

NHS GRAMPIAN

**Minute of Meeting of the Engagement and Participation Committee
10.00am Wednesday 15 May 2019**

Conference Room, Summerfield House, Eday Road, Aberdeen.

Board Meeting 03 09 19 Open Session Item 15.4
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PRESENT:

Amy Anderson, Chair, Non-Executive Board Member
 Louise Ballantyne, Patient Services Manager
 Kim Cruttenden, Principal Pharmacist (Clinical), Chair, Area Clinical Forum
 Nigel Firth, Equality and Diversity Manager
 Laura Gray, Director of Corporate Communications and Board Secretary
 Caroline Hiscox, Acting Director of Nursing, Midwifery and Allied Health Professionals
 Liz Howarth, Public Involvement Officer
 Linda Leighton-Beck, Head of Social Inclusion, on behalf of Susan Webb
 Fiona Mitchelhill, Patient Safety Programme Manager, on behalf of Linda Lever,
 Feedback Service Lead
 Jonathan Passmore, Non-Executive Board Member
 John Tomlinson, Non-Executive Board Member

ATTENDING:

Alasdair Pattinson, General Manager, Dr Gray's Hospital
 Anna Rist, Public Involvement Officer
 Marilyn Elmslie, Communications Officer, Clerk to the Committee

No.		Action
1.	<p>Welcome and apologies The Chair welcomed everyone to the meeting and introductions were made around the table.</p> <p>Apologies were intimated on behalf of Paul Allen, Professor Amanda Croft, Cllr Isobel Davidson, Professor Nick Fluck, Fiona Francey, Jenny Gow, Linda Lever, Rachael Little, Professor Louise Locock, Dr Lynda Lynch, Dave Russell and Susan Webb.</p> <p>Amy welcomed John Tomlinson to the Committee.</p>	
2.	<p>Minute of the meeting held on 27 February 2019 The minute was approved as a correct record of the discussions.</p>	
3.	<p>Matters arising Update on gathering information systematically – Systematic Patient Experience Group Caroline Hiscox requested to carry forward the item to the next Engagement and Participation Committee meeting as the group is in the early stages of gathering the information.</p> <p>The Committee agreed to take the item at the meeting on 21</p>	

	August 2019. Action	Caroline Hiscox
4.	<p>Performance, Assurance, Improvement and Risk (PAIR) Caroline Hiscox took the Committee through the powerpoint presentation on the PAIR process.</p> <p>The System Leadership Team (SLT) has reviewed the governance processes in relation to performance, assurance, improvement and risk (PAIR) within NHS Grampian, to ensure that the processes are fit for purpose, consistent with good practice, and support the application of intelligent board principles to the work of SLT, the Board and its subcommittees. The new performance management arrangements have been approved by the Board and are currently being developed. The PAIR process will coordinate PAIR activities, with the SLT having an oversight of the process and all strategic issues which emerge from the process.</p> <p>Caroline noted the complexity of supporting systems' leadership and collaborative working.</p> <p>The PAIR process will:</p> <ul style="list-style-type: none"> • Enhance system leadership and shared responsibility • Give assurance based on a triangulation of performance, assurance, improvement and risk information • Align the SLT and Board assurance models • Establish Intelligent Board principles • Embed risk evaluation into systems and processes <p>The new approach to providing the data has been divided into seven separate sub groups which will report directly to the SLT. These sub groups consist of:</p> <p>Core Business SLT Sub Groups</p> <ul style="list-style-type: none"> • Quality and Safety • Compliance • Workforce • Infrastructure <p>Strategic SLT Sub Groups</p> <ul style="list-style-type: none"> • Innovation and Transformation • Involvement and Engagement • Collaborative Working <p>Each Sub Group has a SLT member as Chair and they are the designated Risk Owner. Terms of Reference for each group have been agreed and submitted to SLT.</p>	

	<p>Laura Gray described her role as Chair of the Involvement and Engagement Sub Group and the work and discussions held at each of their meetings. It was important that the work of the sub group did not duplicate that of the Engagement and Participation Committee but should enhance and add value. She noted that the sub group has reviewed the controls and actions of strategic risk on involvement.</p> <p>The Committee members agreed on the importance of accurate assurance reporting to the Board and it was suggested that further discussions and input would be required. John Tomlinson suggested that the matter be explored further for the Non Executive Board members at a designated Board Seminar.</p> <p>It was highlighted that it was important to keep staff informed and engaged in the process. This was acknowledged and it was noted that the presentation on PAIR was being given at the next Grampian Area Partnership Forum meeting.</p> <p>Caroline was thanked for her detailed presentation and invited to provide further updates at future meetings.</p>	
5.	Equality and Diversity	
	<p>5.1 Equality and Diversity Report Nigel Firth talked through several of the items within the report:</p> <p>Equality and Diversity Training Seminars Ten Level 2 and four Level 4 Seminars have been provided in the last quarter. Nigel advised that, following the training, several staff sought guidance on issues or problems in their workplace which caused them concern. Support and advice was provided and the issues resolved. It was encouraging that staff sought help and were empowered to stand up to unacceptable behaviour. It was noted that attending either a Level 2 or Level 4 Equality and Diversity Seminar every 5 years was mandatory for staff.</p> <p>NHS Shetland: Service Level Agreement (SLA) with NHS Grampian for Equality and Diversity Service An SLA has been concluded by which Nigel would provide a comprehensive Equality and Diversity service to NHS Shetland from 1st April 2019.</p>	

