



**Minutes of the Priority Leads Forum
Held in the Board Room, Institute of Translational Medicine
On Wednesday 11th October 2017**

Present: Chris Parker – Chair (CP), Peter Lewis (PL), Tony Davis (TD), Ruth Chambers (RC), Gavin Russell (GR), Amy Boulton (AB), Ruth Chambers (RC), Safina Mistry (SM), Kevin Dunn (KD) Laura Boddy – minutes (LB)

Apologies: Lucy Chatwin (LC), Dion Morton (DM), Neil Mortimer (NM)

Agenda Item 1: Welcome, opening remarks, introductions, apologies

CP opened the meeting by welcoming the new Prevention and Self-Care Priority Lead, Safina Mistry (SM), and introductions were made around the table.

Agenda Item 2: Minutes of the previous meeting and actions arising

The minutes of the previous meeting were approved as accurate and correct. All actions had been completed and the following points noted:

ACTION: To keep Sarah Millard updated regarding headlines (reiterated for SM)

ACTION: All Priority Leads to provide KD with presentations for the WMAHSN Board by 18th Oct deadline. This is also useful for AB and Matrix of Metrics

Regarding the action on page 2, RC had spoken to NM, but the bid didn't go through.

ACTION: HSJ award won by the Patient Safety Collaborative (PSC) will be formally recorded for this quarter.

PL provided a short update on CADDI (Capacity and Demand Dashboard Information), a tool that can see in real-time where someone in crisis can be placed. It does require a change in culture to provide real and accurate data for bed managers as it relies on movement being logged immediately rather than at the end of a shift or when administrators come on duty.

Agenda Item 3: Executive Team Update

CP provided the executive team update.

Relicensing. Going forward all AHSNs are to work on national streams, as well as having a local focus informed by STPs in their region. The current Innovation National Networks (INNs) are Innovation and economic growth, Accelerating access to innovation/innovation exchanges, Medtech, Medicines Optimisation, Diagnostics/personalised medicine, Digital health, Patient safety, Research, and Quality improvement. Time will determine how many

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endure and in the end there may or may not be nine in total; either that or specific AHSNs might be asked to target certain INNs.

Ian Dodge visit. CP outlined the plans and aims of the day for the visit on Friday 13th October 2017.

Meridian. TH's Meridian update to be circulated with minutes [See Enc. 1]. CP wanted to highlight that Meridian now has Gold accreditation from Ideas UK. There will also be an Adoption and Innovation Fellowship programme to be offered to all Premium members. The leads present thought it might be useful to have easy access to a report that provides a real-time overview of statistics for Meridian. **ACTION:** TH to send a monthly link to the priority leads with headlines figures.

TD provided Commercial Director Update. **ACTION:** LB to circulate update from TD with minutes [See Enc. 2]

It was highlighted that there are two major WMAHSN events forthcoming, the Digital Summit on 12th December and the Economic Summit on 5th December.

Agenda Item 4: Business Plan and Matrix of Metrics 2017/18 provisional Q2 updates against business plan + red flag issues

The half-yearly updates need to be given at the 25th Oct Board for Priority Lead programmes. **ACTION:** Slides to KD by 18th October 2017.

PSC

GR provided an update for the PSC. The PSC will focus on both national streams as well as local streams of work, and currently focus is on working out the logistics. The national streams will consist of maternity, safety culture and deteriorating patients. PJ has been nominated to head the safety culture stream nationally.

Currently the PSC are trying to put forward guidance on NEWS (National Early Warning Score for sepsis). The aim is to provide a standardized scoring system with an amber warning that can be realistically adhered to. The plan is to spread and use NEWS across one STP's geography, and once this is successful to spread into further STPs.

The PSC are putting together another training scheme similar to the AQuA training offered to Boards, but this will be geared more towards changing culture, e.g. human factors/LfE, rather than focusing on Board processes. The team is also working with Q fellows to build up a joint improvement approach.

Updates on programmes that are not GREEN:

BuMPS, this is RED and the PSC have currently suspended work on this stream and are instead supporting the National Maternity Programme with their work.

Mental Health

PL provided an update for mental health. RAID Plus is currently proceeding according to schedule, and the software is still being tweaked. A number of crisis care workers have been employed to man the coordination centre and to be a mobile team who liaise with the triage unit run by the clinicians, police and ambulance services. Predictive analytics are being done with Telefonica and the first stage has been completed.

The mental health strategy paper has been rolled out. In terms of prevention, there is funding for a few tester sites. TD highlighted the problem of app 'stickiness' for prevention and wellness apps and talked about Silicon Valley's approach to this problem.

LTC

RC provided the Long Term Conditions (LTC) Network update. The LTC is building a strong network and the LTC bulletin now has over 1000 recipients.

RC provided an update on STP data packs, whereby data comparing each STP for certain conditions is collated and can be accessed by local people who want to explore how healthy their population is in comparison with similar areas across the rest of the country.

RC has met with Pfizer about funding for patient engagement to promote different approaches for patients and clinicians to underpin best clinical practice and trigger behaviours changes in the atrial fibrillation pathways. A total of £19,900 non-promotional Medical and Education Good and Services (MEGS) grant has been awarded.

The LTC network is engaging with the West & East Midlands social prescribing network having attended the initial West Midlands part of the regional social prescribing network meeting at PHE Birmingham, and interactions have taken place with the national NHSE leads for social prescribing. Elaine Russell and RC are recognised strong supporters, and have asked to have the WMAHSN logo at the upcoming social prescribing regional network conference on 1st February 2018.

Prevention and Self-Care

SM, the new Prevention and Self-Care Priority Lead, provided an update. SM is keen to understand the current and emerging demand priorities and is looking at JSNAs and Health and Well-being Board plans across the West Midlands as this will help shape her work plan. SM noted that whatever is designed to address the issues raised must have a behavioural element.

SM aims to meet with CCG chief executives to assess what they are engaging with in terms of the prevention and self-care agenda and how SM can link in with this. SM is also keen to engage with schools, both primary and secondary. With regards to digital, SM was mindful regarding measuring the impact of prevention and self-care apps, and how to get the ownership to help nurture and direct.

Agenda Item 5: Overlapping programmes and collaborative working

The PCC and PSC were not present for this part of the discussion, but it was agreed that there must be overlaps with priorities, e.g. someone's mental health illness prevents them seeking treatment for heart disease. Those present felt that as priority leads are present at the ITM for the Priority Lead meeting, it would be worth setting up a meeting beforehand to go over overlapping programmes. **ACTION:** KD to set up 13:00 – 14:00 meeting before the Priority Lead meeting including LC, NM, and priority leads.

Agenda Item 6: Risk and Issues

R014 – shifting requirements, the actual timeframe is being delayed.

It was suggested that making timely payments to suppliers might be added to risk register due to delays with payments going through. The perception was that the finance processes can slow down procurement times, especially for things above a certain level (£50,000). However, it was noted that some of the previous delays had been exacerbated by poor WMAHSN administration support and finance process knowledge, which appear now to have been addressed. **ACTION:** To be reviewed at next Priority Leads meeting whether this is still an issue and for it to be added to the risk register only if that is so.

Agenda Item 7: Any Other Business

CP again reminded the priority leads to send their presentations for the Board by Monday 23rd October.

It was noted that the PCC Priority Lead will be present at the next meeting.

Date and time of next meeting

Wednesday 24th January 2018 9am – 11am

Board Room, ITM, Heritage Building (QEH)