



THIRD SECTOR DUMFRIES AND GALLOWAY

REPORT OF MEETINGS

NHS Public Health Committee in Dumfries and Galloway

30th May 2022

THIRD SECTOR DUMFRIES AND GALLOWAY SUMMARY

PLEASE NOTE: THIS IS A PERSONAL RECORD BY THE CHIEF EXECUTIVE OF TSDG, NORMA AUSTIN HART. IT IS BASED ON MY OWN OBSERVATIONS. IT IS NOT A FORMAL MINUTE OF THE MEETING.

1. The PHC supported the recommendation that the CoSync report should include an analysis of the role of the third sector.
2. The terms of reference for the group were agreed - see attached.
3. The vaccination programme and lessons learned were shared and discussed.
4. The uptake of vaccination in D&G has been higher than national averages, though both are relatively low.
5. The committee asked for annual updates on the progress with the vaccination programme.
6. There was a discussion about the impact of Covid on the health of children and young people based on Ensuring Our Futures - a national public health assessment of this issue and the wider strategic context such as GIRFEC.
7. A short life working group looked at how the national report aligns with our experience in D&G.
8. The services for children and young people and pregnant women have not returned to pre-Covid levels and these present issues for transport and travel to these services.
9. A whole system approach was encouraged by the committee and there was discussion about how this work sits alongside the development of the new Children's Services Plan. It was agreed that this should be considered. The role of the TS was acknowledged as was TSDG's participation on the CSP reference group
10. I was not able to attend all of the meeting due to conflicting diary commitments

Public Health Committee Terms of Reference

The Public Health Committee of the Board will consist of:

- 6 Non-Executive Members

The Chair and Vice-Chair of the Committee will be nominated by the Board Chair. The Vice-Chair will undertake the role of Chair for this Committee, in the absence of the Chair of the Committee. If neither the Chair or Vice Chair of the committee are present at the start of the meeting, the Non-Executive Committee members present will nominate a Non-Executive Committee Members as Chair for that meeting.

The committee will also invite the following people to attend all committee meetings as advisers:

- Chief Executive of the NHS
- Director of Public Health
- Member of the Integration Joint Board (Local Authority Cohort)
- Chief Officer for Health and Social Care
- Nurse Director
- Medical Director
- Director of Strategic Planning and Transformation
- Director Communities, Dumfries and Galloway Council
- Community Planning Manager
- Representative of Third Sector Dumfries and Galloway
- Representative from Public Health Scotland

All Directors or Non-Executive Members have an open invitation to attend this committee.

The committee may also invite other officers to attend meetings to support the consideration and discussion of particular items of business.

2 Reporting Arrangements

The Public Health Committee meetings will be closed meetings, in accordance with the Board's Standing Orders, but minutes of meetings will be reported directly to the Board's open session once approved in draft by the Chair of the Committee.

The Chair of the Committee will provide a verbal report at any NHS Board meeting where the Public Health Committee minute is being presented for information.

Any views and advice for other organisations/partnerships will also be shared for their consideration.

3 Role and Function

The health and wellbeing challenges facing Dumfries and Galloway's population are complex and have been exacerbated by the direct and indirect effects of COVID-19. Poor health has significant impacts on the quality of life of individuals and translates into additional demand on our health and social care system, a demand which is forecast to increase over the next decade.

Increasing healthy life expectancy and reducing health inequalities are two of the biggest challenges we face. The Public Health Reform programme jointly led by Scottish Government and COSLA has recognised the need for collective leadership and a system wide approach to tackle these challenges. There are now strong expectations that robust assurance mechanisms are in place to ensure delivery of actions to improve public health.

It must be recognised that much activity, which supports Public Health is undertaken by or in partnership with other public sector, Third Sector organisations and with local communities and such activities should also report into the relevant governance structure with joint working reporting to the appropriate Community Planning Partnerships.

