

Scottish Health Council News

Issue 4 Spring 2007

Forum funding gets public involved

Public Partnership Forums across Scotland are helping to forge closer links between healthcare providers and the public – with a little help from the Scottish Health Council.

As part of its role in helping NHS Boards to develop the way they work with the public, the Scottish Health Council has provided grants of £5,000 to each of Scotland's Community Health Partnerships to assist with the establishment of Public Partnership Forums.

The Clackmannanshire Public Partnership Forum – one of three forums in NHS Forth Valley – has been putting the money to good use, funding an awareness leaflet and equipment including a radio microphone and portable screen for use at forum meetings.

The forum also recently staged a health fair in Alloa Town Hall, titled 'Putting the Heart into Health Matters', which brought together groups from the voluntary sector and NHS Forth Valley to raise awareness of how to lead a healthier lifestyle.



Visitors to the health fair sample free fruit and vegetables

A tai-chi class, aromatherapy sessions, blood pressure checks and stalls promoting healthy eating were provided at the all-day event, and NHS Forth Valley health promotion representatives were on hand to give advice on a range of issues including sexual health and smoking.

The health fair was such a success that it's now been confirmed as an annual event, with the next one due to take place on 14 February 2008.

Public Partnership Forums are being set up in every NHS Board

area in Scotland to give the public a voice within NHS Boards' Community Health Partnerships.

The Clackmannanshire Public Partnership Forum, which was established in May 2005, holds open meetings every two months and has discussed a range of local issues including the redesign of podiatry services within NHS Forth Valley, Clackmannanshire Community Health Facility, the new community pharmacy contract and the new acute hospital due to open in Larbert in 2009.

Update from the Director

Regular readers of 'Scottish Health Council News' may detect an editorial change of direction in this issue.

In previous issues we have focused largely on the establishment of the Scottish Health Council and the work we have done since our launch in April 2005 to ensure that people have a real say in health services.

However, while the Scottish Health Council clearly has a key role in ensuring the public and patients have a voice, we are only part of the equation in the wider Patient Focus and Public Involvement agenda.

Real partnership between NHSScotland and communities

- with genuine consultation – requires the active support and engagement of healthcare professionals, patients, carers, voluntary groups and the public.

This is why we've decided to broaden our scope and develop this newsletter as a channel for promoting the wider Patient Focus and Public Involvement agenda in Scotland, highlighting current issues, case studies, legislation and opinion, while still reporting on the work of the Scottish Health Council in the wider context.

More changes will be on the way as the newsletter – and the Scottish Health Council – continue to evolve. If you have any



Richard Norris

comments on our new direction, or you want to highlight an example of patient involvement, please email us at editor@scottishhealthcouncil.org

New booklet for patients unhappy with their doctor

A new booklet for patients in Scotland has been published by the General Medical Council, explaining what to do if they are unhappy with their doctor's medical practice.

The General Medical Council has produced the information as part of an ongoing campaign to improve patients' access to information about its procedures. The leaflet will be sent to all NHS complaints officers in Scotland to assist them in advising patients who have concerns about individual doctors.

Most complaints about the NHS are dealt with through the NHS Complaints procedure, and information about this is provided by Health Rights Information Scotland for use throughout the NHS. The General Medical Council booklet is designed to sit alongside this information, and offers patients advice about what to do if they think their doctor is not fit to practise or may be a risk to patients. It includes a number to call if patients want to discuss their concern or are not sure whether to report a doctor.

The booklet also includes information for patients about other organisations in Scotland, including the Independent Advice and Support Service and the Scottish Public Services Ombudsman that can offer advice and support in relation to their complaint.

Copies of the booklet can be obtained from the General Medical Council, 5th floor, The Tun, 4 Jackson's Entry, Holyrood Road, Edinburgh EH8 8PJ (Telephone 0131 525 8700).

Scottish Executive launches patient experience programme

The Scottish Executive has launched a major new programme to get more detail on patients' experiences of the services they receive and how they can be improved.

Building on existing work – including information gathered by the Scottish Health Council – patients will be asked about their experiences of services ranging from, for example, whether they are involved in decision making about their care, have their preferences respected, and how they view the quality of hospital accommodation.

All of this information will be used, as part of NHS Boards' existing programmes of work, supported by the Scottish Health Council and NHS Quality Improvement Scotland, to drive forward year-on-year improvement in patient experience on the ground.

Health Minister Andy Kerr said: "Providing the best quality treatment and care for our patients is the top priority for NHS Scotland and patients' views are vital to health professionals in improving the services they provide.

"There are already a number of useful surveys and other research carried out at local and national level, and these show that patients value the service they get from the NHS.

"NHS Boards act upon information about issues needing addressed, such as from the Scottish Health Council and the Scottish Public Services Ombudsman. I want to ensure that good practice is shared, and also that lessons from one part of the country are learned across the rest of Scotland.

