

## NHS GRAMPIAN

### Minute of Meeting of the Engagement and Participation Committee 10.00am Wednesday 21 November 2018 Conference Room, Summerfield House, Aberdeen.

#### PRESENT:

Amy Anderson, Chair, Non-Executive Board Member  
 Paul Allen, Director of eHealth and Facilities  
 Louise Ballantyne, Public Involvement and Feedback Manager  
 Kim Cruttenden, Principal Pharmacist (Clinical), Chair Area Clinical Forum  
 Cllr Isobel Davidson, Non-Executive Board Member  
 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 Professions  
 Liz Howarth, Public Involvement Officer  
 Linda Leighton Beck, Head of Social Inclusion, for Susan Webb, Director of Public Health  
 Linda Lever, Patient Safety Risk Advisor, for Fiona Mitchelhill, Patient Safety Programme Manager  
 Professor Louise Locock, Professor of Health Services, University of Aberdeen  
 Jonathan Passmore, Non-Executive Board Member  
 Dave Russell, Public Representative Lay member

#### ATTENDING:

Jillian Evans, Head of Health Intelligence  
 Sue Swift, Divisional General Manager, Women and Children's Service (by vc)  
 Anna Rist, Public Involvement Officer  
 Emma Berry, Public Involvement Officer  
 Heather Stuart, Public Involvement Officer  
 Marilyn Elmslie, Communications Officer, Clerk to the Committee

No.		Action
1.	<p><b>Welcome and apologies</b></p> <p>The Chair welcomed everyone to the meeting and introductions were made around the table.</p> <p>Apologies were intimated on behalf of Professor Amanda Croft, Professor Nick Fluck, Fiona Francey, Rachael Little, Professor Stephen Logan, Malcolm Metcalfe, Fiona Mitchelhill and Susan Webb.</p> <p>Laura Gray advised that Jenny Gow had agreed to join the Committee as a Public Representative, Lay member, to replace Mary Rassmussen. She explained that due to personal reasons Jenny was unable to attend this meeting but will attend the meetings scheduled for 2019.</p>	

<b>2.</b>	<b>Minute of the meeting held on 22 August 2018</b>	
	The minute of the meeting held on 22 August was approved.	
<b>3.</b>	<p><b>Matters Arising Reporting template</b> Following the EPC agenda setting meeting it was agreed that future topic presenters are to be asked to provide brief presentations of no more than 2/3 slides, which should focus on engagement and participation, to allow plenty of time for detailed conversation and discussion.</p> <p><b>Item 5 Patient Admission Assessment Record (PAAR)</b> At the EPC meeting held on 22 August the new PAAR had been presented by Jill Ferbrache, Excellence in Care Lead. Jonathan Passmore enquired how the PAAR had been received. Caroline Hiscox confirmed that the document had been fully embedded across the system and has received positive feedback from patients and staff. She noted that the document had also received national interest.</p> <p><b>Item 7.1 Handling and Learning from Feedback Annual Report 2017-18</b></p> <p><b>Care Opinion</b> Professor Locock noted that the study centred on staff responses to Care Opinion by ARI staff is ongoing. The analysis of responses to six months' of posts showed the great majority of posts had been well responded to. Interviews with staff are now taking place. The outcome report will be completed by late March 2019 and will be discussed at the EPC meeting scheduled for May.</p>	
<b>4.</b>	<b>Project updates – involvement and engagement activity</b>	
<b>4.1</b>	<p><b>Health and Care Quality – progress on achieving the quality ambitions of NHS Grampian</b> The paper presented to the NHS Grampian Board at the October meeting had been circulated to the Committee. Jillian Evans provided a brief resume of the paper highlighting the new quality assurance processes and the progress towards achieving the quality ambitions for the organisation as assessed by a collection of four high level indicators.</p> <ul style="list-style-type: none"> <li>• Delivering what matters most</li> <li>• No preventable deaths</li> <li>• Continuously seek out and reduce harm</li> </ul>	

