

DRAFT

STIRLING COMMUNITY HEALTH PARTNERSHIP COMMITTEE

Minute of the Stirling Community Health Partnership Committee held on Tuesday 6th May 2008 at 6.00 p.m. in the Board Room, NHS Forth Valley, Carseview House, Castle Business Park, Stirling.

Present: Dr V Nash, Non Executive Board Member, NHS Forth Valley (*Chair*)
Mr E MacDonald, General Manager, Stirling CHP
Ms C Beech, Nurse Consultant Older Peoples Services
Mrs P Yong Berry, Deputy Voluntary Sector Representative
Mr B Eadie, Head of Support & Development, Children's Services, Stirling Council
Cllr S Farmer, Elected Member, Stirling Council
Cllr T Ffinch, Elected Member, Stirling Council
Ms R Geddes, Optometrist
Ms J Hewitt, Director of Community Services, Stirling Council
Mr T Houston, Health Promotion Lead Officer
Dr C Jardine, General Practitioner
Mrs M Kenyon, Deputy Voluntary Sector Representative
Ms M McGuire, Voluntary Sector Representative
Mrs M Mason, PPF Representative
Mr M Seal, Deputy PPF Representative

In Attendance: Dr S Cumming, Clinical Lead, Stirling CHP
Ms K Fawcett, Communications Manager
Mrs F King, Corporate Services Manager (*Minutes*)
Ms T Mulherin, Health & Wellbeing Adviser, Stirling Council
Mr E Murray, Senior Finance Manager, Clackmannanshire & Stirling CHPs
Mr J Sinclair, General Manager, Surgical and Cancer Services
Mr D Paterson, Property and Services Manager

Dr Nash welcomed members and those in attendance to the meeting.

Dr Nash reported that following changes at Stirling Council Cllr Brown would no longer represent the Council on the Stirling CHP Committee. Cllr Brown had enjoyed his term of office as a CHP Committee Member and had conveyed his thanks to all who had made him welcome. Members extended thanks to Cllr Brown for his engagement with the Committee and it was agreed that the Chair would write to him to thank him for his contribution over the past year.

A particular welcome was extended to Cllr Scott Farmer, as the new Elected Member for Stirling Council on the Stirling CHP Committee. Cllr Farmer had also been nominated as the Stirling Council representative on the Forth Valley NHS Board and ministerial appointment was awaited. Cllr Farmer gave Members a short resume of his background and role on the Council.

1/ APOLOGIES FOR ABSENCE

Apologies for absence were intimated on behalf on Ms Duffy, Mrs MacKellar, Mrs McCulloch and Ms Wallace.

2/ MINUTES OF MEETING HELD ON 5TH FEBRUARY 2008

The minutes of the meeting held on 5th February 2008 were approved.

3/ MATTERS ARISING

i) Review of Actions from Previous Meeting

The Committee considered the actions from the previous meeting and noted the progress made to date.

Item 4: Joint Inspection of Older Peoples Services (MAISOP)

Members noted that an update would be given at the August 2008 meeting.

Item 6: Local Healthcare Bill: Consultation

A copy of the full response document would be forwarded to all Members.

Action: Mrs King

Item 9.1: Stirling CHP Performance Management Report

Members noted that Mr MacDonald was progressing Optometrist manpower for young children in Forth Valley.

Action: Mr MacDonald

Dr Nash reported that dates for the Joint CHP Seminars had been finalised, and information would be forwarded to all.

Action: Mrs King

The following item was brought forward on the agenda:

5/ PREMISES PRIORITISATION

The Committee received a report – Premises Prioritisation – presented by Mr Paterson, Property and Services Manager.

Mr Paterson gave details of the framework adopted to determine the physical condition of primary and community healthcare premises and the outcome of the ranking process. The Strategic Projects and Property Committee had requested that each Community Health Partnership Committee be informed of the process of identifying priorities and that the CHPs be asked to approve the ranking of properties in their respective Council areas. The projects approved by the CHPs would be reflected in the NHS Board's five year capital plan.

The following key issues were discussed:

- Multi disciplinary objective assessment
- Standardised criteria developed by multi disciplinary teams
- Selected criteria ranked in order of importance
- Weighting of benefits undertaken utilising the paired comparison method
- Selected criteria scored by multi disciplinary teams
- Sensitivity and analysis applied by teams to minimise project variables
- Priorities identified for investment

Mr Paterson explained the criteria used to develop the locality profiles in order of importance, the weighted benefits and the paired comparisons method.

Members were advised that Stirling Council structure plans and new developments had been included in the criteria. A ranking of 1-10 for the best premises in Stirling was given and would be progressed through Business Cases and the Capital Fund. Deprivation issues had also been taken into account.

Members noted that space was a major issue for all practices to deliver the services being asked of them.

Following discussion the Committee was happy to note the prioritisation and methodology exercise.

Examples of how premises were scored, the scoring variables and the list of criteria were discussed by Members. Members expressed the need to keep the public informed of any proposed changes. Mr Paterson advised that once options were known the Communications Department would address public communications.

