

# **SCOTTISH HEALTH COUNCIL**

## **Minutes of the meeting of the Scottish Health Council held on Thursday 08 December, 2005**

Present: Brian Beacom, Chairman  
Kate Alexander  
Anne Brown  
Sue Kinsey  
Agnes Robson

In Attendance: Richard Norris, Director  
Catherine Tait, PA to Director and Chairman

### **1 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Jacquie Malcolm and Irene Garden.

### **2 CHAIRMAN'S REPORT**

The Chairman provided a brief verbal report on a conference he attended and spoke at with the Royal College of Nursing. He spoke about patient experience and informed members he has been invited back to speak again at a future date.

The Chairman attended a briefing session with the Minister for Health discussing the Kerr Report. Mr Woods stated work will need to be carried out and that there will need to be local services where particular treatments and services are required. The overall feeling is that patients will be happy with this especially if they can be treated locally by a specialist.

The Chairman met with Pennie Taylor who is Chair of the group consulting on new boundaries for Argyll & Clyde following the dissolution of NHS Argyll & Clyde.

The Bridge of Allan Development event was worthwhile and feedback has been positive. However, future venues will be visited by a Scottish Health Council representative to confirm the venue is accessible and can provide suitable facilities.

The Chairman and Director have met with the Chief Executive in Highland and this meeting was very useful. There are issues around maternity services with proposals to make changes in Caithness and Wick. The local clinicians took the same view of local people that there is a risk of patients travelling 80 miles.

It was agreed it would be useful to obtain a report on maternity services consultation from Highland.

**Action:** Obtain report from Highland on maternity services.

The Chairman and Director have met with John McGuigan, Chief Executive, NHS 24 who has welcomed the opportunity for Patient Focus and Public Involvement.

### 3 MINUTES

The minutes of the meeting held on 13 October, 2005 were approved by Council as an accurate record subject to the following minor amendment

Page 5 - No 9
Location of Sick Children's Hospital in Glasgow to read:
Location of Sick Children's Hospital & Replacement of Queen Mother's Hospital in Glasgow

The Chairman advised that when draft minutes are distributed these are for information only and any amendments require to be advised at the council meeting.

### 4 MATTERS ARISING FROM PREVIOUS MEETING

Members asked how commissioning is being carried out on the making of the Scottish Health Council promotional DVD and have concern about losing time if this is not being project managed. The Director highlighted in his report that a company will be commissioned to act as intermediary with production companies and to project manage the production of this DVD. Details of this will be circulated to members for their information.

**Action:** Richard Norris will circulate a note to members once this has been updated by Rosemary Hill who is leading on this

Anne Brown raised the issue that old literature is still displayed in NHS facilities. The Chairman stated that there must be capacity to go into main locations and replace old literature with new literature.

**Action:** Richard Norris will e-mail all Regional Managers to ensure replacement of literature is carried out urgently and ask what facilities have been updated to date.

## 5 DIRECTOR'S REPORT

### 1 Update on Local Advisory Councils

Interviews are ongoing for Local Advisory Council members in Grampian, Lothian, Ayrshire & Arran and Greater Glasgow and this is now the second stage of recruitment. Most Local Advisory Councils have met at least twice with the focus on the development of members. It is hoped that all Local Advisory Councils will be fully recruited by April, 2006.

### 2 Support for Public Partnership Forums

The Scottish Health Council is expected to play a role in assisting NHS Boards and Community Health Partnerships develop Public Partnership Forums. To assist Boards in this important work it has been decided that an offer of financial help of £5,000 per Community Health Partnership will be given towards the costs of meetings etc needed to set up the Public Partnership Forums. This has been possible because slower than anticipated recruitment has resulted in an accumulated underspend for this financial year.

Anne Brown asked how much in total would be allocated. The Director advised this can vary depending on how many Community Health Partnerships there are in each Board area. Agnes Robson asked if there are any conditions with this and the Director advised there are two conditions with this offer which are:

- 1) The money must be used to assist with the setting up or running of a public partnership forum
- 2) A written report will be submitted to the Scottish Health Council by the end of August 2006 giving details of how the money was spent and what benefit was gained.

### 3 Reaching the 'hard to reach'

Grampian local office is planning the first "Hard to Reach" event which will be held on 06 December, 2005. It is hoped that these events (to be held across Scotland) will establish positive long term working relationships between local offices and Local Advisory Council members and agencies representing local "hard to reach" groups.

### 4 North Members and Staff Event November 16 November, 2005

At the event held in Inverness all North staff and Local Advisory Council members met together for the first time with the Chairman, Director and National Functional Managers. The purpose of the event was to develop the local office staff and Local Advisory Council members as a team, as well as to focus on how we can use the National Standards for Community Engagement as we work with NHS Boards. Evaluations for the event were very positive and a report will be available soon.

## 5 Significant Service Change

There are a number of significant service change reviews either taking place (or imminent) across Scotland, including Ayrshire & Arran, Highland, Lothian, Grampian, Borders, Lanarkshire and Greater Glasgow. Two working groups were organised by the Assessment & Feedback Manager in October and November to explore a shared understanding of the term significant service change. Both groups included participants from NHS Boards, Special Health Boards, Scottish Health Council, the voluntary sector and local authorities.

## 6 Special Health Boards

Feedback from Special Health Boards on the new Assessment Framework has been positive, but there remain concerns about how to tackle the patient focus and public involvement agenda given their particular very specialised roles.

## 7 Development of a Practitioner Network Conference 22 November, 2005

Feedback from delegates following the above conference has been very positive. A total of 85 delegates registered on the day with a wide section of the 'public involvement community' represented. This event was organised by the East Region and all NHS Boards in the East were in attendance as were several delegates from each of the three Special Health Boards. A report and newsletter of the event will be available in the New Year.

