

GREATER GLASGOW AND CLYDE NHS BOARD

Paper No 08/34

INVOLVING PEOPLE COMMITTEE

Minutes of the meeting of the Involving People Committee
Meeting Room B, Dalian House
At 12.30 pm on Tuesday, 1st April 2008

PRESENT

Peter Hamilton (Chair)
Ravinder Kaur Nijjar Jessica Murray
Helen MacNeil Pat Bryson Joseph McAlwee

IN ATTENDANCE

David Brooks	Ashbrook Research
Eunice Muir	Director of Nursing (Acute Sector)
Jim Whyteside	Head of Public Affairs
Gordon Robertson	Public Affairs Co-ordinator
Anne Jarvis	Scottish Health Council
Douglas Martin	Scottish Health Council
Linda Davidson	Events Co-ordinator

1. APOLOGIES

Apologies were received on behalf of Scott Bryson, John Bannon, Grant Carson, Amanda Paul and Ally McLaws.

2. MINUTE OF MEETING 5TH FEBRUARY 2008

Approved.

3. WEB FOCUS FEEDBACK

Dr David Brooks from Ashbrook Research and Consultancy came along to give the committee a presentation on the key findings on the Website Review.

He explained that he had written to members of the public through the NHSGGC Involving People Database asking if they were internet users, what level of user and would they like to form a Web Focus Group and take part in determining website user views in respect of their expectations, accessibility, response, the extent to which NHSGGC's website meets these expectations and suggestions for improvement to the website.

David went on to brief the group on the findings of his research explaining that the group were split into occasional and extensive users. He got the groups to log onto the world wide web giving them a range of tasks from looking up holidays and short break, to opening times of leisure facilities, researching family history to purchasing and selling on eBay.

He then asked the group about their range of expectations – primary, secondary

and tertiary of the NHSGGC website. He discovered that half of the participants had used the website before for sourcing information.

The group logged on to the internet and were tasked to find the NHSGGC website. David stated that no respondent had any difficulty in finding the site. David went on and gave an overview of the groups initial responses to the homepage, the first reaction was mostly very positive with comments being that it was clear, well laid out, comprehensive and easy to use, with appropriate use of colours and images. There were only a few negative references; being that the homepage was cluttered, overcrowded, too much information and too much space devoted to news.

David went on to get the group to undertake some example scenarios and most respondents found this relatively easy to do. He found that the first exercise largely met the participants' expectations and only occasional internet users encountered any difficulties. The second exercise was set out for participants to source information where respondents used the search facility on the homepage. This was also mostly met by the participants, apart from the Health Issue link, which had insufficient information on the homepage to indicate where the most appropriate location to be directed to for relevant information.

David found that the majority of participants believed that the NHSGGC website met their expectations to a large extent but only a quarter said that it met it fully. The participants suggested improvements for the website on the homepage were the search facilities, greater use of graphics and to be more interactive. But the general conclusions were that the site has improved vastly since its development in 2006, it is largely meeting the expectations of users but there is scope for further improvement.

After David's presentation to the committee Peter commented that this was a positive piece of work and that a lot of progress had been made. He asked Jim for his view on the next steps.

Jim answered by saying that the basics are in place and improvements can be made and taken forward. He also said that we have tried to meet people's needs therefore this is why the homepage is so cluttered, a lot of the suggested improvements are cosmetic and it will not take a lot of money to make these alterations. An increasing number of people are using the site and this includes older people.

4. INFORMATION POINTS AUDIT REPORT

David presented to the committee on the findings of the audits on the Information Point Pilot which had been undertaken at Gartnavel General Hospital and Easterhouse Health Centre.

He explained that this had been carried out in two stages - Stage 1 research interviews had been undertaken by Ashbrooks on 250 members of the public (125 in both sites) *before* the introduction of the Information Points this was carried out in September 2007.

Stage 2 research interviews were then undertaken again by Ashbrooks on 500 members of the public (250 each site) *after* the introduction of the Information Points in February 2008.

David explained that the same questions were asked to members of the public pre and post Information Points on the two sites.

He went on to show the committee a series of graphs detailing the results of the two different types of findings from the same questions asked at the two sites.

David explained that although the findings were different for each site the overall response is that the Pods were found to be a positive improvement in accessing information.

Peter stated that we should look at extending the pilot to other sites in NHS GGC but was aware of the financial pressures at this time.

