

Midlothian Strategic Planning

MS Teams

MINUTES

Wednesday 17 March 2021

IN ATTENDANCE: Carolyn Hirst (Chair), Morag Barrow, Rebecca Miller, Carly Mclean, Leah Friedman, Fiona Huffer, Grace Cowan, Lynne Douglas, Aileen Murray, Matthew Curl, Lois Marshall, Jim Sherval, Claire Flanagan, Jamie Megaw, Kirsty McLeod, Laura Hill, Sheena Wight, Jane Crawford, Kaye Skey, Claire Flanagan, James Hill, Simon Bain, Lisa Cooke (Note Taker)

APOLOGIES: Andrew Coull, Carol Levstein, Angela Tuohy, Wanda Fairgrieve, Mairi Simpson, Lynne Douglas

			ACTION
1	Welcome and Introductions	<p>Carolyn Hirst welcomed members to the meeting.</p> <p>Laura Hill from VOCAL Midlothian was welcomed as new member. Laura is representing unpaid carers until a carer representative is available.</p> <p>CH wanted to record appreciation to Caroline Myles who retired 16 March, for her hard work and commitment.</p>	
2	Minutes of Last Meeting	Minutes of meeting on 20 January 2021 were approved.	
3	New Strategic Plan 2022-2025	<p>(I) Strategic Plan 2022 – 2025</p> <p>Lois Marshall circulated a paper in advance of the meeting and updated members on plans to develop the new Strategic Plan 2022-2025. Building on from the agreement of the vision and values for the new plan by the IJB in Dec 2020, work is underway with local multiagency Planning Groups. Six new strategic aims were approved by the IJB on 11 March. LM clarified that (i) human rights to include social economic rights and (ii) integration aim will explicitly mention joint work with primary care, unpaid carers, and the community.</p> <p>Discussion and actions as follows</p> <ul style="list-style-type: none"> LM asked SPG group to consider the 5 strategic aims and possible targets and measures Note the progress in development of the new Strategic Plan 	ALL

		<p>JS highlighted the importance that both process and outcomes be measured</p> <p>JS mentioned that he is working on the Climate Change Green Health Prescribing Network with Dr Rachael Hardy and Tracy McLeod. JS agreed to bring a paper to SPG in May 2021.</p> <p>FH reported on the outcomes of Improving the Cancer Journey and stated that they may be useful in considering outcomes and measures for the Strategic Aims. CH asked that a paper on IJC paper be brought to the next SPG meeting. FH will meet with Cathrin Griffiths to discuss.</p> <p>RM asked how others in Lothian can learn from this plan. RM has a vision on how the Lothian Strategic Development Framework (LSDF) could work. This was shared with the group and RM asked for feedback.</p> <p>JC asked about Human Rights activity and what services Midlothian HSCP offers regarding this. LM mentioned she had been working with Catherine Evans on this and there have been efforts to incorporate this approach to Care at Home developments recently but acknowledged that further work is required across the Partnership. LM and MC to meet before next meeting.</p>	<p>JS</p> <p>FH</p> <p>ALL</p> <p>LM MC</p>
		<p>(II) Equalities Outcomes</p> <p>Lois Marshall circulated a paper in advance of the meeting and updated members on the Equalities Outcomes. There are 5 key areas:</p> <ul style="list-style-type: none"> • Equitable access • Mental Health Support • Welcoming Communities • Human Rights • IJB accurately reflects the community it serves <p>LM has asked to group for feedback prior to taking this to IJB on 8 April.</p> <p>JH asked how the HSCP will facilitate this, in particular for older people and people with a learning disability. There will need to be a budget for this.</p> <p>JH asked if Council new build facilities such as care homes will be able to accommodate couples requiring care. MB reported that efforts are made to accommodate this and however people may have had to wait a bit longer at times.</p> <p>JH also asked about services for people with a learning disability. What is realistic? What is our baseline? JH asked</p>	<p>ALL</p>

