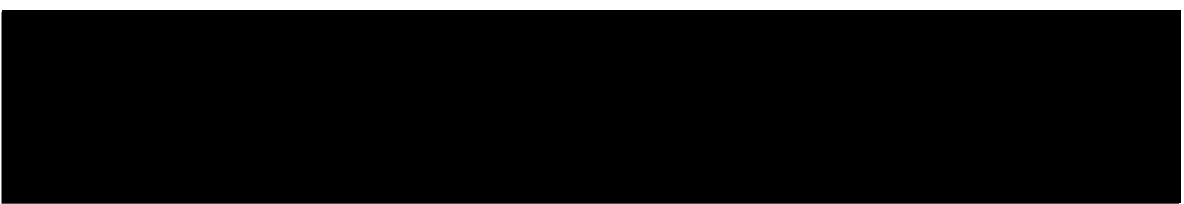


**CMO MEETING with
MEDICAL DIRECTORS / DIRECTORS OF PUBLIC HEALTH
7th September 2009
C3.18, CASTLE BUILDINGS, STORMONT**

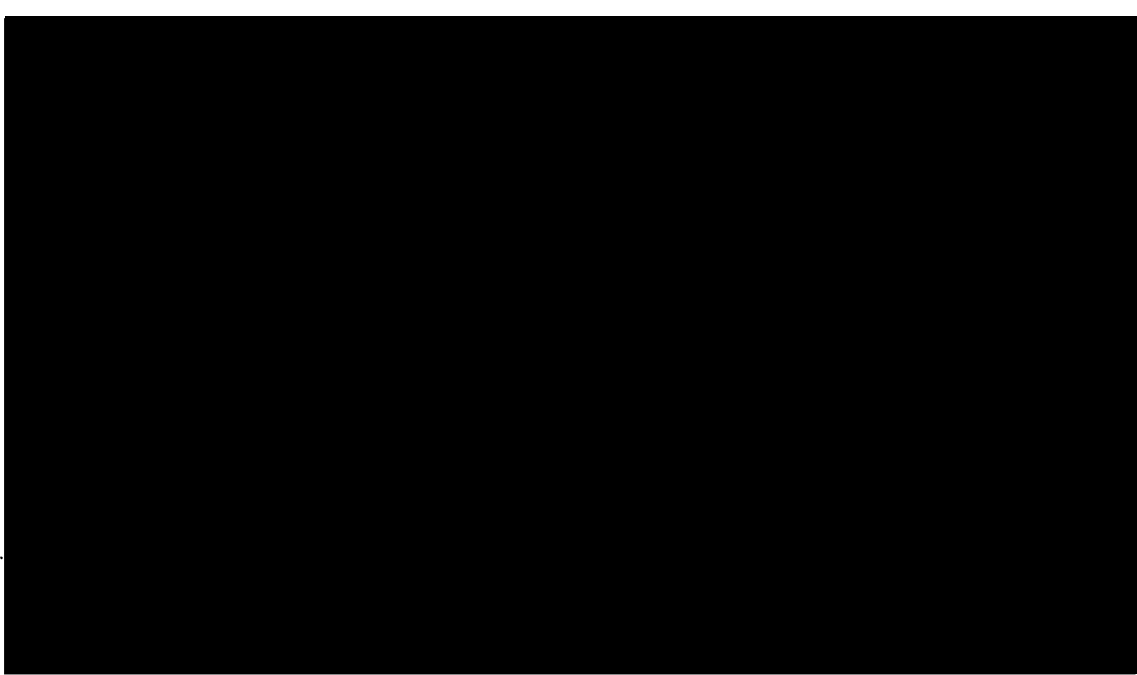
PRESENT		DEPARTMENT
Dr Paddy Loughran	Southern HSC Trust	Dr Michael McBride (Chair)
Dr Peter Flanagan	Northern HSC Trust	Dr Liz Mitchell
Dr Charlie Martyn	South Eastern HSC Trust	Dr Sloan Harper
Dr Tony Stevens	Belfast HSC Trust	Dr Ian McMaster
Dr Carolyn Harper	Public Health Agency	Dr Martin Donnelly
Dr John Jenkins	(QUB)	
Dr Terry McMurray	NIMDTA	
Dr David Stewart	RQIA	Dr Delia Skan
Dr D McManus	NI Ambulance	Dr Jim Livingstone
Paddy Johnson	(QUB)	Dean Sullivan

