1. APOLOGIES

Apologies were received on behalf of Scott Bryson, Amanda Paul, Elinor Smith, John Bannon, Pat Bryson, Ravinder Kaur Nijjar and Grant Carson.

2. MINUTE OF MEETING OF 13TH SEPTEMBER 2007

Approved.

3. ACUTE SERVICES PFPI

Pauline Fletcher from the Health Improvement team came along to update the committee on the steering group which has been established within the Acute Operating Division (AOD) to support PFPI. This is chaired by the Director of Nursing Eunice Muir. Pauline stated that there are many examples of good practice within the Acute division and it is important these are supported and built upon and the key messages raised by staff are taken on board. Some of the messages that the group intend to take forward are PFPI training for acute staff, developing PFPI leadership, communication, learning from best practice, PFPI to be part of professional development plan for staff and induction of PFPI to new staff.

Ally suggested that he along with Peter and Jim meet with Iain Reid, Director of Human Resources to help in implementing these key messages. Peter asked that the AOD update this committee every six months on their progress and alert us if they wish any assistance in-between. Ally suggested that we marry in with the AOD by representation from this committee at their group meetings. Jim suggested that this committee should get the CH(C)Ps to set up a similar group.
4. MATTERS ARISING

Patient Information Points – Gordon briefed the group on the progress of the prototype pilot information points that were introduced seven weeks ago at Easterhouse Health Centre and Gartnavel General Hospital and are now functioning successfully. Gordon explained there had been a few minor teething problems at the Gartnavel site but this has now been sorted out. It is an ongoing process looking at what is the most relevant type of information for the pods. Feedback from the public has been very positive from both sites and effectiveness of units will be formally assessed on the back of this. An audit by an external company is due to take place at the beginning of 2008 details of these results will be fed back to the committee at a later date.

Medical Prescribing – Peter said there was little to add on this issue and reiterated there was now a greater understanding of this complex process.

5. ANNUAL REVIEW FEEDBACK

Feedback from the NHSGGC Annual Review which had been attended by Gillian Kinsie and John Munro from the Scottish Health Council was fed back through Louise, stating the day had been generally successful and most people were happy with a lot of the services provided.

Peter who attended the pre-meeting for the patient representatives stated he felt the group session was a bit strained at times and that it would be a better idea for the reps to meet-up beforehand considering that they were going straight in to meet Health Minister Nicola Sturgeon 40 minutes later. Jim pointed out this could only be done if given earlier guidance.

Louise went on to refer to the question and answer section in the last 15 minutes of the review and said that any questions that had been submitted by the public beforehand will receive a response by the end of November from Jo Quinn.

6. PFPI FRAMEWORK

Jim tabled the second draft of the framework for PFPI - 2008/09 to 2009/10. He explained that it is the requirement of each NHS board in Scotland to develop a sustainable framework that ensures the principles and practices of PFPI were established within service planning and delivery.

He then went on to highlight various points on how we should take this forward. Jim stated there was a need to create awareness and understanding to ensure that people in the organisation know PFPI is not seen as a stand alone process, we need to separate PF from PI and make sure that the two are seen as different sets of dynamics.

To make sure that the framework is taken in the right direction Jim will work with the corporate policy team he would also like this committee to give their feedback.
Peter asked if this paper will go to the board when it is finalised and Jim informed him that this will happen in April.

7. **OUR HEALTH SEVEN, EIGHT AND NINE**

*Our Health 7* - Ally summarised this event had taken place on the 21st October 2007 in the Royal Concert Hall by Dr Linda deCaestecker, Director of Public Health and covered some hard hitting messages such as smoking and alcohol consumption.

The approach used was a very different concept from anything done before and this was in the form of a ‘virtual’ Our Health event. A copy of the report was distributed in a special edition of Health News, which was distributed with the Daily Record, this encouraged readers to either write in or log on to the NHSGGC website in order to take part in a debate about the health issues raised in the report.

*Our Health Eight* – This event is scheduled for April/May 2008 and the subject will be Mental Health. Our scoped out proposal is to look at targeting younger people, staging the event over a 4-5 day period, and to take the events to an environment in which that age group would feel comfortable. A meeting with Anne Hawkins to discuss and build on this proposal is planned for early January.

