minutes

Demand Optimisation Strategic Core Team Meeting
Microsoft Teams
Thursday 10th March 2022
2 – 3pm

Present:

Liz Blackman	Senior Programme Manager	NHS National Services Scotland
Rebecca Bolger	Assistant 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
Julie Townsend	Strategy and Policy CNOD	Scottish Government

Apologies:

Caroline Ballantyne	Strategy and Policy CNOD	Scottish Government
Ian Godber	Consultant Clinical Scientist (Biochemistry) Lead Healthcare Scientist (Education SLWG)	NHS GGC
Claire Henry	Programme Support Officer	NHS National Services Scotland
Catherine Ross	Chief Healthcare Science Officer	Scottish Government
Raveena Sajjan	Strategy and Policy CNOD	Scottish Government

1 Welcome & Apologies
Jamie Nimmo (Programme Manager, NHS NSS) welcomed all to the meeting. Round the table introductions were provided. Apologies were noted as above.

Rebecca Bolger would provide cover for the month of April in the absence of Jamie Nimmo (paternity leave).

2 Minutes from the last meeting (2022-01-27)
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 Highlights for February 2022
The highlight report for February were noted as follows.

- New Microsoft Teams channels set up for the SLWGs. This would enable a more collaborative approach in terms of sharing templates, information and updates etc.
- First educational guidance (for CA125) on the Right Decision platform. A demonstration was provided to the group. A meeting had taken place with Ann Wales, Digital Health Improvement Centre Scotland, to discuss the proposals for the educational guidance and how this could be included within the Right Decision platform. From this meeting it became apparent that the Right Decision app could provide the full learning package including guidance and quiz etc. Timescales and costs were discussed with Ann Wales and agreement was reached that the educational toolkit (guidance) could be covered under the value improvement fund (budget). In the first instance the CA125 guidance had been developed. Two template versions (slide and accordion) were presented. These would be shared as part of the pilot rollout to gain feedback and identify the preferred version. It was noted that strong opinions (against) were received from the Education subgroup on a pre assessment approach within the guidance. A compromise was reached to include the quiz at end of each test guidance.

    Karen Stewart asked the following
    1. Who was responsible for the governance around the Right Decision app regarding the quality of the data (responsibilities /monitoring / review etc.)? Jamie Nimmo confirmed this had been raised and discussed at Education subgroup meetings. A template had been agreed by the subgroup. The Education subgroup would be responsible for reviewing the guidance on an annual basis. Karen Stewart highlighted the importance of ensuring that the guidance was kept useful going forward. Bernie Croal added that guidance would be refined based on feedback on an ongoing basis.
    2. Did the user guidance assessment (quiz) link to any CPD learning attributes? Jamie Nimmo confirmed this would be a standalone option with potential future scope to include in CPD learning.

    The final pilot stage feedback form was presented, which incorporated the latest changes and updates to the Atlas of Variation (AoV). This would be shared with the pilot HB's for final feedback in advance of the national launch date (01/04). It was noted that flash reports had not yet been agreed (NHS Grampian).

    Karen Stewart questioned how long the NHS Grampian pilot would be, given that the national launch was due to take place 1st April 2022. Jamie Nimmo confirmed that collaborative discussions had taken place with NHS Grampian colleagues given the limited timescales involved to roll out and gain feedback in advance of the national launch. Communications would be issued to the pilot HB's today (10/03) and feedback would be gathered on an ongoing live basis to accommodate the national launch date.

    Karen Stewart asked how a national rollout would be managed. Liz Blackman explained that ideally this would be demonstrated by using the diabetes guidance as a means of best practice, providing HB's with the flash reports to show variation and with an offer of support to tackle the variation. Additionally, ongoing engagement work with the Local Intelligence Support Team would support the process.

- At least 3 other guidance templates completed. It was hoped that 6 test guidance pages in total would be available by 1st April 2022 (roll out).
- Meeting with Diabetes policy team from SG - interest in collaborating on some quality improvement work around HbA1C. Karen Stewart noted an interest in

attending future collaborative meetings and highlighted there was much alignment and crossover for NDOG remit within the Diabetes policy group.

ACTION 01 2022-03-10: Jamie Nimmo to invite Karen Stewart to future Diabetes policy team meetings.   Jamie Nimmo

- Data gaps addressed across a number of HBs. Liz Blackman suggested an approach to tackle gaps in data would be to contact Medical Directors directly. Karen Stewart confirmed that SG would be supportive of this in the interests of visibility and transparency.

ACTION 02 2022-03-10: NDOG Core Team to contact Medical Directors directly for any gaps in data (level 3).   NDOG Core Team

- Draft Flash Report created for Labs (on top of the Primary Care one). The Atlas Development SLWG had suggested adapting the primary care flash report for labs. These had been shared and feedback gathered. Next steps included identifying the best approach to circulating these (to HB's).
- Statement of Requirements actions completed.
- Landing page, definitions and diagnostic test page added to AoV along with links to the (draft) User Guidance etc.
- User Guidance (manual) drafted. It was confirmed that the User Guidance would be on the landing page. This would be shared with the group after the meeting for feedback. Video guidance would also be developed (4 short videos).
- QI Toolkit pulled together for inclusion in the AoV – resources collated and adapted.
- QI SLWG - 27 members and BOSCARDs (Background, Objectives, Scope, Constraints, Assumptions, Risks, Deliverables) developed. High level project scoping had taken place. It was noted that some projects would be more viable than others.
- QI work (NHS Fife & NHS Tayside) reduce variation in HbA1C requests.