		<p>Statutory Reports The following reports have been produced for NHS Grampian, NHS Orkney and NHS Shetland and are available on their respective website:</p> <ul style="list-style-type: none"> • Equality Outcomes 2017 - 2019 • Mainstreaming Report 2017 - 2019 • Equal Pay Report April 2019 <p>Impact Assessments Ten Equality and Diversity Impact Assessments have been completed since the last meeting to ensure compliance with legislation. Most required only minor adjustments.</p> <p>Disability Schemes The NHS Grampian Disability Discrimination Act Review Group had completed three schemes during 2018/19 from their £20k capital allocation. Requests for schemes far outweighed the available funding and were prioritised and completed in order, when funds became available.</p> <p>Disability Access Audits Regular use was made of the five Disability Access Panels to review access arrangements for NHS Grampian premises.</p> <p>Rainbow badges The initial order of 200 badges has been distributed and a further 500 have been ordered. This was one of a series of initiatives to make explicit that NHS Grampian is LGBT friendly. The support of the System Leadership Team in the wearing of the rainbow badges was greatly appreciated.</p> <p>Nigel also noted that there would be representation from NHS Grampian at the Grampian PRIDE parade taking place in Aberdeen on Saturday 25 May 2019.</p>	
	<p>5.2</p>	<p>NHS Grampian Equality Outcomes March 2019 Copies had been previously circulated. Nigel advised that this was a Statutory Report as required under the terms of the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012. The actual Outcomes Report covered the period 2017-2019. However, a detailed update was required two years into the four year period to ensure that progress was being made. The framework for the Update Report was specified in the Regulations.</p>	

		<p>There was a full discussion about how the report supported the work of the Committee and fulfilled a legal compliance with the detail on, for example the numbers of participants attending training etc, and with some additional information it could further strengthen the assurance it offers the NHS Grampian Board.</p> <p style="text-align: right;">Action</p>	<p>Nigel Firth</p>
<p>6.</p>		<p>Involvement and Engagement Activity Following on from feedback received from Committee members at the previous Committee meeting regarding the Public Involvement Activities and Evaluation report, it was agreed that the EPC would encourage projects to present detailed updates on their Involvement and Engagement work. The Chair suggested that projects working in Children’s Services be invited to attend the next meeting in August.</p> <p>Louise Ballantyne talked through the update template and noted that the following projects be requested to provide an update for the Committee and where possible attend to present :</p> <ul style="list-style-type: none"> • Grampian System Wide Mental Health and Learning Development Review – with respect to services for children • Child Health Public Involvement Group • Child and Adolescent Mental Health Service • Dr Gray’s Hospital Obstetric and Paediatric Services • Child Development Team Relocation Project • Rebecca Rainbow Heart Project • Royal Aberdeen Children’s Hospital Day Case Unit Re-design <p>The Committee agreed to the items. Jonathan Passmore highlighted that a discussion regarding Elective Care Services provided at Dr Gray’s Hospital would also be welcomed.</p> <p style="text-align: right;">Action</p>	<p>Louise Ballantyne</p>
<p>7.</p>		<p>Moray Alliance Alasdair Pattinson participated by vc from Moray.</p> <p>Alasdair explained that the Moray Alliance (MA) has been established to drive whole system change around the principle of one system, one budget and one vision to influence and drive service redesign and improvement. The MA will bring the acute services provided at Dr Gray’s Hospital together with primary, community and social care within Moray. The Terms of</p>	

Reference for the MA have been agreed and copies will be circulated to the EPC members. The MA will work with existing local structures and develop a transformation programme in alignment with the Moray Integrated Joint Board (MIJB) strategic plan.