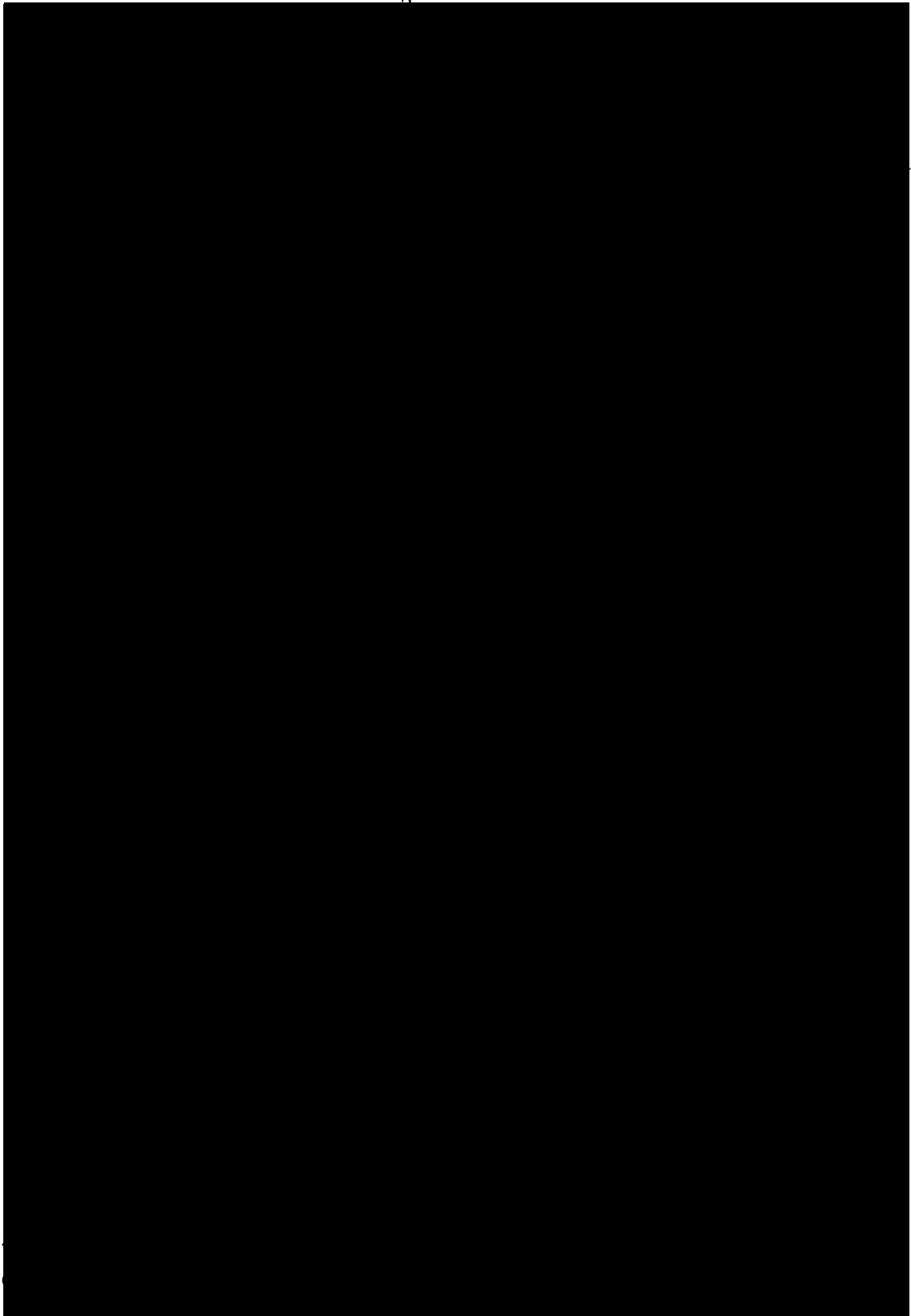
1 Welcome and Apologies



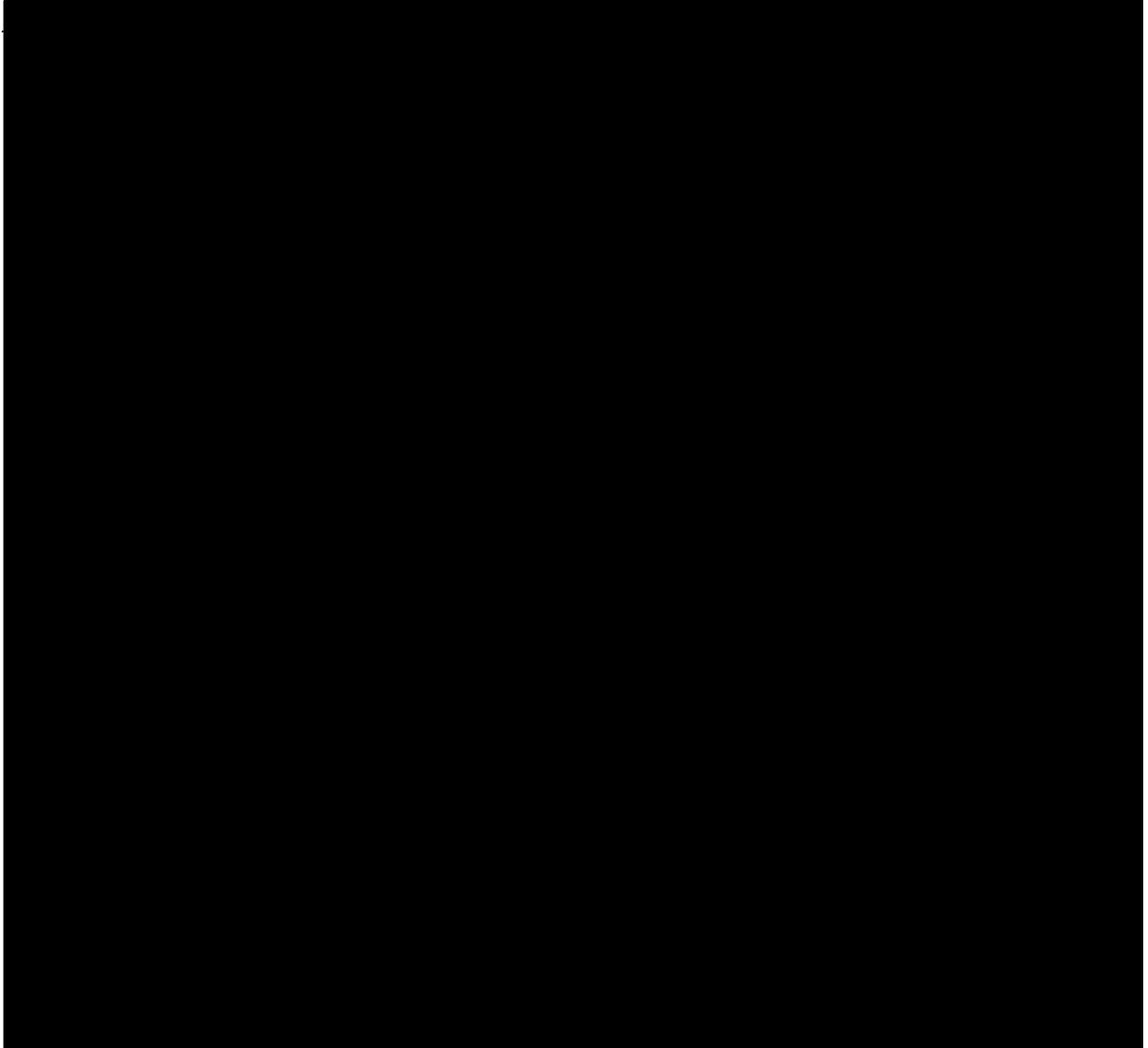
PART 1 - STRATEGIC ISSUES

2 Pandemic Flu





3 Mental Health (Copy Slides Attached)



4 Quality

Development of 10 Year Strategy

Dr Livingstone outlined that in July 2009 the Minister had approved the development of a 10-year Quality Strategy for the integrated Health & Social Care system. The aim of this strategy, to be implemented from April 2011, is to develop a framework that can deliver continued improvement and highest quality of services to HSC patients, clients, and their carers, in terms of safety, effectiveness and patient/client experience that is affordable, deliverable, and soundly evidence-based over the 10 years to 2020.

