

**Scottish Partnership Forum (SPF) Committee**  
**14:00-15:30, Tuesday 4 June 2024**

**Attendance List**

Confirmation of members in attendance at the time of writing:

<b>Name</b>	<b>Organisation</b>
Karen Reid ( <b>Chair</b> )	NHS NES
Derek Lindsay	NHS Ayrshire and Arran
Colin Lauder	NHS Lanarkshire
Robin McNaught	The State Hospital
Louise Bussell	NHS Highland
Gillian Russell	Scottish Government
Jane Hamilton	Scottish Government
Ian Turner	Scottish Government
Fiona Hogg	Scottish Government
Anna Gilbert	Scottish Government
Andrew Verrecchia	Unison
Claire Ronald	Chartered Society of Physiotherapy
Jaki Lambert	Royal College of Midwives
Gavin Fergie	Unite

In attendance:

<b>Name</b>	<b>Organisation</b>
Niall Anderson ( <b>Secretariat</b> )	Scottish Government
Zachary Deponio	Scottish Government
Connie Hendry	Scottish Government
Ryan Anderson	Scottish Government
Catriona Hetherington	Scottish Government
Catherine Sturrock	Scottish Government
Donna Stewart	Scottish Government

Apologies have been received from:

<b>Name</b>	<b>Organisation</b>
John Burns	Scottish Government
Dorothy McErlean	Royal College of Podiatry
Frances Carmichael	Unison
Norman Provan	Royal College of Nursing

## Welcome and Introduction

- Apologies were noted from Norman Provan, Frances Carmichael, Dorothy McErlean, and John Burns.
- Members agreed the minutes for SPF Committee on 19 March.
- The following outstanding actions were noted by the chair:
  - Agree membership from SPF, SWAG and STAC for a sub-group developing pandemic guidance. **Complete**
  - The SPF secretariat team will arrange an extraordinary standalone SPF meeting to discuss Acute Service Reform. **Ongoing** – dates issued to the group, seeking a date following the election.
  - Develop an induction pack for new SPF members **Ongoing**.
- The meeting was not quorate as 5 staffside representatives were not present. To be quorate SPF Committee requires 4 NHSS Employers 4 Scottish Government Officials and 5 Staffside Members. The group agreed to proceed on the basis that decisions were not being taken at the meeting.

## Item 2 – National Care Service Implementation, Ian Turner and Connie Hendry

- Ian Turner highlighted publication of the NCS Bill, which was introduced to the Scottish Parliament.
- The NCS Bill will reform existing integration authorities, making them an integral part of the NCS. It will also establish a new National Care Service Board (NCSB) with accountability for services included in integration authorities.
- Important to highlight that the bodies will operate as tripartite entities that include Health Boards, Local Authorities, and Government, with national accountability improving standards across social work.
- Ian Turner provided an overview to the group of progress with these various programmes of work.
- He reiterated that NHS staff will continue to be employed by their Health Boards, as they deliver those health services that are in scope for the NCS, together with existing community health providers. Workforce employed by Local Authorities will retain responsibility for delivery, functions, staff and assets.

## Comments

- If all staff and assets remain with the Health Board, and IJBs continue to function as service providers by commissioning services, does this represent a significant change for IJBs?
- Members noted that in Highland the arrangement is different, as they do not have an IJB, and it is helpful to note separate governance arrangements there.
- The team were aware of the slightly different governance structures in Highland, and noted that the Minister is based in the Highlands, and is familiar with the arrangements there.
- Members asked whether Children services would be governed by the NCSB,

- The existing legislation allows flexibility in terms of which children's services are delegated into integration authorities. Some are operating with full delegated powers, whereas some include no children's services at all.
- Where children's services have been delegated they would be accountable to the NCSB, while those areas that have not delegated them would not. Under the current arrangements, this would result in children's services in about half of the country in, and half out.
- Members asked what the working assumptions for the establishment date for the New Board, and the Agency.
- We would be looking for a 'shadow board' soon after the bill gets through, and the full board to begin operating in 2026. However, it will be an iterative approach.
- Karen Reid noted that despite 2026 being a considerable time away, a public appointments process has begun for executive roles on the NCS board.

### **Outcome**

Ian Turner offered to return to the group to discuss specific aspects of NCS policy development, upon request. The group will welcome an update from the NCS in October 2024 once the bill has gone through, with progress towards creation of the Shadow Board.

