

MINUTES OF THE SERVICE FRAMEWORKS PROGRAMME BOARD

26 September 2011

Present

Dr Michael McBride (CMO, Chair)
Dr Jim Livingstone (Director, SQSD)
Christine Jendoubi (Director of Mental Health and Disability Policy)
Maeve Hully (PCC)
Angela McClernon (DHSSPS CNO (Acting))
Louise McMahon (HSC Board)

In attendance

Dr Mark Timoney (for Dr Norman Morrow CPO)
Fionnula Mc Andrew (Project Lead, Service Framework for Learning Disability),
Siobhan Bogues (Service Framework for Learning Disability),
Maureen Ferris (Project Manager Mental Health Service Framework)
Paula Shearer (for Peter Toogood)
Paula McGeown (Project Co-ordinator Learning Disability Service Framework)
John Maguire (Project Co-ordinator Service Framework for Mental Health and Wellbeing)
George Russell (Safety, Quality and Standards Directorate, (Note taker)

Apologies

Peter Toogood (Director of Finance)
Dean Sullivan (HSC Board)
Dr Adrian Mairs (PHA)
Catherine Daly (Deputy Secretary Healthcare Policy)

1. Welcome and introductions

- 1.1 Dr McBride welcomed Angela McClernon who was attending her first meeting of the Programme Board.

2. Minutes of previous meeting (SFPB/01/11)

2.1 The Board agreed that the minutes were an accurate reflection of the previous meeting.

3. Matters Arising

3.1 Dr Livingstone reported that the Service Frameworks fundamental review process was continuing to be developed and would be tabled at the next meeting of the Board. (*para 3*)

3.2 It was noted that all Frameworks now have a nominated representative of PMSID to analyse data requirements and available data sources. (*para 5.5*)

3.3 It was noted that the Service Framework for Cancer Prevention and Treatment had been finalised via written procedure and launched 25 February 2011. The Framework is currently being base lined reviewed and implementation planned. This work is expected to be completed by December 2011. (*para 6*)

3.4 Dr Livingstone reported that the Service Frameworks Newsletter had been published in April 2011, with a second edition scheduled for later this year. Communications will be tabled at the November meeting of the Service Framework Development Forum. (*para 6.6*)

3.5 Members were advised that the review of Generic standards was well underway and it was expected that these would be finalised and in place for April 2012. (*para 7.2*)

3.6 It was noted that the Service Framework for Children & Young People's PID was being finalised and would be shared with members shortly. (*para 8.6*)

3.7 All issues arising from the minutes have been addressed.

4. Service Framework for Learning Disability (SFPB/07/11)
Draft Consultation Document

4.1 Dr Livingstone spoke to this item.

4.2 Dr Livingstone complimented Fionnuala McAndrew and Siobhan Bogues on bringing together a wide spectrum of people from various backgrounds, including service users to develop the Learning Disability Service Framework. He acknowledged the input of other Departments to the process through the Inter-Departmental Working Group and suggested that the development of this Framework reflected the changing policy landscape. The Framework is now ready for public consultation with the view to launch in Spring 2012.

4.3 Fionnuala Mc Andrew acknowledged the contribution of Siobhan Bogues to the development of the Framework and thanked Paula McGeown for her work in quality assuring the document. She referred to the extensive consultation and stakeholder involvement, the inclusion of the service user perspective and the broad range of standards that extend beyond HSC to education and employment. Fionnuala advised that she and Siobhan were keen to assist in both the consultation and implementation of the Framework.

4.4 Siobhan Bogues advised that the Learning Disability Service Framework represents a balance of different views and aims to reflect this whole of life condition focusing on rights and inclusion. She pointed out that learning disability was not just a matter for the HSC and acknowledged the input, to date, from other Departments. She spoke of the need for continued links

with the voluntary/ community sector and the issue of funding. She referred to the limited information sources and the on-going work with Guidelines and Audit Implementation Network (GAIN) to support the base lining activity. Siobhan also referred to the requirement to incorporate Generic standards which she suggested had increased the number of standards by one third.

4.5 Dr McBride congratulated Fionnuala Mc Andrew and Siobhan Bogues on the development of Learning Disability Service Framework, commenting on unique inclusion of the service user perspective and the support available from other sectors in areas, such as, transition planning (Standard 12) and employment opportunities (Standard 14). Dr McBride invited comments.

4.6 There was some discussion on how to raise the profile of the Learning Disability Service Framework. Dr Livingstone suggested that in putting forward the Ministerial submission that reference is made to the Inter-Departmental Working Group. Dr McBride agreed that consideration would be given to raising the profile of the Service Frameworks particularly in terms of securing fuller collaboration of other Departments and sectors.
(Action Dr Livingstone)

4.7 Meave Hully queried the need to include the promotion of 'independence' in a number of standards. Siobhan advised that the Framework was underpinned by the values set out in Equal Lives (2005) and that 'independence' is a theme that runs through the entire Framework. Siobhan agreed to provide an amendment to reflect this.
(Action Bogues)

4.8 Members agreed that the Learning Disability Service Framework should be progressed for public consultation, subject to Ministerial approval, commencing in October 2012.
(Action P McGeown)

