

minutes

National Demand Optimisation Group (Phase III) Steering Group

23rd June 2020, Microsoft Teams

Author: Karl Hope

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Present via video conferencing:

| | | |
|-------------------------|----------------------------------|-----------------------|
| Dr Bernie Croal (chair) | Demand Optimisation Chair | NHS Grampian |
| Mrs Liz Blackman | Senior Programme Manager | NHS National Services |
| Ms Philli Cottam | Assistant Programme Manager | NHS National Services |
| Mr Mike Gray | Healthcare Science National Lead | NHS Lothian |
| Ms Robyn Gunn | HaTS Scientific Manager | NHS Lothian |
| Mr Gavin Hallford | Data Analyst | NHS National Services |
| Dr Karl Hope | Programme Support Officer | NHS National Services |
| Mrs Claire Lawrie | IMS Senior Programme Manager | NHS National Services |
| Ms Linda Mulhern | Operational Science Manager | NHS Lothian |
| Dr Rebecca Pattenden | Consultant Biochemist | NHS Lothian |
| Dr Fiona Payne | Consultant Pathologist | NHS Grampian |
| Ms Karen Stewart | Healthcare Science Officer | Scottish Government |
| Dr David Stirling | Director of Healthcare Science | NHS National Services |
| Mr David Topping | Clinical Laboratory Manager | NHS Tayside |
| Mrs Sonja Wright | HaTS Scientific Manager | NHS Grampian |

Apologies :

| | | |
|-------------------|-------------------------------|-----------------------------|
| Dr David Baty | Consultant Clinical Scientist | NHS Tayside |
| Dr Charu Chopra | Consultant Immunologist | NHS Lothian |
| Dr Caroline Clark | Consultant Clinical Scientist | NHS Grampian |
| Dr Liz Furrie | Consultant Clinical Scientist | NHS Tayside |
| Dr Ben Hall | General Practitioner | NHS Ayrshire & Arran |
| Dr Alistair Hart | HaTS Lead Clinician | NHS Greater Glasgow & Clyde |
| Dr Janet Horner | Consultant Biochemist | NHS Greater Glasgow & Clyde |

1 Welcome, Apologies & Introductions

Dr Bernie Croal welcomed all to the virtual meeting of the Demand Optimisation Steering Group. Apologies were noted as above.

Dr Croal noted the departure of Dr Niove Jordanides as Programme Manager for the Demand Optimisation Group, and expressed thanks for her efforts in helping lead the group during her time with NSD. In the meantime it was noted that Ms Philli Cottam was handling the majority of Dr Jordanides' duties pending recruitment of a full-time replacement, with support from Mrs Liz Blackman and Dr Karl Hope where appropriate.



Chair
Chief Executive
Director

Keith Redpath
Colin Sinclair
Fiona Murphy

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service

Dr Croal also noted the impending departure of Dr Ben Hall from the group and expressed the group's appreciation for Dr Hall's assistance in providing a GP point of view, and wished him luck in his next post.

2 Minutes & Actions from previous meeting

The minutes of the previous meeting were approved by this group with no corrections noted.

Actions were discussed from the previous meeting. Regarding Action Point 2 (reviewing of the laboratory tests list), Mr Gavin Hallford stated that additional input would be required from a clinician to assist with this, especially given the departure of Dr Hall. Mr Hallford resolved to send out the list of remaining un-reviewed tests to garner feedback from clinical representatives.

Action: Mr Hallford

Dr Croal noted that most other actions from the February meeting had either been deferred due to the Covid-19 pandemic or had otherwise been overtaken by subsequent events.

3 Update on Phase III report

Mrs Blackman noted that the Demand Optimisation Group's Phase III report had been presented at the Diagnostics in Scotland Strategic Group (DiSSG) in May, and circulated to the Demand Optimisation Group at the same time. Feedback had been received and acted upon. Mrs Blackman noted that the next step was to prepare a foreword to the report for review by Dr Gregor Smith (interim Chief Medical Officer at the Scottish Government), which she would write in conjunction with Ms Cottam.