"That is why we are developing this major programme in

partnership with NHS Boards and other organisations, to tie together what we know already, to seek further information from patients and carers about their own experiences and inform changes that deliver real benefit in improving patient care."

Brian Beacom, Chairman of the Scottish Health Council said: "By listening to patients and learning from their own experiences of what in their view works and what doesn't work, we can ensure that services consistently improve and meet their needs.

"The Scottish Health Council is committed to ensuring that patients have a real say in health services and we welcome the development of this programme which we believe will build on the good work already being done by NHS Boards across Scotland."

The Gender Equality Duty – What will it mean for the NHS in Scotland?



On 6th April 2007, the **Gender Equality Duty (GED)**, the biggest change to sex equality legislation since the Sex Discrimination Act, came into force. The duty means that all listed public bodies, including the NHS in Scotland, need to demonstrate that they are treating men and women, including transsexual people, equally.

Under existing law, a person who feels they have been treated unfairly must prove discrimination in an employment tribunal. From 6 April 2007, the responsibility falls onto NHS Boards to ensure they are actively promoting gender equality. The NHS in Scotland will be expected to:

- eliminate unlawful sex discrimination and harassment
- promote equality of opportunity between women and men.

NHS Boards in Scotland will have to ensure the design, development and delivery of services are responsive to the different needs of girls and boys, women and men, including transsexual people. The duty applies to both staff and service users across primary, secondary and tertiary care.

From now on, the NHS as an employer needs to consider its employment practices and the wide range of staff needs including training, promotion, equal access and equal pay. Gender equality needs to be built into planning services, recruitment, staff management, training, delivery of care, audit of services, monitoring and evaluation. The Gender Equality Duty should also generate employment practices that challenge occupational segregation and remove the barriers to women reaching their potential, such as a lack of flexible working.

Fair For All – Gender, a partnership project between the Equal Opportunities Commission Scotland and NHSScotland, is supporting NHS Boards to implement the Gender Equality Duty so that positive outcomes for service users and staff are provided, through actions rather than processes.

To meet the duty, Scottish NHS Boards will be required to:

01. Gather information on how their work affects women and men.
02. Consult employees, service users, trade unions and other stakeholders.
03. Assess the different impact of policies and practices on women and men and use this information to inform their work.
04. Identify priorities and set gender equality objectives.
05. Plan and take action to achieve gender equality objectives.
06. Publish a gender equality scheme, report annually and review progress every three years.
07. Publish an equal pay statement (if they employ over 150 staff) and report on progress every three years.

An NHS-focused gender guidance document is now available to help NHS Boards deliver gender schemes to promote equality and service improvements at www.eoc.org.uk/fairforallgender

For further information contact Marese O'Reilly at Fair for All – Gender on 0141 245 1817.

Annual review praise for the Scottish Health Council

The Scottish Health Council has an important role in ensuring that patients have an influential voice in the future development of services they use and decisions about their own care.

That was the view of the Minister for Health and Community Care Andy Kerr as he presided over the first annual review of the Scottish Health Council in January.

Scottish Health Council Chairman Brian Beacom gave a

presentation outlining the organisation's functions and achievements in its first year before answering questions from the Minister and Scottish Executive officials. Scottish Health Council Director Richard Norris and other members of the senior management team were also on hand to answer questions.

The Minister for Health and Community Care decided to review the Scottish Health Council in public on the same basis as he

reviews NHS Boards and met with NHS staff and patients to hear how they feel the Scottish Health Council has performed in its first full year.

Brian Beacom said: "This was a valuable opportunity for us to share our progress to date and future plans with the Minister. I'm very pleased that he recognises the real progress we have made in our first year and values our contribution in improving the way NHSScotland engages with the public."

New self assessment tool for NHS Boards

The Scottish Health Council has revised the way it assesses how NHS Boards are involving patients, carers and the public in health services.

NHS Boards will now have to fill out a new self-assessment tool, which is closely aligned with key healthcare targets set by the Health Minister.

Under the new approach, the Scottish Health Council will gather information from NHS Boards on how they have worked with local communities to meet a range of existing targets, covering everything from gathering patient experience and complaints to smoking cessation

and waiting times.

As with last year, the Scottish Health Council's reviews will feed into the Health Minister's Annual Review for each NHS Board.

Scottish Health Council Assessment and Feedback Manager Richard Brewster said: "Last year was the first year that the Scottish Health Council assessed NHS Boards and, while the information we gathered was extremely useful, it was difficult to build a comprehensive national picture because it was at NHS Boards' discretion as to the examples of Patient Focus and Public Involvement they submitted.

"This new approach means that we will be assessing all NHS Boards across the same targets, while still giving them the opportunity to highlight particular initiatives they have developed to involve the public in their work.

"By placing a much stronger emphasis on the use of explicit measures and on helping NHS Boards to identify and develop areas where they can provide more patient-focused services, this should make it easier to deliver year-on-year improvements and to demonstrate they have been delivered."

