

## Regional Advisory Group for Prevention, Fair and Early Treatment

14:00 – 16:00, 8<sup>th</sup> January 2009  
Gallowgate 1, Citygate

### Minutes

	<p><b>Present:</b></p> <p>Karen Straughair - KS (NHS South of Tyne) (Chair) Fergus Neilson – FN (Theme Lead, Public Health NE) Alison Learmonth – AL (Gateshead PCT) Peter Mercer – PM (NHS North East) Phillip Johnson –PJ (NHS South of Tyne) Chris Macklin – CM (NHS South of Tyne) Julie Marsh – JM (NHS North East - for Jen Armstrong)</p> <p><b>In Attendance:</b></p> <p>Angela King (Public Health NE)</p> <p><b>Apologies:</b></p> <p>Jen Armstrong (NHS North East) Ian Renwick (Gateshead Foundation Trust) David Stout (NHS North East) Danny Ruta (Newcastle PCT) Dr Peter Brambleby (North Yorkshire and York) Sheila Cooper (East of England Cancer Network) Prof James Mason (Durham University) Eugene Milne (NHS North East)</p>
1.	<p><b>Introductions and apologies</b></p> <p>Karen Straughair took apologies and introductions were made.</p>

## 2. Introductory address from the chair

KS introduced and explained the elements of this Prevention Fair and Early Treatment “Theme” which are to be addressed by this RAG. The first priorities can be grouped under four main headings: “stroke”, “cancer”, “preventative spend” and “development of workforce for health promotion”.

Better Health Fairer Health, the Public Health and Well-being Strategy for the North East, was framed to improve the health and well being of the public of the North East over the next 25 years and specifically focusing on those areas which are not already being addressed by the NHS and other agencies. The aim in constructing this RAG has been to select leaders who have a responsibility within these areas to take forward the specific pieces of work identified in the Theme. For example, the Cardio Vascular Network has been identified as the most suitable organisation to lead on the work on stroke and is being asked to ensure that its plans and work include the elements of this Theme as a high priority.

Additional members have been invited to bring a broader experience and to contribute helpful, critical comment on the plans being formed.

The nature of this RAG is that it aims to have a direct influence on the plans and work of organisations, who have responsibilities for the health of the public in the areas defined. Initially, this is likely to be mostly in the field of the NHS and so to influence the Primary Care Trusts and their priorities and commissioning. As the subjects are developed, this influence will need to become wider to local government and the third sector.

Karen highlighted the list of other areas to be addressed at the bottom of the page for this Theme (e.g Sexual Health, Podiatry etc). The intention of this list is to indicate to the RAG that it may wish to develop and recommend requirements for change in these areas also. Those described in detail (“stroke”, “cancer”, “preventative spend” and “development of workforce for health promotion”), are seen as the higher, more immediate priority for the attention of the RAG.

The RAG will initially meet frequently in the first year and then, perhaps less frequently in future years when the work programme is developed and underway.

Prior to this meeting, Karen and/or Fergus have met with the leaders for stroke, cancer and workforce, who are members of this RAG, to explain this approach and to ask them to form their first thoughts on how to address the elements of the Theme.

It is intended that the RAG will develop a work programme, against which it will monitor its own progress and which it can use to demonstrate to those outside the RAG, the progress being made. The metric for this will be discussed under the item “OGIMs”

## 3. Terms of Reference

Draft Circulated

FN told the group that this was a standard template for all RAGs but could be amended as appropriate. KS felt that the ToR should be connected with the Darzi clinical leads groups.