As part of the development process, it is planned to run three full-day workshops over the next 6 months. These will involve the participation of up to 100 stakeholders from a wide range of health and social care settings in Northern Ireland (including patients, carers, front-line and HQ staff, planners and policy makers) to address the three key components of quality - namely

safety, effectiveness or standards, and patient/client experience, and develop a vision and strategy for the period up to 2020. Each of these components will be considered in terms of the current position in Northern Ireland, the vision for the future, and how this vision may be achieved and managed.

There will be a preliminary review of current literature in the field of quality in health and social care has identified eight overarching themes which cut across all three of the key quality dimensions:

- Quality metrics
- National/ international best practice
- Technology and the patient/ client
- Education and training (workforce development)
- Learning
- Accountability and governance
- Culture change
- Service design

An External Reference Group will be established to provide feedback to the Project Team on products/deliverables. This will bring a national and international perspective that can provide a helpful challenge to conventional thinking or confirm merits of proposals. Members will largely operate in the form of a "virtual" group (i.e. by email). Members will be senior policy and professional officials in GB healthcare systems, distinguished international academics, policy makers and clinicians associated with quality improvement. The group will operate in a 'virtual' mode communicating largely by email.

It is aimed to provide a paper in May 2010 to Minister for Public Consultation.

Development of Regional Adverse Incident Learning (RAIL) System – Update

Dr Livingstone advised that the Minister and Departmental Board had approved the RAIL system and that interim guidance has been issued to the HSC.

It is envisaged that final guidance will be issued shortly and that responsibility for adverse incidents will transfer from the Department to the HSC at the end of October 2009. A response from the HSC Board is awaited to effect this change.

Costs of Service Improvement

Dr Stevens expressed concerns about the cost of service improvements to Trusts. Some improvements are unaffordable and/or not costed. There were for example no identified funds for prevention of Venous Thromboembolism (VTE). RQIA activity and mandatory training such as

hyponatraemia is resulting in costs to trusts. There was also concern that all Departmental circulars will be performance managed by the HSC Board.

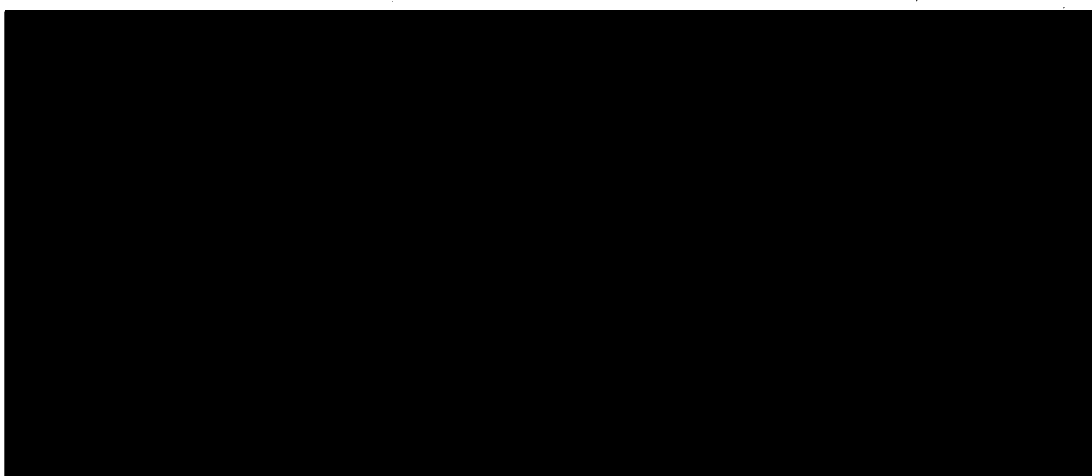
It was hoped that the Quality Strategy would simplify the system and allow Health & Social Care organisations to influence and agree priorities

Dr McBride advised that a paper from the Health Foundation "Does Improvement in Quality Save Money?" was good for reference in this field.

