

Cross-Party Group on Women's Health

25.10.22 12:45-14:00

Minute

Present

MSPs

Monica Lennon MSP

Carol Mochan MSP

Invited guests

Dr Kirsty Munro

Mr Marek Zemanik

Dr Rosie Illett

Non-MSP Group Members

Alice Murray, Office of Monica Lennon

MSP

Dr Jonathon Sher, Queens Nursing

Institute Scotland

Dr Rosie Illett, Federation of Sexual and

Reproductive Health, Scotland

Pat McKenzie, Rebecca Taylor and

Emma Cox, Endometriosis UK

Dorothy-Grace Elder – individual

Tara Bachoo – individual

Hazel Gardiner, NASUWT Endometriosis

Representative for Scotland

Livvi Brooks, Bloody Amazing

Eileen Cawley, Scottish Pensioners

Forum

Kate Sang – individual

Emily Hindmarch, Cancer Research UK

Jen Stewart, Alliance Scotland

Rowan Anderson, Corra

George Hannah, CIPD

Gillian McElroy, Alliance Scotland

Jessica Potter, Target Ovarian Cancer

Agnes Tolmie – Scottish Women's

Convention

Apologies

Emma Roddick MSP

Rachael Hamilton MSP

Agenda item 1 AGM Business

Election of office bearers Monica Lennon MSP (Dr Jonathan Sher proposed, Carol Mochan MSP seconded) was re-elected as Convener.

Rachael Hamilton MSP (Monica Lennon proposed, Carol Mochan seconded) was re-elected as Deputy Convener

Membership The following were admitted to CPG membership

- Kirsteen Campbell, North Highland Women's Hub

Hannah Louise, That Monthly Thing

Elizabeth Moore, individual

Emma Keyes, individual

Endometriosis UK

Purpose of the group – no changes proposed. This was approved.

Secretariat Endometriosis UK approved as Secretariat for the group.

Any other AGM business There was no AOB

Agenda item 2 General Meeting

1. Introduction

2. Matters arising

- Matters arising from the last meeting held on 15 June 2022
- Approval of minutes of the meeting of 15 June 2022

Minutes to be shared with CPG members for review.

No matters arising from the last meeting were discussed.

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Agenda item 3 Women's Health Plan – one year on

Dr Kirsty Munro, Consultant Gynaecologist from NHS Lothian spoke about the commitments on endometriosis in the WHP and the current situation on the NHS frontline

Commitments include reducing diagnosis time, new endometriosis care pathway, developing care pathways for endometriosis outside the pelvic cavity, strengthening collaborative working between endometriosis centres, health boards and primary care providers and designated research funding for endometriosis.

In relation to diagnosis, the concept of “working diagnosis” is being developed which can help those who do not want a diagnostic laparoscopy or those waiting to get one.

The idea of having one endometriosis centres in Scotland treating those with thoracic endometriosis is being considered. o Network meetings to strengthen collaboration on endometriosis across primary, secondary, and tertiary care will be re-established.

Scottish Govt established a £250k fund in collaboration with Wellbeing of Women for endometriosis research and a call for projects to improve diagnosis or treatment has already been published.

Waiting times are still an issue in gynaecology and endometriosis specialist centres, despite some services being back up to pre-pandemic capacity

Mr Marek Zemanik, Senior Public Policy Adviser, CIPD Scotland spoke about the work the organisation is doing on menopause in the workplace, a menopause priority of the WHP: o Menopause is recognised as a key workplace issue in Scotland, affecting an estimated 320,000.

Menopause symptoms can sometimes be severe enough to leave women unable to work.

Many women feel unable to tell their employer that menopause is the reason for absence from work or poor health. o Changing this requires education/training and a change of culture to break taboos and challenge stigma. o Scotland needs more menopause friendly workplaces. o CIPD's "Let's talk menopause" initiative:

<https://www.cipd.co.uk/knowledge/culture/well-being/menopause> Dr Rosie Ilett, Faculty of Sexual & Reproductive Health Scotland, spoke about the measures designed to improve access to contraception in the WHP: o Sexual health framework is expected in March 2023.

WHP seeks to expand access to contraception including via video consultations. o NHS Inform content on contraception has been updated.

Community pharmacies will be able to supply bridging contraception. There was then a discussion among CPG members and the following points were raised:

Tara Bachoo noted the need for education around menstrual health including endometriosis, as a way to reduce 7-year diagnosis times. The "pregnancy cure" myth still exists, and symptoms are often dismissed by GPs. o Monica Lennon MSP noted that targets on reducing diagnosis time in the WHP are ambitious.

Dr Kirsty Munroe said she couldn't comment on primary care, but in gynaecology/specialist centres, symptoms are taken seriously. Waiting times for diagnostic laparoscopy are a problem and won't be solved soon.

Gillian Forbes explained that a sexual health nurse in the borders reported that the shortage of GPs makes contraceptive services difficult to deliver. There is a particular problem with LARC (long-acting reversible contraception). o Hazel Gardiner asked about working diagnosis for endometriosis and Dr Kirsty Munroe explained that it is for those who do not want a diagnostic laparoscopy.

In relation to menstrual wellbeing education, Monica Lennon MSP flagged that although it is in the WHP, the RHSP resources on menstrual health had not yet been refreshed. o Monica Lennon MSP reported that the National Women's Health Champion for Scotland was supposed to have been appointed in "summer", but as it is now October that is clearly behind schedule. Monica promised to make inquiries.

Agenda item 4 Date of Next Meeting

TBC Via Email