Action: Mrs Blackman / Ms Cottam

Impact of Covid-19

Dr Croal highlighted the impact of Covid-19 with regard to testing numbers, exemplified by numbers from NHS Grampian showing marked reductions in test requesting with only partial recovery happening slowly. Dr Croal noted the impact that the Covid-19 pandemic had on requests for various tests and stated that it may be difficult to properly compare any request data from the pandemic period with data from before or after this time. This would have major implications for any chronological comparisons of trends within the Atlas of Variation going forwards.

4 Update on Atlas of Variation

Mrs Claire Lawrie demonstrated various changes made to the Atlas and noted that links to the Atlas had now been distributed to primary care leads. An important change was noted around the display of data on the GP comparator view. Where previously this was displayed in a yearly format, Mrs Lawrie suggested a more representative quarterly format as a potential replacement. The group were broadly supportive of this change.

Flash reports

Ms Cottam noted the example flash report supplied in Appendix C of the Phase III report, and added that the current plan was now to issue flash reports on a per-board basis, with personalised Tableau links for individual GP practices at the bottom of each report. This was noted as being computationally easier to produce within the limitations of the Tableau platform.

Ms Cottam also noted previous discussions with Dr Sara Jenks and Dr Hall around the appropriateness of sending flash reports during the Covid-19 pandemic – it had been suggested that this was not a suitable time to send non-Covid flash reports to GPs. Dr Croal agreed, noting that GPs were unlikely to be considering demand optimisation matters at this time. However, Dr Croal noted the potential for diagnostic networks to consult their members on flash reports and asked that all networks think of possible tests that could be employed in future flash reports.

Action: Genetics, HaTS, Immunology, SCBN, SMVN, SPAN

5 Monitoring of post-Covid service recovery

Dr Croal presented slides to the group illustrating the fall-off of testing in various fields in NHS Grampian during the Covid-19 pandemic and highlighted the differences between disciplines such as pathology and blood sciences.

Dr Croal raised the possibility of continuing to collect this data, with a view to monitoring how and to what extent services recover as the Covid-19 pandemic wanes. Dr Croal argued this would allow a form of demand optimisation of testing to take place while at the same time informing various interested parties on how services are returning to 'normal' levels, terming this "Reverse-Engineered Demand Optimisation" (REDO).

Dr Croal asked the group for comments on this prospective activity. Mr Mike Gray responded that it may result in variation returning to pre-Covid levels if the group were to change focus temporarily. Dr Croal responded that there was an argument that variation in testing could increase during the recovery period as different areas got back to "normal" business quicker than others. Testing numbers may of course increase overall as "catch up" of many delayed investigations took place. Dr Croal added that a focus on monitoring this type of recovery would keep the attention of GPs, and focus interest on appropriate testing.

Dr Fiona Payne noted that screening programmes were now restarting and noted that it would be good to track the impact of these nationally on laboratory services. Mr David Topping added that the fall-off in specimen requests illustrated in Dr Croal's figures was not necessarily replicated in every NHS board to the same extent. Dr Croal responded that this fact highlights the variation across boards, and that even this would be good to track. Dr Croal suggested having a Covid section for the Atlas as a means of displaying this data. Mrs Lawrie offered to speak to Dr Payne regarding the data she had collected in NHS Grampian, with a view to exploring methods of incorporating this data into the Atlas.

Action: Mrs Lawrie / Dr Payne

Dr Croal highlighted that this would be a useful matter for networks to discuss. Mr Gray argued that the data may indicate certain tests are no longer needed. Dr Croal countered that the absence of significant numbers of a test during Covid cannot be taken as a reliable indicator that the test should be stopped entirely, and emphasised that the Covid-19 pandemic represented extraneous circumstances that could not be directly translated onto a pre- or post-Covid scenario. However, Dr Croal agreed that the situation did represent an opportunity to discuss the suitability of certain tests, with a view to considering their future at a later stage.

Dr Croal resolved to distil the post-Covid monitoring ideas into a brief paper for networks to distribute to their steering groups for consideration, and added that it would be a good objective for the Demand Optimisation Group to focus on as a 'business as usual' situation may take up to six months or more to return.

Action: Dr Croal

Dr David Stirling noted a concern around the description of the testing fall-off as a "Covid gap" and added that this implied the immediate pre-Covid situation was the aspiration to return to. Dr Croal agreed to come up with a more suitable alternative wording.