		<p>that the Partnership is clear about funds and activities that should be focussed on.</p> <p>LM and JH to meet to discuss ideas and actions.</p>	LM JH
4.	Reports on Progress	<p>Performance Framework</p> <p>JMe provided an update to the group. Tableau dashboards are being developed for use by Senior Management Team and service managers to improve understanding of performance. The HSCP is also using OutNav outcome mapping to provide broader understanding of activity across programmes (e.g. Frailty). A further paper on OutNav will be presented at a future meeting.</p> <p>Redesign of Urgent Care – Midlothian Response</p> <p>MB provided a brief update on the COVID situation in Midlothian, the additional beds that opened in Midlothian Community Hospital (MCH) and the delayed discharge position.</p> <p>Recruitment is underway to increase the number of beds available at MCH. There are plans to open a further 4 beds around Easter, these maybe used for people living with frailty.</p> <p>This week there are 6 patients whose discharge from an acute hospital has been delayed due to a delay in the availability of community-based support/care.</p> <p>GC acknowledge the improvement in the reduction of people experiencing a delayed discharge even though intermediate care beds were closed.</p> <p>AM acknowledged the great work in the delayed discharge figures however was concerned that people not in hospital and awaiting packages of care are waiting a longer time. AM asked if the new Care at Home contract would help with this challenge. GC reported that Care at Home Services are providing a significantly more hours than last year. However due to Covid restrictions, respite and day services stopped or changed how they were operating which had an impact on people needing packages of care. MB reported that the Senior Management Team is looking at different models of respite care.</p>	

GC very aware of the community list and is trying to understand the increase in demand for this service. GC acknowledged some of the increase will be due to the lockdown and the deconditioning of some older people which will impact on the need for services.

LH supported AM point from perspective of unpaid carers. The reduction in Care at Home and respite provision has had a significant impact on unpaid carers. LH asked that the contribution of unpaid carers during the pandemic be recognised. MB agreed that the contribution of unpaid carers has been fantastic. She acknowledged the challenges they have faced and highlighted work on an alternative respite model.

Primary Care Improvement Plan (PCIP)

JMe discussed paper circulated in advance. The plan covers the period from 1 April 2018 to 31 March 2021. The fund allocated to Midlothian HSCP was £840k in 2019/20, £1.7m in 2020/21 and £2.4m in 2021/22.

CH asked about the implications and learning from Covid and how the transformation to digital had been built into the review of the PCIP. JMe advised that many services that originally depended on face to face contact, transferred to an online/telephone service early in the pandemic. The Wellbeing Service and Primary Care Mental Health nurses both moved to a telephone system (and Teams for Wellbeing Service groups and training) which provided important insights into how services could potentially be redesigned to provide a mix of face to face and online support and could potentially increase the capacity of the teams.

The Community Treatment and Care service (CTAC) provides an opportunity to increase Scale Up BP, a tele monitoring of blood pressure which is proving to be effective and a number of GP practices in Midlothian already using it.

JMe advised that CTACs can support strategic developments beyond general practice by improving patient experience with, for example, local options for outpatient consultations and secondary care blood tests. The possibility of practice based hubs is being explored.

MC reported that the increase in digital service delivery has transformed in the last 12 months, including Near Me

		<p>SW asked that occupational therapy be added to the staffing section. Action 15 funding was received last year but due to Covid and the waiting list pressure there was a decision for the post-holder to work in Adult Mental Health services. Plans now underway for occupational therapist to join the primary care team.</p> <p>RM asked if there would be benefit in collaborating across Lothian on workforce decisions as the risks to work flow and the pressure to recruit physiotherapist are shared across Partnerships. JMe advised that while there is an understanding of what is happening in the other Lothian IJB areas that the models are quite different. MB happy to work with other areas on this where it would be helpful.</p> <p>CH confirmed with JMe that during March/April a small group will review progress on all 6 domains of the PCIP. JMe agreed to report back to Strategic Planning Group in May 2021.</p>	JMe
6.	Strategic Planning Group Report Schedule 2020/21	<p>Climate Green Health Prescribing – Jim Sherval</p> <p>Improvement Cancer Journey – Sandra Bagnall</p> <p>Housing and Homeless – Gillian Chapman and Rebecca Hilton</p> <p>Update Strategic Plan 2022-2025 – Lois Marshall</p> <p>Primary Care Improvement Plan review – Jamie Megaw</p>	
7.	AOCB	No items raised.	
9.	Future Meetings	<p>All future meetings below are via MS Teams (meantime)</p> <p>Wed 19th May 2021 2-4pm</p> <p>Wed 11th August 2021 2-4pm</p> <p>Wed 29th September 2021 2-4pm</p> <p>Wed 17th November 2021 2-4pm</p>	