

minutes

Demand Optimisation Core Team Meeting

Microsoft Teams

Wednesday 1st December 2021

9.30 – 10.30am

Present:

Liz Blackman	Senior Programme Manager(Chair)	NHS National Services Scotland
Robina Collins	Admin(Minutes)	NHS National Services Scotland
Bernie Croal	Clinical Director	NHS Grampian
Gavin Hallford	IMS Data Analyst	NHS National Services Scotland
Catherine Ross	Chief Healthcare Science Officer	Scottish Government
Raveena Sajjan	Strategy and Policy CNOD	Scottish Government

Apologies:

Claire Lawrie	IMS Senior Programme Manager	NHS National Services Scotland
Jamie Nimmo	Programme Manager (Chair)	NHS National Services Scotland
Karen Stewart	Healthcare Science Officer	Scottish Government

1 Welcome & Apologies

Liz Blackman (Senior Programme Manager, NHS NSS) welcomed all to the meeting. Apologies were noted as above.

2 Minutes from the last meeting (2021-10-25)

The minute from the last meeting was approved by the group as an accurate record. The group were updated on progress with actions from the previous meeting.

3 Milestones and Highlights for November 2021

The milestones and highlights report for November was circulated to the group in advance of the meeting. The following was outlined in brief.

Liz Blackman reported good progress in a number of areas.

- 4 milestones closed to date.
- 2 Atlas Development SLWG meetings have taken place.
- 1 QI SLWG meeting has taken place.
- The Education SLWG meetings would commence Monday 6th December 2021. Good appetite for involvement in this group was highlighted, so membership would likely follow. Ian Godber (Consultant Clinical Scientist, Biochemistry, NHS GG&C) was appointed Lead Clinician for the Education workstream.
- Relaunch Primary Care Atlas.
 - 2 HB's currently working with the Atlas. It was hoped that 2 further HB's would take part in the next stage of the pilot. Bernie Croal (Clinical Director, NHS Grampian) suggested that NHS Grampian be one of the two. Plans exist to launch the Atlas in January 2022 with the primary care network, the LIST Team and the Improving



Chair Keith Redpath
Chief Executive Mary Morgan
Director Susi Buchanan

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

Together Team. Liz Blackman questioned the group whether they were happy with a 'soft' approach to an Atlas launch or a 'hard' firm up date to launch the Atlas (to primary care). Bernie Croal suggested a dual soft/hard approach. He added that primary care colleagues were keen to engage with a process that reduced the need for testing. Capacity issues were noted especially around phlebotomy. Time to access the Atlas, read the education guidance and implement any change would be key, though may prove challenging with the existing clinical pressures.

ACTION 01 2021-12-01: NHS Grampian are to be included in the next Atlas pilot. Bernie Croal / Atlas Development SLWG

Raveena Sajjan (Strategy and Policy CNOD, Scottish Government) questioned the first milestone and suggested it be reopened to include detailed actions beneath it along with specifics as to how the success of the QI work is being measured in relation to the success of the Atlas within primary care.

Catherine Ross (Chief Healthcare Science Officer, Scottish Government) questioned the outcome of the first QI SLWG meeting. Liz Blackman relayed the meeting was a positive one whereby a number of expressions of interest / suggestions had already been made. NHS Ayrshire & Arran (A&A) had noted interest in the next pilot, but since their data was not broken down at practice level it was not currently possible to facilitate this. Chris Pitt, (Principle Biochemist, NHS A&A) agreed to liaise with colleagues at Health Board (HB) level to establish how the data could be further broken down to enable active involvement in future. Furthermore, he would liaise with GP colleagues in advance of the next QI meeting to identify a number of QI projects to propose to the QI group to enable momentum. Bernie Croal highlighted that thought would need to be given as to how to deliver educational guidance (Atlas) to NHS A&A since they were not included in the Atlas.

Further to earlier discussion about the Atlas relaunch date, the group agreed with the suggestion of a dual soft/hard approach. The soft approach would remain in place and a date for relaunch (hard approach) would be agreed to plan towards / build into the workplan. Bernie Croal highlighted the importance of having the educational guidance in place in advance of a relaunch date. Liz Blackman advised of a recent meeting, which took place with Rob Farley, (Healthcare Science Associate Director, NES) who agreed to facilitate the development of e-learning modules on TURAS Learn. The first module is to be agreed Monday 6th December and the materials collated by the end of December thereafter building the first module. Catherine Ross suggested that any e-learning modules be made available on the website.

