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minutes

Demand Optimisation Strategic Core Team Meeting Microsoft Teams Thursday 27th January 2022 9.30 – 10.30am

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Caroline Ballantyne	Strategy and Policy CNOD	Scottish Government
Liz Blackman	Senior Programme Manager	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
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
In attendance:		
lan Godber	Consultant Clinical Scientist	
	(Biochemistry) Lead Healthcare	
	Scientist (Education SLWG)	NHS GGC
Apologies:		
Catherine Ross	Chief Healthcare Science Officer	Scottish Government

1 Welcome & Apologies

Raveena Sajjan

Jamie Nimmo (Programme Manager, NHS NSS) welcomed all to the meeting. Apologies were noted as above.

Strategy and Policy CNOD

Ian Godber (Lead Healthcare Scientist for the Education SLWG) was welcomed to the meeting.

2 Minutes from the last meeting (2021-12-01)

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 January 2022

The milestones and highlight report for January were noted as follows.

Highlights

• QI SLWG established with comprehensive membership (25) including vast QI experience and knowledge. A first meeting took place with the new wider membership (20/01/2022). Next steps for the group include analysis of the data included in the Atlas to identify potential QI projects for the next meeting (Feb 2022).





Chair Chief Executive Director Keith Redpath Mary Morgan Susi Buchanan

Scottish Government

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

- Statement of Requirements for the Atlas of Variation (AoV) updated. All actions close to completion which included updating of functionality, labelling and tables etc.
- Primary Care Leads given presentation on current Demand Optimisation status along with a live demo of the AoV. This was noted a positive meeting. Claire Lawrie relayed that the proposed launch date (April 2022) was highlighted with the caveat that all of the educational guidance may not be in place, though the first examples would be available. GP leads were keen to further discuss and consider how the AoV could best be utilised. A suggested priority with regard to the use of the AoV was noted as Diabetes.
- Jamie Nimmo advised of a meeting being coordinated with Jacqueline Walker to discuss the diabetes pathway and HbA1c testing.

ACTION 01 2022-01-27: Jamie Nimmo to share meeting invite (with Jacqueline Walker) with the group. Jamie Nimmo

Karen Stewart highlighted that Scottish Government Primary Care Policy Leads would unite to discuss best use of communications on approach to the launch date.

- IPCPB / Radiology follow up meetings have taken place.
- NHS Grampian discussions underway re. pilot roll out.
- Education SLWG established
 - o Ian Godber and Claire Henry both in post to support the Education workplan.
 - Includes 20+ members.
 - First 3 simple educational materials have been drafted for tests currently within the AoV. Aim to develop a template and populate the educational materials into the template to enable a standardised approach.
 - Aim to create a guidance on how to use the AoV (DIY procedures).
 - Next meeting February 2022.

Jamie Nimmo queried whether the guidance documents would need to go through Q Pulse. It was noted that as they are not guidelines, this would not be required.

Karen Stewart raised the importance of ensuring that any tests being reviewed within the AoV are aligned with QI project ideas and their supporting educational materials. Jamie Nimmo highlighted that crossover between the groups exists in terms of membership so any links would be captured in this way. Karen Stewart added that further development to the AoV may need to take place to incorporate any emerging national priorities. Claire Lawrie confirmed that anything can be included in the AoV. Jamie Nimmo added that the Statement of Requirements document previously circulated contained an overview of all of the tests for which data is currently collected, as well as those that were collected in previous phases and those that have the potential to be explored.

ACTION 02 2022-01-27: Jamie Nimmo to share Statement of Requirements (for the AoV) with the Education SLWG. Jamie Nimmo

- Right decision app. Claire Lawrie, Jamie Nimmo and Claire Henry were scheduled to meet week beginning 7th February 2022 with Ann Wales to gain an understanding of the requirements to proceed with this. NES had provided example templates to progress e-learning modules.
- Data had been reviewed and action in place to address gaps.
- Primary Care Flash Reports piloted in NHS Tayside cluster and feedback gathered. It was
 noted that the B12 test was used on an 'in principle' basis since an existing guideline was
 already in place, and not due to any significant variation (within this cluster). Further
 feedback included the need to consider the Flash Report audience and not a blanket
 approach to sending one test to all. This would be addressed at the next stage of the pilot
 roll out in NHS Grampian. New versions of the Flash Reports would be sent based on the

three tests (with supporting educational material) with an aim to sending the test that shows the most variation per practice.