*Our Health Nine* - This the 60th anniversary of the National Health Service and events are being held throughout the country on the 5th July 08. Considering the large scale of the organisation, how best do we do this? Ally then put forward a few ideas – history of medicine, vision for the future, Times Past, a supplement in the Evening Times, Radio Clyde week of patient stories, photo event maybe in George Square, main event in the Glasgow Royal Concert Hall in the Auditorium, get in touch with the first patient born 60 year’s ago, NHS choir, look at getting a commemorative plate made, selling it and donate the profit to charity. Any suggestions from this committee would be welcome.

9. **INVOLVING PEOPLE DATABASE**

Jim explained that the current database has approximately 5,000 contacts and is a bit of a ‘dumb’ database. It is accepted there is a need to make it work harder at the moment and it is currently managed by an external company who are not performing. We have recently been approached by Axis media who represent a large number of health boards in England who will make the database work for us. A meeting has been arranged to speak to the CH(C)P directors so as to work towards building one single database throughout the organisation. Peter will attend this meeting as chair of the IPC.

10. **AOCB**

Future Committee Meetings - The IPC meeting for 2008 have now all been arranged please take note and put in your diaries.
11. **DATE OF NEXT MEETING**

It was agreed that Committee would meet again on Tuesday, 5th February 2008. The meeting would commence at 12.30 pm with a buffet lunch served. The venue would be Meeting roomB on the ground floor of Dalian House, 350 St Vincent Street, Glasgow.

Linda Davidson  
25th January 2008

PH, AMcL, JW
1. APOLOGIES

Apologies were received on behalf of Scott Bryson, John Bannon, Pat Bryson, Ravinder Kaur Nijjar, Grant Carson, Jim Whyteside and Gordon Robertson.

2. MINUTE OF MEETING 5TH FEBRUARY 2008

Approved.

3. CLYDE SERVICES CONSULTATION OVERVIEW

Catriona Renfrew came along to update the committee on the proposed changes within Clyde; which has been separated into five separate consultations; -

Maternity Services – The public will again be consulted and asked why mothers choose not to deliver in Community Maternity Units (CMU), they will be given the opportunity to comment on all the recommendations put forward by the Independent Scrutiny Panel (ISP).

Mental Health Services – This should be relatively uncontroversial having had the most engagement with the public on the transfer of low secure learning disability services, adult and elderly mental health acute admission beds from the Vale of Leven Hospital to Gartnavel Royal Hospital, and the re-provision of continuing care beds for older people with mental illness.

Action
Unscheduled Medical Care at the Vale of Leven Hospital – Catriona reported that the Chief Executive and the Medical Director has a meeting on Friday 8 Feb with the ISP to consider again their recommendations. Further work and discussion with the Scottish Ambulance Service is also needed.

Continuing Care for Frail Older People at Johnstone Hospital – We are hoping to launch this consultation as soon as possible and are waiting for the go ahead from the Scottish Health Council before we can start. It is our proposal to deliver modern, high quality, more accessible services better suited to the needs of local patients and their families.

Inpatient Physical Disability Services at Merchiston Hospital – This is a site closure and not a change to services, consultation may commence this week, it is unlikely to be controversial.

Catriona also stated that further consultations were taking place between NHSGGC and the Scottish Health Council re the Board’s consultation strategy. Ally informed the group that we would not hear anything until at least Thursday when the Scottish Health Council will meet to discuss the consultations. Peter asked Catriona who has ownership of each of these consultations; she informed him that each of these strands would be lead at local level. Jessica stated that she felt it was the Vale of Leven consultation on unscheduled care that is bothering everyone as we only have one option. Catriona commented that the local population, understandably, were upset at the loss of their A&E service to the RAH and were then promised an Integrated Care Pilot which the Board now considers to be unsafe and unsustainable.

Catriona informed the group that Ally is about to embark upon the production of a newsletter for distribution to the whole of the Clyde population. This will inform the public and patients to see the bigger picture of changes and developments to Clyde services since the area came within the governance of NHS Greater Glasgow and Clyde in April 2006.

4. MATTERS ARISING

Acute PFPI – Ally gave positive feedback to the committee on his attendance along with Jim as guests to the steering group chaired by Interim Nurse Director Eunice Muir, which has been established within the Acute Operating Division to support PFPI.

