeting
          3 - 5 pm – formal Area Clinical Forum business meeting