Partnership working with Local Authority partners was discussed with regard to joint facilities and asset realisation.

Following discussion the Committee approved the ranking as listed.

4/ CAPITAL PROJECTS WITHIN STIRLING CHP

The Committee received a report –Capital Projects within Stirling CHP – presented by Mr Paterson, Property and Services Manager.

Mr Paterson gave Members a snapshot of progress with approved capital works, space planning and design development projects.

Key issues were:

- Managing expectations
- Timescale
- Funding

Members were advised that Outline Business Cases would be prepared on the basis of priorities recommended by the CHP Committee. Projects approved by the Strategic Projects and Property Committee would be reflected in the NHS Board's five year capital plan.

Following discussion Members were happy to note the report.

6/ HEALTH IMPROVEMENT

The Committee received a presentation – Health Improvement – presented by Ms Mulherin, Health & Wellbeing Adviser, Stirling Council.

Ms Mulherin outlined an alternative approach to integrated planning and partnership for health and wellbeing within Stirling. Her presentation considered:

- The strategic imperatives around planning, and
- The partnering process as a facilitator of planning.

With the advent of the Scottish Government Concordat, and the resultant Single Outcome Agreement (SOA), it was likely that the Joint Health Improvement Process (JHIP) would be superseded. Four platforms of action had been identified during the Stirling SOA development and these required to be viewed as a starting point to Health Improvement. The four priorities were healthy weight, mental wellbeing, alcohol use and ageing well. The paper further proposed the establishment of a group of officers from Stirling Council and NHS Forth Valley to work across existing partnership and networks in Stirling to promote the health improvement agenda.

Members were advised of the foundations and platforms for action, key influences and intervention logic.

Ms Mulherin summed up her presentation by highlighting the need to:

- Complete a Network analysis
- Develop a Communication strategy and framework for full circle feedback
- Build sustainability in the approach through a range of methods
- Development of an integrated management and planning cycle for health improvement.

Ms Mulherin asked the Committee to note the advancements being made in the developing agenda.

Members discussed the good work being carried out by voluntary groups. There was also a need to ensure links to ongoing work – Care Pathways and Long Term Conditions. Mr MacDonald advised that, under the Stirling Community Planning arrangements, the Stirling Community Health Partnership would take responsibility for health and wellbeing led by Dr Anne Maree Wallace, Director of Public Health.

Cllr Farmer highlighted the need for the creation of a partnership between Health and Local Authorities and the realistic and tangible outcomes for the voluntary sector and wider communities. Ms McGuire reported that pathfinder working had just been secured for voluntary groups.

The Committee noted the report subject to integrated mapping and the inclusion of means of measuring effectiveness of the proposals.

7/ LEARNING DISABILITIES

The Committee received a report – Learning Disabilities – presented by Ms Hewitt, Director of Community Services, Stirling Council.

Ms Hewitt advised that she hoped the paper presented to Members could, through time, become a CHP Priority agenda item. The paper had been approved by Stirling Council and had cross party interest and support.

The purpose of the paper was to bring to the attention of the CHP the increased demand for, and subsequent increased cost of provision of Community Care Services for adults with Learning Disabilities. Adults with Learning Disabilities required a range of community based services to support them in their day to day lives.

One of the key actions for Stirling Council was to engage with NHS Forth Valley to ensure a shared understanding of the issues for each of the partner agencies and to agree a joint approach to future service developments.

Ms Hewitt highlighted the need to look at what could be done better and more effectively. There was also a need for joint decision making by the Local Authority and Health to lobby the Scottish Government.

The Committee noted the report and intentions for partnership working.

8/ SINGLE OUTCOME AGREEMENT: UPDATE

The Committee received an oral report – Single Outcome Agreement: Update – presented by Ms Hewitt, Director of Community Services, Stirling Council.

Ms Hewitt advised that the Stirling Council Single Outcome Agreement (SOA) had been submitted to the Scottish Government. The SOA included five topics and three strategic themes. Discussion would take place between the Council and the Scottish Government to finalise the SOA. The final version would be submitted to the Council toward the end of June 2008. Members noted that an update would be brought to a future meeting.

The Committee noted the report.

9/ CHP PRIORITIES

i) Proposals for Business Currently Reported to the Primary Care Regulatory Committee

The Committee received a report – Proposals for Business Currently Reported to the Primary Care Regulatory Committee (PCRC) – presented by Mr MacDonald, General Manager, Stirling CHP which had been approved by the NHS Board in March 2008.

Mr MacDonald advised that the NHS Board had recently agreed to stand down the PCRC and reported on the detail of the type of business that had been reported to the

Committee and how this business would be reported in future, including to the CHPs, maintaining a clear governance structure.

Members were advised of the remit of the Pharmacy Practices Committee, which reported to the PCRC, and that the minutes of the Pharmacy Practices Committee would in future be taken to the appropriate CHP Committee for appropriate action. In due course it was the intention to have Lay Members from each of the three CHP Committees on the Pharmacy Practices Committee.