The Public Health Committee will provide assurance that NHS Dumfries and Galloway meets its obligations across a range of activities including:

- providing assurance to the NHS Board that public health governance is being discharged in relation to the Board's statutory duty for quality of care and protection and improvement of the health of the population.
- ensuring there is development and implementation of work at strategic, tactical and operational levels to underpin a system wide approach to addressing the Public Health Priorities, with a specific focus on improving population health and wellbeing and addressing inequalities.
- ensuring there is development and implementation of work that relates to the health protection, immunisation and screening functions of public health.
- monitoring key public health measures with a clear focus on inequalities.
- providing leadership to reshape NHS Dumfries and Galloway services to have a greater emphasis on prevention, early intervention and tackling inequalities.
- promoting effective partnership working arrangements ensuring a whole a whole systems approach between NHS Dumfries and Galloway, the Health and Social Care Partnership, the Local Authority, the Community Planning Partnership and thematic partnerships, Third Sector and local Communities to improve population health and wellbeing and reduce health inequalities.
- providing assurance to the NHS Board that all necessary steps to contain COVID-19 are in place.
- receiving updates on both direct and indirect impacts of COVID-19 on population health and wellbeing and providing assurance that work is being progressed in partnership to address these issues.
- providing leadership and advocacy for public health work in Dumfries and Galloway.

4 Objectives

The Public Health Committee will:

- Receive reports on regional work plans for key population health improvement areas including health inequalities led by NHS Dumfries and Galloway and Health and Social Care Partnership.
- Scrutinise and discuss key population health indicators, particularly in relation to population harms emerging as a result of COVID-19.
- Consider national developments in Public Health and their implementation in Dumfries and Galloway
- Receive and discuss reports relating to emerging threats to public health in Dumfries and Galloway and their mitigations
- Receive reports relating to:
 - Health Protection Incidents

- Immunisation Programmes
 - Screening Programmes
 - Work led by the Public Health Directorate to support provision of high quality, efficient health and social care services, such as Needs Assessments.
 - Scrutinise significant strategic change programmes in order to ensure there is an adequate focus on achieving a positive impact on health and well being, and a positive impact (where possible) on health inequalities.
- Review and constructively challenge the assurances that have been provided, as to whether their scope meets the needs of the population of Dumfries and Galloway and that community involvement and engagement actively informs planning and delivery of public health action.
 - Commission further assurance work for areas that are not being subjected to sufficient review.
 - Seek assurance that management are taking action to address key issues relating to Public Health.
 - Escalate, where necessary, key public health issues to the NHS Board for consideration of raising in other relevant partners/agencies.
 - Engage with the Community Planning Partnership about whole systems approaches and regional planning and key Public Health issues.

The committee will liaise with other NHS Board Public Health Committees to support learning and development of the committee.

The committee will develop a work plan to discharge its remit and duties, which will determine the information that it requires at meetings and consequently the agenda for those meetings.

The committee will also annually review its performance and its terms of reference, and reflect the outcome from this in its annual report to the Board.

5 Confidentiality

Members will often receive information of a private nature which is not yet public, or which perhaps would not be intended for public circulation. Members must always respect the confidential nature of such information and comply with the requirement to keep such information private.

It is unacceptable to disclose any information to which members have privileged access, for example derived from a confidential document or from a private meeting, either orally or in writing. In the case of other documents and information, members are requested to exercise judgement as to what should or should not be made available to outside bodies or individuals. In any event, such information should never be used for the purposes of personal or financial gain or for political purposes or used in such a way as to bring Dumfries and Galloway Health Board into disrepute.

6 Agendas and Papers

Agendas will be agreed in advance of the meeting and papers prepared using the agreed Committee template.

An agenda matrix will also be developed annually covering the key themes of the remit for the committee. The matrix will be reviewed by members during each committee meeting and updated with any new items identified for future meetings.

Papers will be required to be submitted three weeks prior to the meeting and distributed to Committee members ten consecutive days in advance of the meeting, where possible.

7 Quorum

The Committee will be quorate when there are present, and entitled to vote, a quorum of at least one third of the whole membership, including at least two Non- Executive members and one Executive Director.

In determining whether or not a quorum is present the Chair must consider the effect of any declared interests.

When a quorum is not present, the only actions that can be taken are to either adjourn to another time or abandon the meeting altogether and call another one. The quorum should be monitored throughout the conduct of the meeting in the event that a member leaves during a meeting, with no intention of returning. The Chair may set a time limit to permit the quorum to be achieved before electing to adjourn, abandon or bring a meeting that has started to a close.

8 Frequency of Meetings

The Committee will meet at least four times throughout any given year.

The Chair of the committee has the right to convene additional meetings as they deem necessary.

9 Support

To enable the Public Health Committee to properly fulfil its role:

- The Director of Public Health will provide updates as required on any key emerging Public Health issues.
- Corporate Business Support Team will provide adequate administrative support to the Committee concerning the preparation of papers, minute taking duties and any other activities requested by the Committee.

10 Best Value

The Committee is required to provide appropriate assurance with regards to the delivery of Best Value in compliance with the Board's annually approved Best Value Framework.