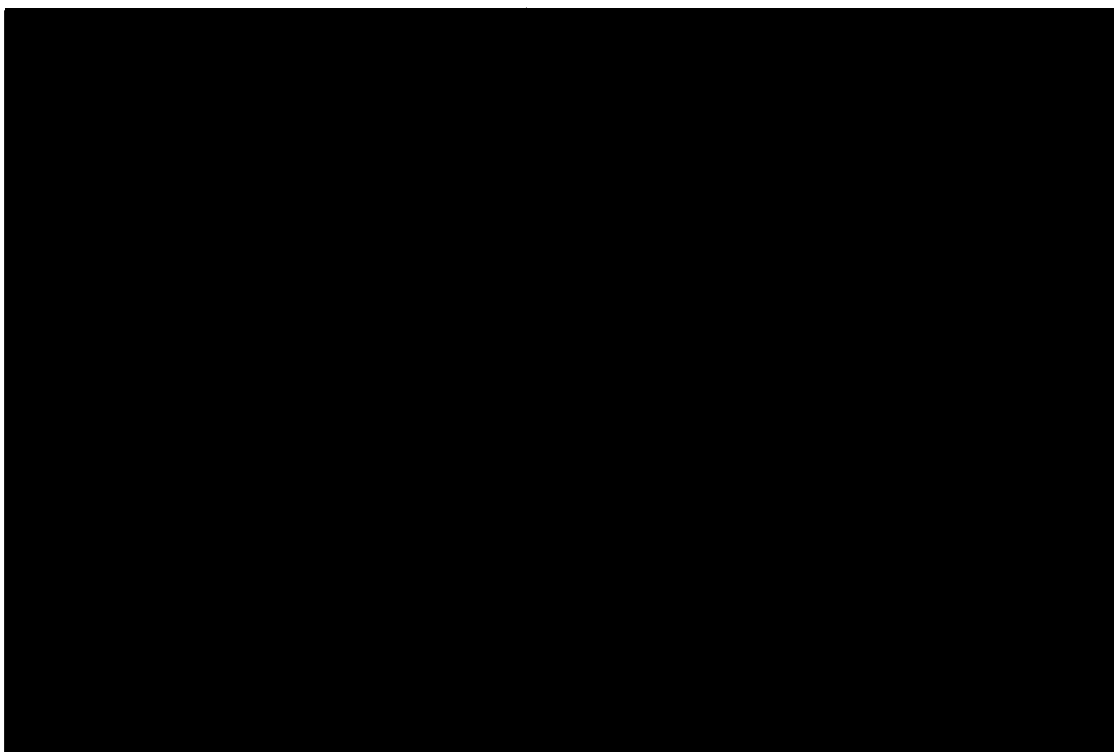
Despite pressure and constraints there is a need to make sure that this important area is appropriately addressed.