- Meetings have taken place with the Cardiac group. Liz Blackman and Claire Lawrie (Senior Programme Manager, IMS, NHS NSS) also met with the Early Cancer Detection team to highlight the data/benchmarking reports produced relevant to cancer, and provide an overview of the Atlas. A number of helpful suggestions were made for presentations to cancer groups.
- A genetics meeting is scheduled to take place 02/12/2021. Catherine Ross highlighted that demand optimisation was identified as a key facet within the new strategic set up of the genomics network so it was likely that demand optimisation / genetics data collection would move forward.
- An Atlas feedback system had been established and would continue.
- Jamie Nimmo developed a map of identified Realistic Medicine Leads for each Health Board, along with feedback and details of any existing demand optimisation infrastructure. Further work needs to take place to complete the gaps in information.

Liz Blackman provided an overview of the highlights report to the group.

Bernie Croal asked if decision making around the use of phlebotomy hubs to ease capacity issues could be considered for inclusion in the project plan. Gavin Hallford advised that data may be available. The data could be used to geographically map (for HB's) where high and low

phlebotomy use exists. Further scoping would be required to establish the full extent to any commitment as this may impact on existing milestones.

ACTION 02 2021-12-01: Gavin Hallford is to identify the data required to inform the use of phlebotomy hubs. Gavin Hallford

The Atlas Development group have investigated the flash reports. The group asked for a combination of the 2 different versions of the report to be developed into one. These would be tested for a predetermined GP cluster and feedback provided.

Jamie Nimmo provided Anna Lamont with an SBAR paper to take to the Scottish Association of Medical Directors group prior to a meeting due to take place on 15th December.

A meeting took place with the new Local Intelligence Support Teams (LIST) Interim Manager, Julie Kidd. Liz Blackman highlighted that the new manager was not aware of the Atlas prior to this meeting. An overview was provided and it was noted that the new manager was supportive of the Atlas and keen to get involved in the national rollout process.

Jamie Nimmo and Claire Lawrie attended the first IPCPB meeting to promote the Atlas. It was suggested that Liz Blackman attend the next meeting since discussion had veered towards a potential scope for an Atlas for Imaging. Catherine Ross reported that IPCPB had healthy funding to support development work should there be significant value in a project. Liz Blackman would report outcomes from this discussion at a future DO meeting.

4 Risks & Issues

The group were content with the noted risks and issues.

Bernie Croal questioned the scope of the Demand Optimisation Group. The phase V program of work had largely centred around an Atlas of Variation for primary care. Areas, including Realistic Medicine were more interested in secondary care. Thought would need to be given as to how to accommodate secondary care since the group were actively promoting demand optimisation and collaborating with Realistic Medicine Leads. Liz Blackman advised that secondary care was included in the Communication Plan, but agreed that all milestones covered to date in phase V had been primary care focused. Additionally, this would likely need to be captured in the next phase of work, given the existing pressures.

ACTION 03 2021-12-01: ALL DO Core Team are to consider how best to include secondary care in demand optimisation work plan activities (next phase). ALL DO Core

5 Communications Strategy

The Communications strategy was circulated to the group in advance of the meeting.

6 AOB

Bernie Croal reported a proposed national group to be involved in driving demand optimisation forward. He hoped to have a meeting in January 2022, which involved a number of national lab groups including the four nation departments. He suggested that this could be used as an opportunity to showcase some of the work this group had been doing along with developing national shared resources. Raveena Sajjan was keen that Scottish Government (SG) be informed of any progress / meetings to ensure SG representation and linkage. Catherine Ross added that any benefits to Scotland along with any detriments would need to be clearly defined. A lot of work had taken place in Scotland and understanding any copyright implications involved with sharing guidance etc. would need to be considered.

7 Date and Time of Next Meeting

To be arranged.

ACTION 04 2021-12-01: Robina Collins is to arrange the next meeting for approximately 6 weeks' time. Robina Collins