Hearing aid service hears patients



NHS Shetland audiologist Jackie Haywood and Head of Clinical Physiology Chris Brown

Chris Brown, Head of Clinical Physiology at NHS Shetland, outlines how patients have played their part in revolutionising audiology services in the islands.

■ Prior to 2004 the deaf and hard-of-hearing community in Shetland had to make do with a visiting service that came to the islands once every two months from Aberdeen. However, that year saw NHS Shetland receive funding to build a new audiology department and employ a full time audiologist.

Following an initial public meeting, we set up an audiological working group made up of people with hearing difficulties and healthcare professionals.

By bringing together service providers and prospective users in this way, we were able to give patients direct influence in shaping services. For example, hearing aid users wanted a department that was able to accommodate children and the draft plans were altered accordingly.

By May 2005, a brand new fully equipped department was in place and a full-time audiologist, Jackie Haywood, in post.

Jackie and I spent the next six months developing the service to fit the local community. The working group meetings continued and a process mapping exercise was held with members of the deaf and hard-of-hearing community. This provided a step-by-step guide through the patient journey from the time they think they may have a hearing problem to them being fitted with the appropriate hearing aid.

We then devised local patient pathways to meet the specific needs and circumstances of patients in Shetland, removing any unnecessary steps in the process.

Not only had patients and health service staff been given the opportunity to discuss the best way to run the service,

everyone was aware of what would happen at each point on the patient journey.

The service formally opened in October 2005 and we continue to hold regular meetings with local service users.

Our latest initiative is a full day's deaf awareness training for NHS staff. This involves hearing aid users giving their experience of being deaf and hard of hearing to those attending the training. Delegates also have their ears blocked up for two hours to give them first hand understanding of what it is like to be hard of hearing. Initial feedback from delegates has been excellent and we hope they will take what they have learned back to the workplace and make a real difference for patients.

The revamped service has brought dramatic results. In the pre-modernised service patients were offered one hearing aid (a unilateral fitting). In the vast majority of cases this was an analogue hearing aid just like an old hi-fi amplifier. In the modernised service the patient is offered a hearing aid for each ear if they are required (a bilateral fitting).

Forthcoming Events

MAY

Wednesday 16 May

Institute of Healthcare Management Scotland

1 Day Seminar – Handling Complaints

Westerwood Hotel, Cumbernauld

For further information visit <http://www.ihmscotland.co.uk>

Sexual Health:

What Progress Two Years After Respect & Responsibility?

For further information visit <http://www.holyrood.com/conference.asp>

Fife Stroke Network Public Involvement Event

for patients & carers

Roths Hall, Glenrothes.

For further information visit www.dwfchp.scot.nhs.uk

Thursday 31 May

Disability Equality Duty Information Sessions

Edinburgh

For further information visit www.drc-gb.org

JUNE

Tuesday 12 June and Wednesday 13 June

Delivering Healthcare for the 21st Century – NHSScotland Event

SECC Glasgow

For further information visit www.nhsscotlandevent.com

Thursday 14 June

Scottish Health Council meeting

Inverness (venue to be confirmed)

For further details contact Catherine Tait

tel: 0141 225 6899,

email: catherine.tait@scottishhealthcouncil.org

Disability Equality Duty Information Sessions

Oban

For further information visit www.drc-gb.org

Wednesday 20 June

Scottish Health Council Grampian Office 'Hard-to-Reach' event

For further details contact Elaine Cardno (tel: 01224 559 444,

email elaine.cardno@scottishhealthcouncil.org)

Thursday 21 June and Friday 22 June

Robert Gordon University research findings on Health & Homelessness in Aberdeen City & Health & Ethnicity in Aberdeenshire.

Robert Gordon University, Aberdeen.

For further details contact Rosemary Hill (tel:0141 225 6876,

email: rosemary.hill@scottishhealthcouncil.org)

Nowadays the hearing aid invariably uses digital computer technology so the audiologist can fine-tune the hearing aid to each individual.

In the first year of the new service 190 patients have been fitted with digital hearing aids and around two-thirds of them were bilateral – a long way from the 45 unilateral analogue aids of the pre-modernised service. Jackie has also expanded the service to include Tinnitus and Balance clinics.

Throughout this project we have met regularly with hearing aid users from the working group. For those of us who do not use hearing aids this has been a great help in enabling us to remain focused on the patients, while ensuring that members of the deaf and hard-of-hearing community are kept informed and able to influence developments. ▀▀

For further information on this and other case studies highlighting good examples of patient involvement from around Scotland, see the 'Case Studies' section at www.scottishhealthcouncil.org

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You can read and download this newsletter – and other information about the Scottish Health Council – from our website at www.scottishhealthcouncil.org. We can also provide this information:

- by email
- in large print
- on audio tape or CD
- in Braille, and
- in community languages.

We welcome your comments and views on this newsletter – please contact Rob MacPhail, tel 0141 225 6992, email editor@scottishhealthcouncil.org