### **Actions:**

- **FN to finalise and include cross cutting links and early elements**
- **FN will seek further RAG members from Local Authority and from NE**

	<b>Public Health Observatory</b>
<b>4.</b>	<p><b>Presentation on Stroke</b></p> <p>PM gave a presentation on what is happening in the region regarding stroke services and how the Cardio Vascular Network (CVN) intends to lead the region in addressing the stroke elements of the PFET Theme. He also explained the history of the CHD Collaborative and the role of the network and their priority work areas.</p> <p><b>Actions:</b></p> <ul style="list-style-type: none"> <li>• <b>FN to meet with PM to put some detail on the proposals of the CVN to address the stroke elements of the Theme.</b></li> <li>• <b>PM will return to the next RAG meeting to present the proposals to the RAG</b></li> </ul>
<b>5.</b>	<p><b>Presentation on Cancer</b></p> <p>This presentation on behalf of the North of England Cancer Network, could not go ahead because SC was ill. KS said that stroke and cancer were very similar and, having already met with SC and Moira Davison, she gave an outline of the Cancer Network's current thinking on how to address the elements of the Theme.</p> <p><b>Actions:</b></p> <ul style="list-style-type: none"> <li>• <b>FN to meet with SC to put some detail on the proposals of the NECN to address the cancer elements of the Theme.</b></li> <li>• <b>SC will return to the next RAG meeting to present the proposals to the RAG</b></li> </ul>
<b>6.</b>	<p><b>Update on Public Health Workforce Education and Training</b></p> <p>AL presented a paper which explains the work so far around developing the workforce so that "making every health service encounter a health promoting encounter" is delivered. This element of the PFET theme is cross cutting with Our Vision Our Future and it has been taken on by Alyson, who leads on the development of the public health workforce in the Region.</p> <p><b>Actions:</b></p> <ul style="list-style-type: none"> <li>• <b>AL to meet with PJ to put some detail on the proposals of the NECN to address the cancer elements of the Theme.</b></li> <li>• <b>AL will return to the next RAG meeting to present the proposals to the RAG</b></li> </ul>
<b>7.</b>	<p><b>Preventative Spend Update and Opening Discussion</b></p> <p>A sub group will meet on <b>9 February</b> to take this forward. This subgroup will consist of Fergus Neilson, Chris Macklin, Danny Ruta, Peter Brambleby, and David Stout.</p> <p><b>Action: FN and CM to develop the OGIM for this preventative spend work.</b></p>
<b>8.</b>	<p><b>OGIM and Metrics for RAGs</b></p> <p><b>OGIM = Objective, Goals, Initiatives and Measurables</b></p> <p>KS explained OGIM metric for which a paper had been circulated with the agenda. This method is becoming widely used within the NHS in the North East and is widely used in</p>

	<p>the non-health sector as a way of developing thought on how to achieve and demonstrate the achievement of the Objectives.</p> <p><b>Action:</b></p> <ul style="list-style-type: none"> <li>• <b>PM, SC, AL and CM to draft OGIMS for their elements of the Theme and bring to the next meeting for discussion.</b></li> <li>• <b>FN will assist each of these through this process</b></li> </ul>
<p><b>9.</b></p>	<p><b>13<sup>th</sup> February 2009 – First Annual ‘Better Health, Fairer Health’ Update Day</b></p> <p>FN explained what the day was about and who it was aimed at.</p> <p>All RAG members are invited and support is asked of any who wish to join FN and KS in the morning sessions, in which each Theme is presented in small workshops.</p>
<p><b>10.</b></p>	<p><b>Any Other Business</b> <b>Social Marketing and Communications Collaborative</b></p> <p>JM described the Social Marketing and Communications Collaborative between the SHA and the PCTs. It is a virtual entity, where PCTs and SHA collaborate closely across all Comms and Social marketing to benefit from doing things once only and to strengthen the SM and Comms initiatives across the Region.</p> <p>Each RAG has been allocated a communications representative to support on communications issues and marketing. JM will be supporting this RAG.</p> <p>She explained that there would be a Task and Finish Group set up for each RAG and this would be a sounding board for work streams.</p>
<p><b>11.</b></p>	<p><b>Dates of Future Meetings</b></p> <p>8 April at 2pm, Sunderland PCT.</p> <p>7<sup>th</sup> July 2pm, Venue TBA</p> <p>16<sup>th</sup> September, Venue TBA</p>