Next steps – in brief (not captured above)

- A separate project plan to be developed and circulated along with the January highlight report to capture all the actions that need to get underway in order to have a successful national launch of the AoV.
- The AoV would be rolled out to practices in NHS Grampian and NHS D&G. Jamie Nimmo had meetings planned with the SMVN Steering Group and NHS D&G DO group to present the latest AoV developments. Further updates to follow in due course.
- A follow up meeting with the interim LIST Manager had been arranged to present the latest AoV developments to the LIST analysts.
- A Communications plan is to be developed specifically for national roll out.
- Re-engage with Realistic Medicine Leads to complete mapping exercise.

ACTION 03 2022-01-27: Jamie Nimmo is to circulate to the group the launch date project plan, Communications plan and highlights report (including milestones).

Jamie Nimmo

Milestone Overview

The milestones update would be circulated to the group as part of the highlight report. Good progress had been made with a number of milestones whilst others were notably 'amber' due to time slippage. 2 of the 3 'red' milestones were dependent on Genetics progress (and a move to strategic networks). The 3rd 'red' milestone (no 7) needed further discussion within SG to clarify.

ACTION 04 2022-01-27: Karen Stewart & Caroline Ballantyne to have offline discussion to redefine meaning of milestone 7 (indicated as RED on the milestone overview). Karen Stewart/Caroline Ballantyne

4 Risks & Issues

The highlighted risk was noted as "significant gaps in data when the Atlas was launched". A plan had been outlined to mitigate this risk and address the HB's concerned.

5 Update on IPCPB (Integrated Planned Care Program Board)

Liz Blackman advised that the Performance Department within SG were investigating the use of Imaging within the current AoV. It was noted that this would be a significant IT development. It would open up the possibility for interesting pathways of care work e.g. cancer pathway would then have access to both laboratory diagnostics and Imaging diagnostics in the one dashboard. A substantial amount of work would be required to incorporate Imaging into the AoV and to reach a stage where Imaging's comprehensive data set could be used as required. A high level briefing paper would be developed and submitted to the IPCPB. Predicting indicative costs was noted a significant risk as no technical requirements specification work had been carried out (making it difficult to predict costs). Liz Blackman would meet with the NRIIP team to gain wider perspective.

Karen Stewart suggested that the work required to identify the correct resource requirements for this piece of work go into the briefing paper along with all relevant scoping requirements.

6 National Rollout of Atlas of Variation

By way of presentation Jamie Nimmo provided a summary of the workstreams involved in the national rollout of the AoV.

- Atlas updates. Ensure the AoV is fit for purpose.
- Communications. A Communications plan to engage with stakeholders.
- QI examples & Toolkit. Aim to be able to demonstrate QI projects commenced along with agreed objectives and expected outcomes.

- Educational materials and user guidance. Up to date and embedded in the AoV.
- Data gaps. Address the gaps in data.

A separate project plan would be circulated (as noted above).

Bernie Croal highlighted that the focus should be around having successfully created the AoV, making it available and demonstrating its use despite the challenges the NHS have faced due to COVID and the time pressures this had caused.

Looking forward, Bernie Croal noted a key aim should be to address non-primary care interventions and QI projects namely the blood tube shortage.

Bernie Croal relayed a question from Mike Steven, GP Lead, NHS Grampian around the availability of funding to view/pilot the AoV given how precious GP's time was. It was thought that funding would not be available but a 'selling point' of the AoV would be that it would ultimately make GP's jobs easier thereby saving them time.

7 AOB

Jamie Nimmo would be taking parental leave from work for 4 weeks in April 2022. A plan would be developed to outline any outstanding workplan activities and a handover would take place. It was noted that should a launch date of 1st April be confirmed any handover plans would accommodate this date.

Karen Stewart suggested the Communications strategy could be ratified once final review by the group had taken place (action 03).

Karen Stewart questioned whether any feedback was received from the medical directors group.

ACTION 05 2022-01-27: Jamie Nimmo to follow up with Anna Lamont regarding feedback from the medical directors group. Jamie Nimmo

Bernie Croal highlighted the high demand for pandemic monitoring data especially from a pathology workforce perspective and suggested that an article be developed to promote this. Data would be required to support this exercise.

Caroline Ballantyne confirmed that SG would need to have a discussion to confirm what data could be made available for this purpose.

Further UK lab meetings would take place this year. Bernie Croal suggested the DO Strategic core team get involved.

8 Date and Time of Next Meeting

To be arranged.

ACTION 06 2022-01-27: A doodle poll for next 3 meetings is to be circulated to the group. Robina Collins