PART 2 - REACTIVE ISSUES

5 Minutes of Previous Meeting

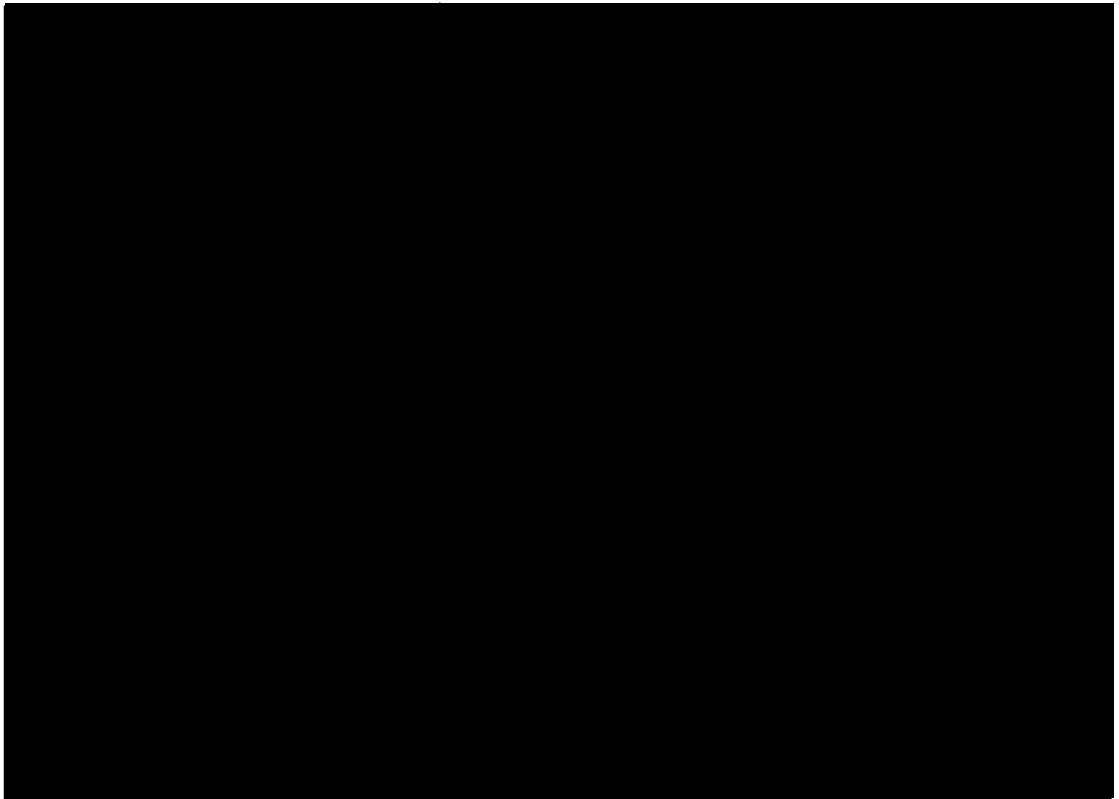


6 Update on Outstanding Action Points



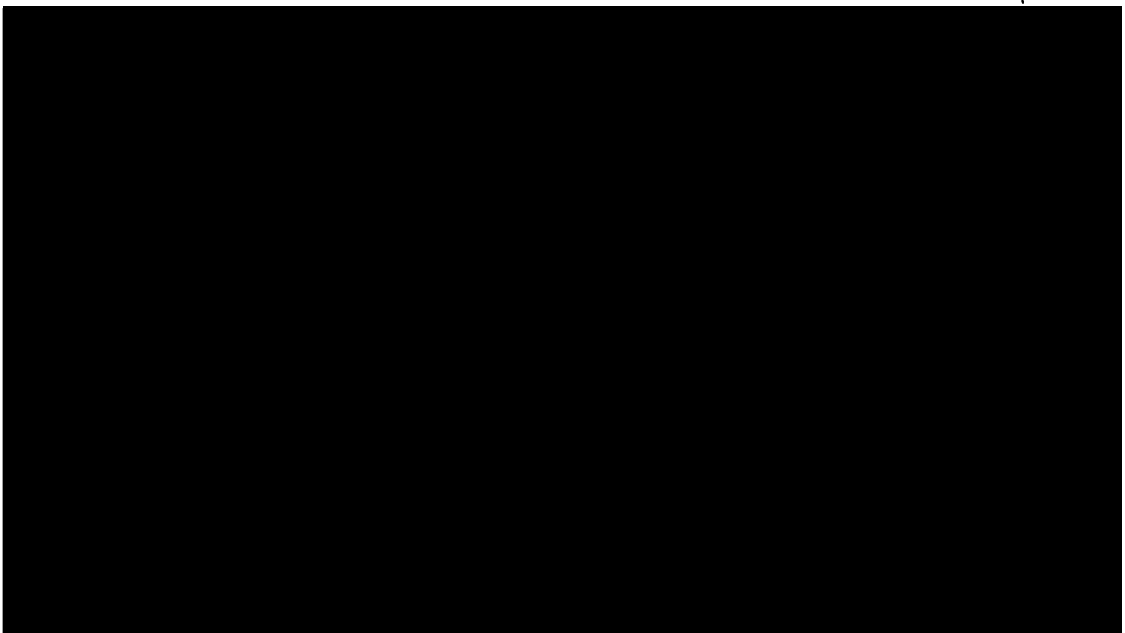


7 Occupational Health Service Project Board

