

NHS HEALTH SCOTLAND

**Minutes of the Health Governance Committee meeting
held at 10.30am on Friday 10 October 2014
in NHS Health Scotland, (Room 5.5), Meridian Court, Glasgow**

Present: Dr A M Wallace (Chair)
Ms M Mellon
Mr P Stollard

In attendance: Dr A Fraser
Ms C Denholm (Item 7)
Mr G Dodds
Mr P Mackie
Ms A Kerr
Ms P Craig
Ms W Reid
Ms M Kerrigan (Minute)

ACTION

1. Apologies

Apologies were received from Mr G McLaughlin, Ms M. Burns,
Ms B Fullerton

2. Declaration of Committee Members' Interests

No meeting-specific interests were recorded.

**3. Minutes of previous meeting
(HGC Min 3/14)**

The minutes of the Health Governance Committee meeting held on
22 August 2014 were approved.

4. Matters arising

There were no matters arising

ACTION

5. **Standard 1:**
Planning and Management of Health Improvement
Programmes
Recent Performance
Reports from Director of Delivery and reporting programme
leads: Child Healthy Weight, Community Food and Health,
Physical Activity
 (HGC Paper 12/14).

In introducing the paper the Head of Healthy Living within the Programme Design and Delivery Directorate explained that there were 3 distinctive pieces of work contained within this paper which come together under 'Lifestyle and Obesity' but all had a separate role (Child Healthy Weight, Physical Activity and Community Food and Health Programme).

Child Healthy Weight

The Head of Healthy Living indicated that the piece of work, introduced in March of this year, was in response to the HEAT target. NHS Health Scotland's role was to support the HEAT target by producing two sets of evidence based guidance which have been sent out to NHS Boards. A training module was produced which went to 300 staff across Scotland and is now being adapted on different topics. Extensive network and seminar support was carried out. It was noted that both phases of the HEAT target had been evaluated.

The report was presented to Scottish Government and from there it was decided an Expert Group be set up to look at this. The Expert Group was then convened, under the auspices of ScotPHN and chaired by Dr Drew Walker, Director of Public Health, NHS Tayside, and recommendations from that group have now gone to the Minister.

In response to the question of effective treatment for child healthy weight, the DPHS indicated that there was effective treatment, conditional on a person being very overweight.

Physical Activity

The Head of Healthy Living informed the meeting that:

- a National Action Plan is now in place;
- 'More Active Scotland' had gone live;
- a walking strategy had been launched;
- a Ministerial Oversight Group had been established, with NHS Health Scotland's Chief Executive and Chair sitting on this group;

ACTION

- there have been strong partnerships across the voluntary sector;
- a Physical Activity Pathway had been used in 16 primary care sites and an area in each of the acute sectors to take this forward. Scottish Government has also proposed a Physical Activity Collaborative and a member of the Healthy Living team will be working alongside the policy lead.

It was noted NHS Health Scotland will also be producing a piece of work on innovation, working with the Centre for Innovation and Change and Glasgow School of Art using design principles.

The Head of Healthy Living pointed out that the graph contained within the presentation showed a real indication of the growing inequalities gap.

It was noted that funding had been given several years ago by Scottish Government to set up a website (activescotland.org.uk). This has recently been upgraded with 50,000 people using the site in the last quarter.

The Head of Healthy Living indicated that approximately 40% of the population meets the physical activity guidelines.

Community Food and Health (Scotland)

The Head of Equality within the Programme Design and Delivery Directorate spoke to this section of the paper and explained that Community Food and Health (Scotland) had given a voice to food inequality, both at strategy level and within communities.

She informed the Committee that communities are involved in food initiatives with a link to community food and health in every Community Planning Partnership (CPP) area in Scotland. Work undertaken in communities is in conjunction with local authorities and NHS partners to enable access to more good and affordable food.

The Head of Equality pointed out that a considerable amount of work had focussed on building resilience in communities, and that had become particularly obvious as food poverty had become more widespread. She continued by indicating that the illustration in the paper talks about the link between strategy development and community development as being the strength of Community Food in Health Scotland.

ACTION

The work Community Food and Health (Scotland) do to increase impact was about sharing learning and they continue to use their newsletter, papers, articles and workshops to share experiences and academic research. They are very keen to act on learning with partners at local level to pilot and develop new initiatives. Through some of this work they are invited to provide evidence and work with policy leads etc. At the moment they are specifically addressing the views of older people and food.

In conclusion it was felt:

- there should be more link-up and learning from Community Food and Health (Scotland);
- the three strands could come together and encompass maternal nutrition;
- these were excellent pieces of work and the added value was clear for each of the programmes;
- the programmes were all moving in the right direction. However work was required to develop synergies across the organisation.
- the obesity route map should be re-launched.

6. **Standard 4**
Building Professional Skills and Capacity
Annual Report from Director of Delivery and Head of Learning and Workforce Development
 (HGC Paper 13/14)

The Head of Learning and Workforce Development spoke to the paper and indicated that there was an overlap with last year. She reported that new learning materials were now available with a stronger emphasis on health inequalities. An evaluation model was being refined for the team and this was now being rolled out within other teams. The Head of Learning and Workforce Development pointed out that there had been evidence of considerably more new partnerships and new work relating to e-delivery. However, there was a challenge with measuring impact.

In response to a question in relation to training moving beyond the health service, the Head of Learning and Workforce Development indicated that several partnerships had been helpful and more and more of the colleges and universities were picking up the e-learning modules. Data was also available to training co-ordinators locally. The Head of Learning and Workforce Development pointed out that there had been a marketing programme this year.

ACTION

A further question was raised regarding CPP workforce targets where it was noted some progress had been made.

The Committee thanked The Head of Learning and Workforce Development for her excellent work and that of her team, pointing out that it had been yet another very productive year. It was recognised the team was moving more towards marketing, bearing in mind design and delivery, and identifying the appropriate workforce within CPPs.

7. Health Governance Committee: Standards (Revised)
(HGC Paper 14/14)

The Director of Public Health Science (DPHS) spoke to the paper and indicated there were three standards themed along knowledge into action. A further two papers were tabled at today's meeting: Quality Assurance on Health Scotland's Core Programmes in relation to Knowledge into Action and Programme Results: Guidance for Reporting Programmes to the Committee, and AFHS: Measuring Performance.

In response to a concern raised regarding there being insufficient mention to equality and human rights, it was agreed that these matters could be encompassed in the three standards, but further checks were necessary to ensure they were properly reflected.

PC/DFS

The Committee agreed the Standards were appropriate and deliverable and moving in the right direction. The Committee was also happy to accept the guidance. It was agreed it would be helpful for both guidance and AFHS: Measuring Performance to be kept together.

It was agreed that the Learning and Development report should in future now go through the Audit Committee.

8. Agenda for HGC meeting on Friday 16 January 2015

- Core programme 2: The Places and communities in which people live, support and promote good health. It was agreed the DPHS invite Sheila Beck, Principal Public Health Adviser (EfA) to lead the discussion.

DPHS

ACTION

- The Review of the Terms of Reference.
- Health Promoting Health Service

DPHS
with
PDD

9. **Any Other Business**

There were no items under any other business.

10. **Date of next meeting**

The next meeting of the Committee will be held on Friday 16 January 2015.

Signature: Arthur Wallace (Chair)

Date: 16.1.15