6 Workstream Updates

Biochemistry

Dr Rebecca Pattenden delivered an update from the Scottish Clinical Biochemistry Network (SCBN) in place of Dr Janet Horner. Dr Pattenden noted that the SCBN steering group had not met since the onset of the Covid-19 pandemic, and that the network's various QI projects were currently on hold or were otherwise operating at a reduced level as a result of the pandemic situation. Dr Croal noted that it would be useful to restart these as soon as possible.

Genetics

In the absence of Dr David Baty, no update was provided from Genetics.

Haematology and Transfusion

Mrs Sonja Wright delivered an update from the Haematology and Transfusion Scotland (HaTS) network. Mrs Wright noted that HaTS were about to issue guidelines for haematinics guidelines when the Covid-19 pandemic struck and this was put on hold. Mrs Wright added that the network was planning to issue these soon. Mrs Wright also noted that the network was hoping to develop new QI projects and would raise this at their next steering group meeting.

Immunology

In the absence of Dr Charu Chopra and Dr Liz Furrrie, no update was provided from Immunology.

Microbiology and Virology

Ms Linda Mulhern delivered an update from the Scottish Microbiology and Virology Network (SMVN). Ms Mulhern noted that SMVN had been very occupied in dealing with the Covid-19 pandemic. Ms Mulhern added that it would be difficult for SMVN to focus on additional projects at this time as many laboratories were still busy in dealing with pandemic-related issues. Dr Croal suggested that the network could focus on Covid-related DOG projects if capacity existed.

Pathology

Mr Topping delivered an update from the Scottish Pathology Network (SPAN). Mr Topping noted that the previous SPAN steering group meeting in February had considered the matter of tissue and gall bladder QI work but did not take this forward. Dr Croal encouraged Mr Topping to consult SPAN on the tracking of histopathology samples using the Atlas as a way of monitoring recovery and giving business intelligence. Mr Topping agreed to speak to the network regarding this.

Action: Mr Topping

7 Phase IV

Dr Croal noted that funding for the fourth phase of the Demand Optimisation programme had been approved. Dr Croal displayed some slides to the group illustrating the prospective aims of Phase IV, but noted that it may take significant time for a 'business as usual' environment to return. However, he added that an opportunity could exist around Covid pandemic associated changes in test requesting and other developments such as minimum retesting intervals. These were noted as being latter dependent on the national LIMS project, which did not pause during the Covid-19 pandemic.

Dr Croal otherwise encouraged all group members to consider potential activities the group could pursue during Phase IV, and goals that their networks could work towards.

Action: Genetics, HaTS, Immunology, SCBN, SMVN, SPAN

8 Any Other Business

Mrs Blackman noted that the National Laboratories Programme (NLP) were collecting Covid-related data for display on various dashboards, and offered to demonstrate these dashboards to the group in case these could inform any Covid-related data tracking the group wished to pursue. Several group members agreed to remain after the meeting to look at these dashboards in detail.

Dr Croal otherwise emphasised to the group that demand optimisation remained an important venture and would continue to play a part in the coming year.

9 Date, Time & Place of Next Meeting

The next meeting date was mooted to take place in September or October 2020, with a specific date to be decided nearer the time. The meeting was noted to most likely take place virtually, dependent on the Covid-19 recovery position.

An agenda and any relevant papers would be circulated in due course.

Action: Dr Hope

Action Table

| # | Action | Responsible |
|---|---|--------------------------------------|
| 1 | Send out list of remaining tests which need reviewed | Mr Gavin Halford |
| 2 | Write CMO foreword to phase III report | Mrs Liz Blackman Ms Philli Cottam |
| 3 | Canvass networks for sets of tests that could be used in flash reports | Network Representatives |
| 4 | Discuss how to incorporate existing Covid-related pathology monitoring into Atlas | Mrs Claire Lawrie Dr Fiona Payne |
| 5 | Prepare a paper on how the group can focus on monitoring of post-Covid service recovery | Dr Bernie Croal |
| 6 | Consult SPAN on tracking histopathology sample service recovery | Mr David Topping |
| 7 | Consult networks on potential activities and projects to undertake in Phase IV | Network Representatives |
| 8 | Arrange next meeting | Dr Karl Hope |