## 8 Scottish Health Council DVD

A meeting was held to discuss the format and content of the Scottish Health Council promotional DVD. The group comprised a member and staff of the Scottish Health Council, representation from the NHS, Local Authority and voluntary sector.

## 9 Web fronted database of current practice on patient focus and public involvement

Discussion has taken place between the Development Manager and the Manager of Community Care Works (based at Glasgow University) in order to learn from their experience of developing a web fronted database. It is proposed that a number of focus groups are held in January and February to determine the key features of effective practice in Patient Focus and Public Involvement and that draft proposals on development of the Scottish Health Council database are consulted on through the practitioner networks and communities and the Scottish Health Council volunteers.

## 10 Having a Go Training

A series of training days have been held with national functional managers, local officers, regional officers and regional managers in the West to develop tools and templates for the verification of Board's activities. The tools and

templates have been developed from the National Standards for Community Engagement standards.

11 Meeting with Commission for Patient and Public Involvement in Health (CPPIH)

The Chairman, Director, Assessment & Feedback Manager and Regional Manager East met with the Chief Executive and senior staff from CPPIH at their offices in Birmingham in November, 2005. It was a very useful meeting and we were able to compare and contrast the position North and South of the border. We will follow this up by offering to host a meeting in Glasgow in June/July 2006 for our partner organisations in England, Wales, Northern Ireland and Republic of Ireland.

12 Communication with MSPs

The Director informed members a letter has been sent to the Lothian Local Office from Susan Deacon MSP stating it would be helpful if information about Scottish Health Council is circulated to MSPs and asked if there are any plans to organise an event within the Scottish Parliament to promote and explain the role of the Scottish Health Council.

**Action:** The Chairman and Director will discuss this

13 Scottish Health Council Work Plan

The Director advised that some feedback on the Work Plan has been received and it was agreed to resubmit the Work Plan at the next meeting.

**Action:** Resubmit Work Plan at next meeting with comments

**6 PERFORMANCE ASSESSMENT FRAMEWORK  
Self Assessment 2005/2006**

Council noted.

**7 REPORT OF NHS LANARKSHIRE'S UROLOGY AND GYNAECOLOGY  
Significant Service Change**

Council noted.

**8 NOTE OF THE STRATEGIC DEVELOPMENT EVENT, BRIDGE OF ALLAN  
07 & 08 November, 2005**

Feedback received for this event has been comprehensive.

**9 DRAFT PROGRAMME SCOTTISH HEALTH COUNCIL MEMBERS & STAFF CONFERENCE 17 & 18 January, 2006**

A final programme will be circulated in due course.

**Action:** Catherine Tait to circulate final programme to members

**10 DRAFT LETTER OF UNDERSTANDING**

Council members discussed the draft letter of understanding and highlighted the following points:

**Page 2 – No 3 Working Arrangements (Scottish Health Council Minutes)**

As a committee of NHS QIS, Scottish Health Council minutes will be presented formally to the Board of NHS QIS. Except as specified in this document, the Scottish Health Council can proceed with implementation of decisions as soon as they are taken by the council.

Agnes Robson was concerned with the wording “presented formally” and suggested changing this as follows:

To replace *formally* with *for information* which would now read:

As a committee of NHS QIS, Scottish Health Council minutes will be presented *for information* to the Board of NHS QIS.

Ann Brown queried the 2<sup>nd</sup> sentence-

Except as specified in this document, the Scottish Health Council can proceed with implementation of decisions as soon as they are taken by the Council.

*Nowhere in the document does it give specific examples of where the Scottish Health Council is not able to implement decisions.*

**Page 3 – No 6 Accountability**

The powers delegated to the Scottish Health Council are subject to the corporate governance responsibilities of the NHS QIS Board and its Audit, Staff Governance and Executive Remuneration Committees, and the Chief Executive as its accountable officer, operating within the parameters of the NHS QIS Scheme of Delegation and this Letter of Understanding. The Chairman and/or Director of the Scottish Health Council will be given notice, and the opportunity to attend, any meetings of the aforementioned committees if the Scottish Health Council is being discussed. The Scottish Health Council must remain compliant with internal NHS QIS systems of accountability and control and external audit.

Agnes Robson was concerned at the amount of detail in this paragraph, and at the references to Committees of the Board and felt this should be reduced considerably.

**Page 4 – No 6 Accountability (Finance 2<sup>nd</sup> paragraph, 1<sup>st</sup> sentence)**

Each year the NHS QIS Board will approve the Scottish Health Council’s financial allocation following discussion with the director of the Scottish Health Council.

Agnes Robson and Sue Kinsey suggested this sentence should be amended to read: Each year the NHS QIS Board will make the financial allocation to the Scottish Health Council.

Kate Alexander suggested that the document should include details or a process of how future differences of interpretation should be resolved if there is a disagreement over the meaning of any part of this document.

**Action:** If members wish to comment further please contact the Chairman

## **11 ARGYLL & CLYDE STAFFING**

Due to the boundary change with Argyll & Clyde being dissolved the local office will cease to exist. In the case of all three staff there will be a reasonable offer of employment and the Director is working with the HR department.

**Action:** The Director will update at next Council meeting

## **12 FINANCE**

After a discussion about the underspend of the Scottish Health Council budget it was agreed it would be useful to see a balance sheet on a regular basis.

**Action:** Balance sheet to be circulated to members for their information

## **13 DATE OF NEXT MEETINGS**

Meetings for 2006 meeting to be arranged bi monthly and will fall on 2<sup>nd</sup> Thursday. Dates will be circulated to members.

**Action:** Catherine Tait will circulate dates to members

Signed: .....

Brian Beacom  
Chairman Scottish Health Council

Date: .....