The membership of the MA consists of senior clinical and professional leads within Dr Gray's and Health and Social Care Moray (HSCM) to ensure a multi professional view. A Strategic Core Group has been formed and is led jointly by the General Manager, Dr Gray's Hospital and Head of Service, HSCM. The group have identified 5 key initial priorities to focus on which are:

- Women & Children's services at Dr Gray's Hospital
- Unscheduled care
- Mental Health and Learning Disabilities
- Elective Care
- Diabetes

John Tomlinson enquired whether the public were aware of the priorities and how they would be involved. Louise Ballantyne noted that the methodology of having public representatives on the Community and Engagement Sub Group for Women & Children's Services at Dr Gray's had been successful and it would be useful for public engagement to be incorporated at the outset for each priority. Alasdair noted that the work of the MA will require engagement with a broad range of stakeholders. He confirmed that the MA will liaise with Louise Ballantyne and Fiona McPherson, HSCM Public Involvement Officer, to gauge opinion and feedback from service users, carers and the public. It was also noted that a dedicated Communications Officer has been appointed to provide internal and external communications support for the MA and Dr Gray's hospital.

Linda Leighton-Beck noted that there was an opportunity to govern equity and ensure that methodology was built in to address health and inequality issues within each project.

Jonathan Passmore is in agreement with the work of the MA but had a concern regarding the strategic risks and the false expectation that could be raised. A proper reporting mechanism and assurance would be required. Alasdair noted that the Core Group will report directly to the Strategic Planning and Commissioning Group (SPCG). The SPCG reports to the Moray IJB, which reports to NHS Grampian and Moray Council depending on the pathway or services that are under re-design.

Laura Gray enquired if there would be 3rd sector involvement. Alasdair replied that the MA recognises the role and importance

	<p>of engaging with 3rd sector partners at the working group level and this will be established as required in line with the priority being addressed.</p> <p>The Chair thanked Alasdair for providing the Committee with the information and invited him to return in 12 months to provide an update.</p>	
8.	Handling and Learning from Feedback	
8.1	<p>Feedback report 1 Jan – 31 Mar</p> <p>Fiona Mitchelhill attended the meeting to present the report. She talked through several of the graphs highlighting that there had been a slight decrease in complaints. She also noted that the number of compliments recorded are low as not all compliments are recorded on the datix system. Fiona confirmed that this was being addressed.</p> <p>The information summarised from feedback received through Care Opinion highlighted that people being cared for mentioned “communication” and “conflicting information” in their posts. Laura Gray emphasised that it was challenging to ensure that patients do not receive conflicting information.</p> <p>Committee members enquired whether patients awaiting treatment are kept updated on current waiting times. Laura confirmed that the standard letters issued to patients have been in use for more than a year and were due to be reviewed.</p> <p>Fiona noted that the Feedback annual report will be available for the next meeting.</p>	
9.	Internal updates	
9.1	<p>Public Involvement – activities and evaluation</p> <p>Due to time constraints the report was discussed and included within item 6.</p>	
9.2	<p>Baird Family Hospital and the ANCHOR Centre projects update</p> <p>Anna Rist provided a brief verbal update. She highlighted that the Enabling Works for both projects continue and are on schedule to be completed during June 2019. It is anticipated that the temporary closure of Foresterhill Road at the Westburn Road entrance should be lifted by the 18 May. The Full Business Cases for both projects are due by Autumn 2019. This is slightly delayed due to a review of final costings. It is likely that the main construction will</p>	

	<p>commence in September 2019. It is anticipated that the ANCHOR Centre will be complete by the end of 2021 and the Baird Family Hospital should be complete and accepting patients in 2022.</p> <p>A visual walkthrough video of both projects will be available on the website shortly.</p>	
10	<p>Report to NHS Board The Chair confirmed that a report on a selection of the subjects discussed at the meeting will be provided to the NHS Grampian Board. It was agreed that the report would include:</p> <ul style="list-style-type: none"> ➤ Moray Alliance ➤ PAIR ➤ NHS Grampian Equality Outcomes March 2019 – developing the conversation with the Board ➤ Grampian PRIDE 	Laura Gray
11.	<p>Items for noting 11.1 Media report May 2019 11.2 Social media reports</p>	
12.	<p>Any other Competent Business</p> <p>Improving governance of equity Linda Leighton-Beck provided a short paper on the background and aim of the Health Inequalities Working Group (HIWG)</p> <p>The Chair highlighted that following the discussion on health inequalities at the EPC meeting on 7 February 2018 that the following steps had been agreed:</p> <ul style="list-style-type: none"> - Addressing health inequalities is fundamental in strategic decision making and will routinely be informed by views of people living in Grampian’s most deprived communities - This is a directive for the Committee - Addressing health inequalities is a priority issue for inclusion in all future EPC agendas. <p>The HIWG seeks to engage with the EPC with a view to learning more about how the EPC can build on its initial steps to support the Board’s ambition and actions. A detailed paper will be provided for the next meeting on 21 August to stimulate discussion and action which will explore how we can as a Committee assure ourselves our engagement and participation activities include those who face health inequalities. Action</p>	Linda Leighton-Beck

13.	The next meeting of the Committee is on Wednesday 21 Aug at 10.00am in the Conference Room, Summerfield House.	