As chair of the PFPI and Communications group Ally feels that existing single system officers group may benefit from a re-think of the way it works. He suggested that discussions should take place to replicate the Acute PFPI Group with a similar model representing Partnerships and that the two service lead groups be linked by joint membership of Chairs and the attendance of Ally.

AMcL
Jessica raised a concern that the PPFs of each CH(C)Ps could quite easily isolate themselves as there was no formal linkage from one PPF to another. Jessica and Peter will undertake to look at how PPFs within CH(C)Ps communicate with each other. Amanda asked if each individual CH(C)Ps posted the minutes of meetings on the CHP website and Ally stated he will look at ensuring that this is done by offering assistance to those who do not.

**Patient Information Points** – Ally informed the committee that a survey is now underway to test the effectiveness of the information points and that part of this work would involve equality and diversity staff and users. The external company carrying out the independent evaluation of the pods would report back by the end of March and the resulting report would be brought to the first appropriate Involving People Committee meetings for discussion.

**Medical Prescribing** – Peter explained that Jim had put out a letter through the Involving People database asking for volunteers to become involved as lay people in pharmacy procedures and practices around medical prescribing. To date 150 positive responses have been received. Scott Bryson to take forward and report at next meeting.

**5. LOCAL HEALTHCARE BILL CONSULTATION**

An event has been arranged for the evening of the 12 March in Dalian House for representatives of PPFs to discuss and comment on the proposals contained in this consultation paper. The event has been arranged on behalf of the Scottish Health Dept.

**6. PFPI FRAMEWORK**

Ally explained that the third draft of the framework for PFPI - 2008/09 to 2009/10 is nearing completion. He explained that the full document was very detailed and complex but that Jim would be working towards creating easier to reference versions of the report making it easier for patients groups and individuals to seek out specific areas and input meaningfully Jim added that FMR have been asked to engage with members of the public to ask their opinion on the framework, also members of this committee are invited to give feedback. This committee will be kept updated on progress.
7. **NHS 60th ANNIVERSARY**

Ally updated the committee on the progress of the 60th anniversary celebration of the National Health Service. This will be mainly partnered between NHSGGC, Radio Clyde and The Evening Times. The celebration will start with a run of events beginning on 23rd June and building up to the main event, which is to be held in the Glasgow Royal Concert Hall on the 5th July. Links will be made with Glasgow City Council as a springboard to the 2014 Commonwealth games, also with the Blood Transfusion Unit and NHS 24.

Leading up to the 5th it is the intention of Radio Clyde to do a series of programmes and bring onboard some their of high level celebrity contacts. The Evening Times intends to produce a number of publications such as a health magazine using the theme ‘Life choices in health’ a supplement of ‘Times Past’ and host a web portal where the public and staff can link in to find out what is happening and where.

The main body of the event will take place on the 5th July and will culminate in a health awards ceremony, this will be hosted by ourselves and the Evening Times, there will also be exhibits showing past times of the last 60 years and our vision for the future. Monies will be raised for charities with our ‘bags for life’, which will be environmental friendly and sold in outlets throughout the area. It is our aim to engage with young and old and show how we will rid ourselves of the reputation we have as the sick man of Europe.

8. **OUR HEALTH EIGHT – MENTAL HEALTH**

This event has been postponed from the scheduled timeframe of May or June due to the significant activity being directed toward the 60th anniversary activity. It may be that the Our Health focus on mental health may be taken forward later in the year to coincide with mental Health Week (October 8th – 15th)

9. **INVOLVING PEOPLE DATABASE**

Ally explained that we have now engaged Axis Media to manage our Involving People database as a replacement for the company who has managed it for the past three years. The new management provider gives us the opportunity to make the database work more effectively for us by enabling “drill down” direct contact to special interest groups and post-coded groups. Amanda said that her CHCP (East Glasgow) would be very interested in this development.
10. **AOCB**

    Ally passed Staff News around the group, which was published earlier on the day of the meeting and also informed the group of the impending publication of Health News on February 13\textsuperscript{th}, which would be themed on the delivery of improved NHS hospitals and services.

11. **DATE OF NEXT MEETING**

    It was agreed that Committee would meet again on Tuesday, 11th March 2008. The meeting would commence at 12.30 pm with a buffet lunch served. The venue would be the Conference Room on the ground floor of Dalian House, 350 St Vincent Street, Glasgow.

Linda Davidson  
11\textsuperscript{th} February 2008