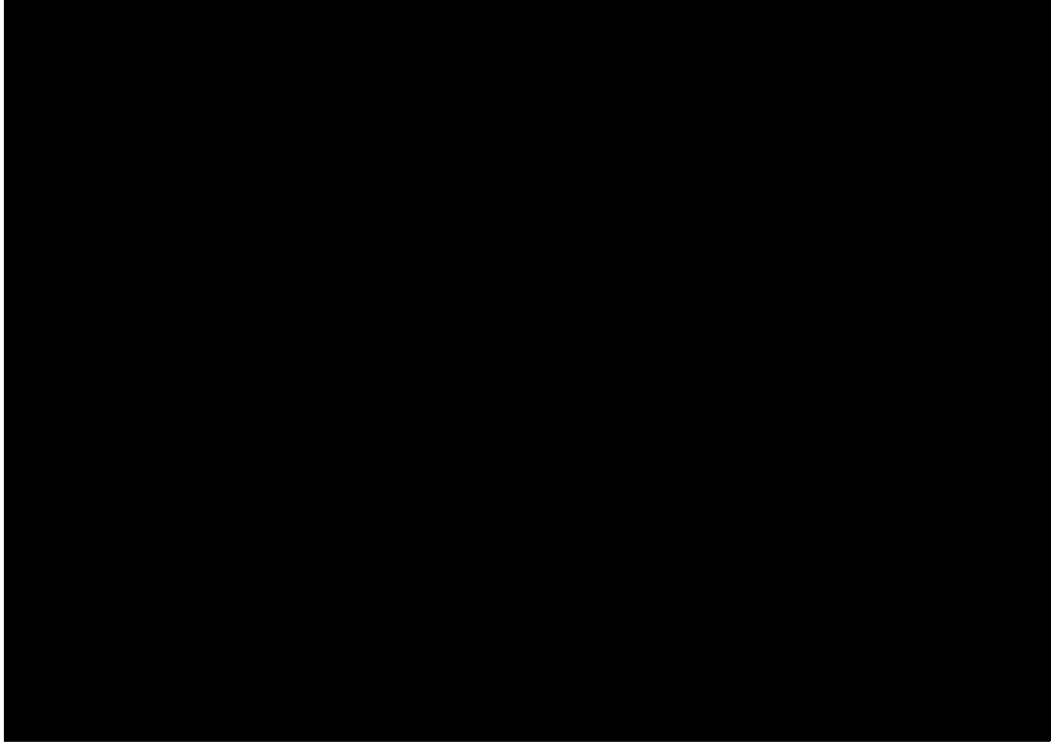


8 NIMDTA - TRUSTS

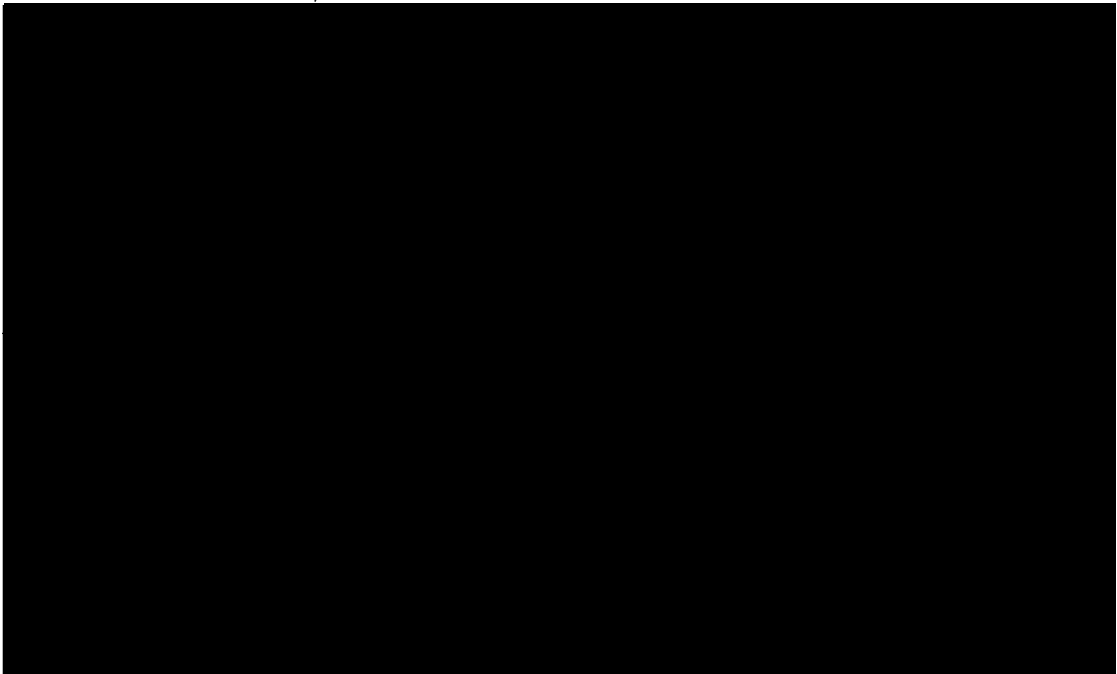
GP Trainees doing Locum Work



I
Training of Doctors – Regional Solutions



9 AOB



Next Meeting – 2nd November 2009
Strategic Issue - TBC