		<ul style="list-style-type: none"> <li>• Achieving the highest reliability for clinical care.</li> </ul> <p>Indicators had been selected where it was felt that a difference could be achieved and outcomes could be measured. Indicators were also used to better understand the health of the population which in turn affect the health outcomes. Healthcare is dependent on the input of many services so partnership working was crucial. Capturing the views of patient and staff experience through GP surveys, Care Opinion, Staff surveys, Feedback was extremely important and demonstrates how seriously the relationship between experience of care and health outcomes is viewed.</p> <p>Committee members discussed how the information gathered was being utilised effectively. It was agreed that NHS Grampian does demonstrate learning from feedback and experiences but this would be more effective if it was gathered across the whole system. The introduction of exit questionnaires for staff was welcomed and it was suggested that clinical staff should complete these on a face to face basis with their line manager.</p> <p>Caroline Hiscox noted that an application for funding has been submitted to the NHS Grampian Endowment Fund to purchase electronic software to support the Care Assurance tool, which has been in use for a year. This will address challenges at the point of care.</p> <p>Kim Cruttenden highlighted that it would be useful to discuss the potential harm associated with medicines use as they are the biggest single healthcare intervention. Jillian agreed to meet with Kim outwith the meeting to discuss further. <b>Action</b></p> <p>The Chair thanked Jillian for the report and noted that Caroline Hiscox will provide a further update regarding gathering information systematically at the EPC meeting scheduled for May. <b>Action</b></p>	<p><b>Jillian Evans/Kim Cruttenden</b></p> <p><b>Caroline Hiscox</b></p>
	4.2	<p><b>Changes to Women and Children services at Dr Gray's Hospital update</b></p> <p>Sue Swift updated the Committee on progress with the changes to Women and Children's services at Dr Gray's Hospital.</p> <p>She noted that since the update provided at the EPC</p>	

	<p>meeting in August the Cabinet Secretary had requested NHS Grampian review the original plan submitted and make further changes. The Cabinet Secretary had visited the Moray area again on 7 November to meet staff and members of the public, including local groups, before agreeing the finalised phase 1 action plan for obstetrics, which NHS Grampian published on 19 November.</p> <p>The action plan is the first step towards developing a sustainable, safer and more modern Women and Children's service in Moray and has been developed in collaboration with the Scottish Government. The plan also addresses all of the recommendations made by the Chief Medical Officer's Independent Review Team.</p> <p>The phase 1 action plan for obstetrics will be closely followed by a similar plan for Children's services. Phase 2 will detail the long-term plans.</p> <p>Sue noted that the staffing situation had improved to a level where it was now safe to reopen the Special Care Baby Unit at Dr Gray's Hospital and to restore the Children's Ward to a 7 day service working from 8am to 10pm. She also confirmed the reintroduction of elective caesarean sections. Discussions with staff and management at Raigmore Hospital continues. Steps have been taken to address the gap left by the shortage of Junior Doctors which include training 8 new Advance Nurse Practitioners who should qualify in the next 12 months.</p> <p>The Chair enquired whether the local groups and community had been communicated with and involved in the detail of the action plan. Sue confirmed that the Maternity Services Liaison Committee met regularly and communicated with the various community groups and the local MP and MSP. She noted that in order to progress with Phase 2 of the action plan, participation, involvement and engagement with the local community groups is necessary in order to have their concerns addressed.</p> <p>Discussions continued on the importance of proactive communication with the local public early in the process. Lessons from the process had to be learned to ensure future decisions made were properly communicated. Sue commended the immense work from members of the Corporate Communications</p>	
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	<p>team which had been well received by the managerial team and had required a great deal of capacity from the Communication Manager and her team. The amount of enquiries and feedback generated through social media had required the team to spend a great deal of time responding. Laura Gray confirmed that support for Sue and her team was a priority and it has been agreed to recruit to a full time dedicated Communication Officer role for Moray, to be based in Elgin, which will also include public involvement and engagement activity. As the post may take some time to appoint to she noted that external specialist support has been sought.</p> <p>Louise Ballantyne noted that it is important that the Public Involvement team can be involved in review processes at the outset. Sue acknowledged that involvement was a priority and she would ensure that her team would liaise with Louise to embed public involvement in the preparation of the phase 2 action plan.</p> <p style="text-align: right;"><b>Action</b></p> <p>It was acknowledged that recruitment and retaining staff was challenging for Moray and NHS Grampian as a whole. The Committee agreed that it would be helpful to have a briefing from Recruitment which would highlight the steps taken to address matters and to promote the NHS as an employer at a future EPC meeting.</p> <p style="text-align: right;"><b>Action</b></p> <p>The Chair thanked Sue for participating by vc and for the update.</p>	<p><b>Sue Swift</b></p> <p><b>Laura Gray</b></p>
<p><b>4.3</b></p>	<p><b>NHS Grampian Youth Forum</b></p> <p>Liz Howarth talked through a presentation which showed how the forum was originally set up as a way to involve young people in the work of NHS Grampian.</p> <p>The original membership of the group had been small and was not representative of the young people in Grampian. After exploring new ideas to elicit new energy they identified and worked through areas of mutual interest which resulted in them securing funding to deliver a programme of events for the Year of Young People #YoYP18. The events were well attended and representative and Public Health were able to obtain useful data gleaned from young people on health services.</p>	

