

## **Area Clinical Forum (ACF) Report to the NHS Grampian Board Forum meeting on 16 January 2019**

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Following the ACF meeting on the 16<sup>th</sup> of January 2019 the ACF would like the Board to note the following points.

### **Waiting times improvement plan**

The ACF welcomed Fiona Francey, General Manager Acute, to the meeting to discuss the national waiting times improvement plan (Oct 2018) document with reference to the NHS Grampian position. The ACF are concerned about the targets which have been set nationally for October 2019/ October 2020 and Spring 2021 and how these can be achieved when the Board continue to have challenges around the availability of key staff.

### **Orthoptic child screening programme**

For the past 7 years the NHS Grampian Orthoptic Team has been delivering a Grampian-wide Pre-School Orthoptic Vision Screening programme (POVS), in line with the HALL 4 report, operating to the “gold standard” whereby children are screened in the nursery setting and referred to the hospital based optometrists/ophthalmologists for further assessment/treatment where necessary. Approximately 5000 children are screened by the Orthoptic team every school year. 100% of all pre-school age children are offered vision screening and the analysis of national data for the past 3 years has shown an uptake of 84%. The POVS programme in NHS Scotland is the only vision screening a child will have in their lifetime unless a parent/carer actively takes them to an optician or seeks referral to Hospital Eye Service (HES). Many eye conditions have no symptoms and if not detected and treated early can lead to lifelong problems with literacy, quality of life and potentially increase a child’s risk of blindness. Undetected vision problems will also result in an increase in “false” referrals to other services in the future.

The POVS programme has faced challenges recently when it was decided to change the current “opt-out” consent model to “opt in” following GDPR. This change will have a significant detrimental effect on overall uptake locally and nationally, particular in areas of deprivation, where it has been shown that children will have a higher incidence of vision problems and are less likely to comply with treatment and attend appointments.

Since the meeting NSS have made the decision that POVS should return to ‘opt-out’ consent model nationally. Grampian are still in the ‘opt-in’ model whilst the revised consent form is awaited.

## **Research/ Clinical Academic Programmes**

Following discussion at the previous ACF meeting (Nov 18) a short report was submitted to the Board from the ACF agreeing with the need to develop a clear and robust strategy for research along with a strong commitment to research and collaborative working. Members of the ACF(at this meeting and in Nov. 2018)discussed the issue that there has been some loss in clinical academic programmes and the ACF are very keen that reasons for this are explored. At this point the ACF would like to raise this as a concern to the board.

## **Gosport Report**

The ACF provided some feedback to the Board on issues relating to the Gosport Report and the implications for each clinical group. Following this short report it was decided that the Senior Leadership Team (SLT) should continue the discussion with the ACF committee and this will happen in the near future.

## **Transcatheter Aortic Valve Implantation (TAVI) service**

The Healthcare Scientist Group raised a concern over the TAVI service and the fact that ARI is the only centre in the UK which has a cardiothoracic service but not a TAVI service. The discussions which are ongoing with the National Planning Board were noted and the ACF is fully supportive of the implementation of this service in the North of Scotland.

**Kim Cruttenden**  
**ACF Chair**  
**January 2019**