More information would be provided at a future Joint CHP Seminar.

The Committee noted the report.

ii) Long Term Conditions Collaborative Work: Update

The Committee received an oral report – Long Term Conditions Collaborative Work: Update – presented by Dr Cumming, Clinical Lead, Stirling CHP.

Dr Cumming updated on the Long Term Conditions Toolkit which was a developmental tool to look at infrastructure needs and care pathways. A National Reference Group had been established, Chaired by Mrs Susan Bishop, National Manager, Long Term Conditions Programme, Scottish Government.

The Long Term Conditions Collaborative programme was being developed in partnership with NHS Tayside and was launched with the Mental Health Collaborative Programme on 24th April 2008.

The programme had three main work streams:

- Self care/management
- Complex Care
- Specialist Care

The two marker conditions last year were Chronic Obstructive Pulmonary Disease (COPD) and Rheumatoid Arthritis. This year it would be Chronic Heart Disease (CHD) and Neurological Conditions. There was also some work being planned for people suffering from sensory impairment.

The Committee noted the report.

10/ PUBLIC PARTNERSHIP FORUM UPDATE

The Committee received an oral update – Public Partnership Forum Update – presented by Mrs Mason, PPF Representative.

Mrs Mason reported on the joint Public Partnership Forum/Area Community Planning meeting held on 19th March 2008. The meeting was well attended with good discussion.

A joint meeting was planned for 7th June 2008 with Orchard House, a key topic. Other topics that would be discussed were: Stirling Community Hospital, Out of Hours Services, Nail Clipping, the New Acute Hospital at Larbert and transport.

Mrs Mason had also attended the first meeting of the Stirling Project Board.

The Committee noted the report.

11/ VOLUNTARY SECTOR UPDATE

The Committee received an oral update – Voluntary Sector Update – presented by Ms McGuire, Voluntary Sector Representative.

Ms McGuire updated on the Stirling Area Access Panel partnership approach, Disability and Access. Members were advised that Deaf/Blind Scotland would be holding an event in the Albert Halls, Stirling on 14th May 2008 from 10.30 a.m. to 3 p.m.

The Committee noted the update.

12/ FINANCIAL & PERFORMANCE ISSUES

i) Stirling CHP Performance Management Report May 2008

The Committee received a report – Stirling CHP Performance Management Report May 2008 – presented by Mr MacDonald, General Manager, Stirling CHP.

Mr MacDonald reported on the ongoing work for Health, Efficiency, Access and Treatment (HEAT) and the Single Outcome Agreement (SOA). Long term sickness continued to be higher than short term sickness in all areas with the exception of Allied Health Professions. Although there had been a reduction, it was reported that Managers continued their efforts towards achieving the target of 4%.

The delayed discharge targets had been met for Stirling. This was a significant achievement and the efforts of staff, both in NHS Forth Valley and Stirling Council, should be recognised.

A question was raised about where information on infection control and outbreaks were reported. Mr Sinclair and Mr MacDonald provided information on how infection rates were monitored, published by type, by Ward and that Healthcare Associated Infection (HAI) activity continued to take place across NHS Forth Valley.

The Committee noted the report.

ii) Stirling CHP Financial Position for the Year Ended 31st March 2008

The Committee received a report – Stirling CHP Financial Position for the Year Ended 31st March 2008 – presented by Mr Murray, Senior Finance Manager, Stirling and Clackmannanshire CHPs.

Mr Murray advised that the Stirling CHP financial position for the year was a reported underspend of £0.001m. This figure represented a £0.002m overspend in the month.

The Stirling CHP reported financial position for the year was in line with the forecast and demonstrated the matching of known financial pressures and flexibilities to ensure

financial breakeven was achieved. The Management Team was reviewing the risks and flexibilities to ensure appropriate measures were in place to monitor financial performance and sustain financial sustainability and balance on a recurrent basis.

Dr Nash and Mr McDonald conveyed their and the Committee's thanks to Service Managers and Mr Murray for their efforts, and support, which enabled the CHP to achieve financial balance in a challenging financial environment.

The Committee noted the report.

13/ ANY OTHER COMPETENT BUSINESS

Mr Houston highlighted team development and scenario planning and asked if it would be possible to devote some time at the next meeting to look at key and virtual scenarios with regard to decision making. This could be taken as part of the official business on the agenda.

Mr MacDonald considered it would be more appropriate to wait until the G5 report on the future of CHPs was published.

Members noted that Clackmannanshire CHP had a Development Event planned for May 2008 and requested feedback from this. **Action: Mr MacDonald**

Item for Information: NHS Continuing Healthcare CEL 6 (2008)

Dr Nash advised that CEL 6 (2008) gave guidance on criteria with regard to ongoing patient care in hospital settings.

14/ DATE OF NEXT MEETING

The next meeting would take place on Tuesday 17th June 2008 at 12.30 p.m. in the Board Room, NHS Forth Valley, Carseview House, Stirling.

There being no other business, the meeting closed at 9.15 p.m.

FEK
15.05.08