Next steps (on approach to the national launch date)
- Final push to get any missing data. **See ACTION 02 2022-03-10**
- Draft user guidance to be signed off and shared as part of pilot.
- QI toolkit to be added to the AoV.
- Further scoping of QI work, using new toolkit. The new toolkit would be shared on the QI SLWG Teams channel. It was hoped that further developments would be achieved by the next QI meeting (25/03).
- Several other guidance documents to be developed. Currently underway.
- Further guidance 'tiles' to be added to Right Decision platform. A homepage would also be developed. Copyright discussions were underway.
- AoV to be rolled out to practices in NHS Grampian (and potentially NHS D&G/ NHS Lanarkshire). The comms surrounding this would be issued today (10/03). A meeting with NHS Lanarkshire colleagues was planned to promote the message that access to the AoV at an early stage would provide opportunity to shape the AoV (and that funding to pilot / use was not available).
- Feedback to be gathered on an ongoing basis and changes implemented where appropriate/ possible.
- AoV demonstration drop-ins for LIST Analysts, any further Realistic Medicine Leads and other interested parties. Three further drop in sessions to demonstrate the use of the AoV had been arranged. Mop up sessions would also be arranged to ensure maximum exposure (to the AoV).

- Newsletter. A draft had been developed with the key message noted as the national launch(date) of the AoV.
- Twitter campaign in lead up to rollout. Countdown to start two weeks prior to the launch date (21/03). It was agreed this would now start asap.
- Comms messaging to be produced for all relevant stakeholders and shared (week beginning 21st March). Karen Stewart expressed the view that commencing comms week beginning 21st March was too close to the launch date. It would be prudent to start this task sooner.
- User guidance videos to be recorded. Plan to have these completed by the 1st April.
- Follow-up with Primary Care Leads and Diabetes Policy Team. Karen Stewart suggested that this meeting be diarised asap to ensure engagement takes place regarding the national roll-out with the appropriate policy leads. Julie Townsend agreed to contact Andrew Chapman to identify relevant policy leads to facilitate this meeting. A live demo of the AoV would be required at the meeting.

  ACTION 03 2022-03-10: Julie Townsend to arrange a meeting with appropriate SG policy leads asap (live AoV demo).

  Julie Townsend.

- PM Handover. A thorough handover would take place with Rebecca Bolger.

4 Risks & Issues

Issues were noted as follows.
- Genetics – no change.
- COVID within core team has delayed getting final actions incorporated to the AoV for pilot rollout.
- Still significant data gaps in NHS Lothian, NHS Ayrshire and Arran, NHS Forth Valley and NHS Western Isles, despite push. **See ACTION 02 2022-03-10** to mitigate this risk.

There was no reported change to the risks.

5 Milestones Update

It was noted that there had been no change to the status of milestone 2 and 12 (genetics dependant).
Milestone 4 should have a completion date of 01/04/2022 (not 31/12/2021) as this related to the development of a suite of educational resources (linked to the launch date /01/04).
Milestone 8 could be closed 11/03/2022.

6 Preparation for National Rollout of Atlas of Variation

This was captured under 'next steps' as noted above.

7 PM cover for April

Rebecca Bolger would provide support in the absence of Jamie Nimmo to cover the month of April.

8 AOB

Claire Lawrie highlighted the IBMS Congress event to take place week beginning 14th March 2022 and suggested promoting this event by way of Twitter from various accounts to widen visibility.

NSD had been asked to write an article for the Biomedical Scientist magazine. Claire Lawrie volunteered to develop a first draft based on what was presented at the IBMS Congress event. Thereafter to be further defined and cascaded through the formal approval process.

Liz Blackman questioned whether there was a known deadline for the submission of the (next phase) PID. It was agreed that Julie Townsend would glean this information from Ravenna Sajjan along with any financial commitments.

ACTION 04 2022-03-10: Julie Townsend to ask Raveena Sajjan when the deadline for PID submission for the next (potential) phase of the programme would be.
<div align="right">**Julie Townsend / Raveena Sajjan**</div>

Karen Stewart suggested progressing as much work as possible in the meantime.

It was questioned what the end of phase report would look like. This had historically been a comprehensive report. Karen Stewart gave the view that this could be a leaner report tailored towards the AoV with references to the educational and quality improvement work.

ACTION 05 2022-03-10: Karen Stewart to discuss with Catherine Ross the size and content etc. of the end of phase report. **Karen Stewart**

ACTION 06 2022-3-10: Jamie Nimmo to send to the group the Comms (NHS Grampian AoV Rollout), draft User Guidance, and links to the AoV and Educational Toolkit etc. **Jamie Nimmo**

9   **Date and Time of Next Meeting**
- Wednesday 20th April 2022 from 10-11am via Teams.
- Wednesday 1st June 2022 from 10-11am via Teams.