5. Service Framework for Mental Health and Wellbeing

Draft final document (SFPB/09/11)

- 5.1 Dr Livingstone spoke to this item.
- 5.2 Dr Livingstone thanked Maureen Ferris for developing this complex framework, which involved input from clinicians, managers, users, carers, community and voluntary groups. The HSCB has accepted that base lining in Year 1 would not incur implementation costs, affordability problems could arise in Year 2. Dr McBride also thanked Maureen, for her work on behalf of the Programme Board.
- 5.3 Maureen Ferris spoke of the complex challenges required to develop the framework using a template designed for the condition based service frameworks, while keeping to the aims of the Bamford Action Plan on Mental Health. Maureen stated that there had been 73 responses to the public consultation. All of these responses have been evaluated, and the framework updated as necessary. Comments from other agencies, for example, education and library boards, indicated a willingness to work in conjunction with the DHSSPS to help implement the standards. Opportunities for cross departmental / cross sectoral working are something that should be explored when developing service frameworks in the future. (Action All)
- 5.4 The monitoring of the standards will be much more challenging than for previous frameworks, as the Service Framework for Mental Health and Wellbeing is based on the recovery model, and therefore focuses more on the patient and their experiences. It is planned to monitor a number of standards using 'Sensemaker'. It will enable service users and carers to give qualitative information on the services that they are using. It will then

- be possible to turn this into quantitative data, therefore enabling commissioners to identify gaps in service provision, which in turn could lead to discussion with the Department regarding the allocation of resources. (Action Maureen Ferris)
- 5.5 Christine Jendoubi recommended that the Framework should include an indicator to measure the numbers of people with mental health problems who receive an appointment through the 'Card Before You Leave Scheme' but do not return for the appointment. Maeve Hully was of the view that this could not currently be measured, so it was agreed that the inclusion of this indicator would be considered at the second year of implementation of the Framework.
- 5.6 Angela McLernon, referring to the need to query Standard 45 'Perinatal Mental Health', stated that the definition of the perinatal period should be checked, as two definitions have been given; one of six months and the other of twelve months. She also raised concern that the audit of case notes was not a suitable data source as staff would not be able to complete such a large volume of work. She agreed to provide an alternative data source. (Action Angela Mc Lernon)
- 5.7 Dr McBride recommended that the Mental Health Service Framework should be launched on Mental Health Day on 10th October, by inclusion in the Minister's speech to be given at the event organised by the Health and Social Care Board event.
- 5.8 Mark Timoney queried if the standards included a reference to the concordance with the drug companies, which not only ensures that patients receive current treatments but provides for an assessment of the effectiveness of prescribed treatments. Maureen Ferris reported that only one drug company had responded to the public consultation.

5.9 The Board approved the Service Framework for Mental Health and Wellbeing for implementation, subject to Minister's approval.

(Action Service Framework Delivery Unit)

6. Service Framework Topic Selection (SFPB/10/11)

6.1 Dr Livingstone spoke to this item.

6.2 Having outlined the background to the Service Frameworks Dr Livingstone stated that the existing service frameworks would be completed by 2012. Therefore it was necessary to commence work on developing a new tranche of service frameworks, which could be evolved from the following options:

- taking forward the four remaining topics shortlisted in 2007:
 - Diabetes;
 - Sexual Health;
 - Musculoskeletal Disorders;
 - Physical and Sensory Impairment.

- Refreshing and updating the longer list of topics identified in 2007:
 - Unscheduled Care;
 - Long Term Conditions;
 - Palliative Care;
 - Pharmaceutical Services;
 - Health Improvement/Public Health;
 - Pain Services.

- Consideration needs to be given to the priorities identified in 2007, as it is inappropriate to assume that they will have the same merit

today. Although this provides the opportunity to explore new areas for service framework development, the identification of topics in 2007 may have raised expectations that each topic in its turn will be progressed. (Action Service Framework Delivery Unit)

- 6.3 Dr Livingstone indicated that finalising the existing service frameworks and staffing pressures within the Safety, Quality and Standards Directorate could impact upon the resources available to manage further service framework development, possibly delaying the development of a new tranche until 2013. Members agreed that these difficulties could be overcome if the DHSSPS, HSCB and PHA collaborated to facilitate the development of future service frameworks, although the DHSSPS would retain ownership of the service frameworks.
- 6.4 Dr Livingstone commented on the need to forward a submission to Minister, seeking his endorsement to develop new service frameworks.
- 6.5 The Board accepted that Service Frameworks have gained acceptance as an efficient means of delivering services within existing resources and expectations have been raised amongst stakeholders regarding future developments. Dr McBride iterated the need to commence the next round of service framework development in 2012. Members agreed to the following:
- plan for the review of new topics to commence January 2012, including stakeholder engagement;
 - new frameworks should reflect long term conditions, not solely specific diseases;
 - the Programme Board will endorse topics for new service frameworks;
 - submission to Minister, to seek his endorsement of the new wave;

- consideration is to be given to the closer co-operation between the DHSSPS, HSCB and PHA to facilitate the development of future service frameworks. (Action Service Framework Delivery Unit)

7 Any other Business

7.1 There was no other business.

8 Date of next meeting

8.1 The next meeting will be held in January 2012, date to be confirmed.