		<p>Liz finished the presentation by explaining the challenges with continuing in the existing format and welcomed the Committee members feedback and opinions on how best to engage with young people.</p> <p>It was agreed that it was important to capture the views of young people on everything relating to health services, particularly public health messages and the future workforce. It was important to work closely with local authorities, other emergency services and 3<sup>rd</sup> sector networks. Committee members suggested that it would be helpful to link in with existing young people's networks such as Scout groups, Girl Guides etc.</p>	
<b>5.</b>	<b>Equality and Diversity</b>		
	<b>5.1</b>	<p><b>Equality and Diversity Report</b> Nigel Firth gave a resume of the report which had been previously circulated. Key points included:</p> <ul style="list-style-type: none"> <li>➤ 19 Equality and Diversity Training Seminars had been provided since the last EPC meeting</li> <li>➤ A Video BSL pilot had commenced in February 2018. The pilot had gone exceptionally well and from September 2018, Video BSL was now a permanent service available in the Acute Sector. The pilot would now be rolled out to other areas.</li> <li>➤ Following the departure of the only BSL interpreter on Orkney, Nigel was now introducing Video BSL for NHS Orkney. This was funded by NHS Orkney, but Orkney Health and Care and Orkney Islands Council were interested in sharing the service and costs.</li> <li>➤ Since the last meeting, 10 policies had been Equality and Diversity Impact Assessed, as required by law.</li> </ul>	
	<b>5.2</b>	<p><b>NHS Charges to Overseas Visitor Regulations: Financial Implications of Circular PCA (M) 2018 10</b> A copy of PCA (M) 2018 10 had been previously circulated. Nigel talked through the various implications and advised that all restrictions on overseas visitors accessing GP services had all been</p>	

		<p>lifted and patients no longer needed to prove their identity or status. He noted the significance of the changes and the possible financial implications and costs to both NHS Grampian and Health and Social Care Partnerships in Grampian.</p> <p>Following discussion, it was agreed that this topic should be discussed by the Senior Leadership Team (SLT). Laura would arrange for the item to be included on a future SLT agenda. <b>Action</b></p>	<b>Laura Gay</b>
<b>6.</b>	<b>Feedback</b>		
	<b>6.1</b>	<p><b>Handling and Learning from Feedback</b>  Following the feedback Louise Ballantyne received on the draft reports sent to Committee members it was agreed that the future quarterly updates will be more patient focussed on specific areas such as Mental Health services etc. Louise will produce a further draft and share with the members. <b>Action</b></p>	<b>Louise Ballantyne</b>
<b>7.</b>	<b>Internal updates</b>		
	<b>7.1</b>	<p><b>Public Involvement Team Quarterly Update</b>  It had been agreed at the EPC agenda setting meeting that in place of a quarterly update the PI team would provide summaries and evaluation on the various projects they are involved with. The evaluation from the Child and Adolescent Mental Health Service Public Involvement had been circulated. Louise asked whether there was anything the Committee members would like included in the report and also if there were comments and views to be added.</p> <p>Also included for the agenda item was a full list of all the projects with which the Public Involvement team was actively engaged. Discussions were held on the range of the work and whether the team was actively involved from the commencement of each project. Louise noted that they were going to raise PI team awareness and produce Best Practice guidance.</p>	
	<b>7.2</b>	<p><b>Media Report Aug to Oct 2018</b>  Laura Gray talked through a variety of the headlines and issues which were prevalent from August to October.</p>	
	<b>7.3</b>	<p><b>Social Media Reports</b>  The reports provided an overview of the social media</p>	

	activity from the NHS Grampian Facebook and Twitter accounts. Laura reiterated that the small E Communication team is core to the Corporate Communications Department and that social media activity continues to increase and was an integral way of communicating with the public.	
<b>8.</b>	<p><b>Report to NHS Board</b></p> <p>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"> <li>• Health and Care Quality</li> <li>• Dr Gray's Hospital – Women and Children's services</li> <li>• NHS Grampian Youth Forum</li> </ul>	<b>Laura Gray</b>
<b>9.</b>	<p><b>Any other Competent Business</b></p> <p>The Chair enquired whether Committee members would be happy to provide a short biography, to include a head and shoulder photo, of themselves for information to other Committee members and topic presenters. This was agreed and Laura will email Committee members to request the biographies.</p> <p style="text-align: right;"><b>Action</b></p>	<b>Laura Gray</b>
<b>10.</b>	<p>The next meeting of the Committee is on Wednesday 27 February at 10.00am in the <b>Committee Room, Foresterhill House.</b></p> <p><b>Please note dates of meetings in 2019:</b></p> <p><b>10am on 27 February in the Committee Room, Foresterhill House</b></p> <p><b>10am on 15 May in the Conference Room, Summerfield House</b></p> <p><b>10am on Wed 21 August in the Conference Room, Summerfield House</b></p> <p><b>10am on Wed 11 December in the Conference Room, Summerfield House</b></p>	