### **Ryan Anderson – Data Strategy for Health and Social Care**

- We are more than a year into the Data Strategy for Health and Social Care, and we are trying to improve the services being provided.
- Ryan provided an overview of the Strategy, identifying its 8 key strands, and progress towards key milestones.
- Governance is through the Health and Social Care Data Board, which oversees the Data Delivery Sub-board, and Data Standards Sub-boards.
- There is a new CHI system that went live in 2023, replacing 8 separate CHI legacy systems. Highlighted immediate benefits which include 24/7 access to CHI system, and a platform with scope for further development .
- Efforts underway to improve data matching between local authority and social care systems with the Health Boards. This is at the business case stage.
- The Researcher Access Service is being delivered, with some data sets added. The data is available for researchers. Data sets will be expanded, now the system is operational.
- The team have also established a Cyber Security Centre of Excellence. Recent cyber-attacks highlight the importance of addressing concerns rapidly.
- Priorities for next year include expanding the National Digital Platform. To improve the digital front door, allowing patients to access their own data.
- They will also begin engaging on an integrated health and social care record. To reduce the frequency with which patients are telling their story.
- The ethical use of data is central to the strategy. The Safe Haven Charter sets clear information governance processes for using data to support research.
- Information Sharing & Information Standards Legislation, will help to create a new legal gateway for sharing data between the NCS and the NHS.
- It will sit alongside GDPR legislation, and provide opportunities for sharing data effectively between the two parallel systems. This legislation is comparable to legislation being adopted elsewhere across the world.

- Ryan Anderson and his team will continue engagement with stakeholders. The team intend to publish another annual update in 2025. They also plan to re-publish the strategy in 2026 after the next Scottish Government Elections.

## **Comments**

- Colin Lauder noted that the GP data-set is fundamental to how we organise services. Can we have an update on how we have sought to integrate that into existing systems.
- Ryan Anderson confirmed that he would seek to find this information from Sarah Lily, Primary care lead.

## **Healing Arts Scotland, Catherine Sturrock and Donna Stewart**

- Catherine attended as the NHS International and Intergovernmental policy lead for the Healing Arts Scotland. Catherine had come to the forum in relation to the international strategy earlier this year, and invited feedback from the group.
- Healing Arts, is a high profile nationwide series of events which brings together WHO, Jameel Arts and Health Lab, and the Scottish Ballet.
- They are hosting a series of events as part of the Edinburgh International festival, with an opening event on 19<sup>th</sup> of August.
- The programme mobilise and strengthen local arts and health projects, with 4 primary policy focusses on loneliness and isolation, dementia, young peoples' mental health, and social prescribing.
- The programme includes two closed door policy sessions, with a roundtable in the portrait gallery, and an officials learning session on social prescribing.
- There was an open question to the group about the legacy of the festival, and how we can embed its impacts into the Health System.
- Donna Stewart, Scottish Government culture team leader, provided an overview of some of the links being established between culture and health.
- Through 'Transforming through culture', the cabinet have expressed interest in opportunities for cross-portfolio working.
- Existing culture network which works with NHS representatives, Art in Hospitals, Art Link, and other representatives from Arts and Health Professional Bodies.
- Evidence base shows positive impact from cultural engagement on mental and physical health, and the benefits of cultural activity in clinical settings and in their everyday lives.
- The culture network are keen to strengthen their activity, and increase their representation across the NHS.
- Brought together officials from the Health and Wellbeing portfolio leads. They find that this is one of the opportunities for sharing between Health and Wellbeing partners in government.
- Lots of available cultural assets available that we can use in Health and Social Care, and Community Settings. Referred to success of 'Glasgow Life'.
- The Culture team, and their internal and external networks, welcome knowledge and expertise from SPF, and to develop operational links to the service, noting that this would be a fitting legacy for the Healing Arts Festival.

## **Comments**

- Colin Lauder offered to link to the Directors of Planning group.
- Karen Reid (NES) highlighted the Health and Social Care standards are to be refreshed and suggested we approach National Care Service team to ensure that cultural aspects feature within that refresh.
- NHS Education for Scotland (NES) offer to assist regarding the standards, highlighting the festival and associated activity and raise awareness of any opportunities for Board membership on Arts Culture Health Wellbeing Scotland (ACHWS). Also, offered to link to the team on social prescribing.
- Claire Ronald highlighted the need to ensure that the workforce is aware of arts and health interventions, sharing the opportunities through health boards so workforce (i.e physiotherapists and OTs) are aware of options available to them.
- Potential issues around ensuring any cultural intervention are equitable, diverse and inclusive and not white dominant. Potential to link into NHS BAME and Pride networks and become part of the solution to the isolation experienced by those traditionally excluded from the healthcare system.

## **AOB**

- Derek Lindsay inquired about the timing of an SPF Acute Service Reform meeting.
- The secretariat will circulate dates for an extraordinary meeting on NHS Service Reform shortly.

**[End]**