Gordon commented that some CH(C)Ps are looking at the costs which are £3,000 to £4,000. Costs can vary depending on the number of units required also it is recognised that health centre ownership is easier than in the hospital situation particularly with regard to replenishment.

Peter and Ally to discuss further prior to next meeting.

5. PATIENTS PANEL

Eunice Muir, Interim Director of Nursing for the Acute Division presented to the committee an outline of recent work associated with the creation of patient panels. These panels would help to populate the clinical planning groups set up to plan and redesign services in the new Stobhill and Victoria Hospital. They will bring a patient perspective to these, mainly clinical groups.

Eunice went on to spell out the key objectives in the development of ambulatory care on these sites, displayed photographs of both hospitals and gave a brief description on what type of buildings to expect e.g. Stobhill is more compact than the Victoria site where services are spread out in a wider area. Eunice stated that we are delivering to the public 21st century state of the art facilities and healthcare.

She explained that clinical planning groups have been set up to support and facilitate the clinical transition to agree current and future levels of activity, agree model of services across both site, give a multi-disciplinary review of the patient journey, review guidelines and protocols, agree schedules for clinics, procedures and sessions etc, consider refer pathways with CH(C)Ps and establish follow-up protocols. Staff and service users will be involved in this design.

Clinical planning groups will be needed to support and facilitate the clinical transition and CH(C)Ps will also have a role to play through PPF representation.

Operational and high level implementation plans need to be completed for all services and to do this we require the involvement of key frontline clinical and operational teams. This will be finalised by July 2008.

Patients Panels will participate in the clinical planning groups and will be selected from patients, carers and our volunteer "workforce." We will be developing workshops to allow the panel members to contribute confidently to the redesign sessions. This will be an ongoing part of the Acute Services Strategy.

It is expected the new Stobhill and Victoria hospitals will be fully operational by June 2009.

6. MATTERS ARISING

PFPI Framework – Jim informed the group that he had met with the Heads of Planning six weeks ago to discuss the framework. Catriona Renfrew has taken on board the need for better co-ordination within the CH(C)Ps in this process, she will also discuss the option of putting together a group equivalent to that created in the acute sector. Jim stated that the framework will not be ready by the 1st April.

Douglas distributed copies of the executive summary of a report commissioned by SHC examining progress in the development of PPFs and assessing what support and direction is needed in the future. Copies have been distributed to all CH(C)P Directors for their consideration. He also stated that the SHC had a positive reaction to the seminar they had held in the Marriott at the end of February 2008 for the PPFs.

6. THE PATIENT EXPERIENCE

Peter presented a paper to the committee “Better Together” – The Scottish Patient Experience Programme, a seminar he attended in February 2008 at Airth Castle along with other PFPI Health Board leads.

He briefed everyone on the content of the paper. Highlighting the main points, Peter said that the programme will be coordinated by Price Waterhouse Cooper who have been contracted to direct and manage the “Better Together Coordination Centre” for next three years and will be based in Edinburgh. The first survey of in-patients will take place in Autumn 2008 followed by two surveys in 2009 where the main focus will be patients with long term conditions followed by a second survey looking at patients’ experiences within primary care. The information for input into the survey will be gathered quarterly, the executive lead in NHSGGC for the project will be known in the coming week.

8. NHS 60th ANNIVERSARY

Jim gave the committee an overview on the progress of the 60th anniversary celebration which is taking place on the 5th July in the Glasgow Royal Concert Hall. He went on to say that he is working with Radio Clyde and the Evening Times to take this forward.

He also stated that the content for the day is starting to take shape. Radio Clyde will bring onboard some high level celebrities and the show will be hosted by Gina McKee. The NHS choir has agreed to participate, on stage interviews will take place, and a staff awards ceremony with 10 categories is to be launched on 21st April. Nicola Sturgeon, the Minister for Health and Wellbeing, has confirmed her attendance and has agreed to present the awards. The show will last for approx two and a half hours.

Radio Clyde will host a live road show in Buchanan Street adjacent to the Royal Concert Hall with NHS Scotland providing an exhibition vehicle, details of the content as yet unknown! Monies will be raised for charities with our 'bags for life' which will be environmental friendly and will be sold on the day and also in outlets throughout the area.

9. OUR HEALTH EIGHT – MENTAL HEALTH

Peter gave a short brief on the progress of Our Health Eight. He went on to say that the funding has yet to be decided for this event which is scheduled for some time during Mental Health Week which is 8th to 14th October.

10. CLYDE CONSULTATION UPDATE

Jim updated the committee on the progress of the Clyde Consultation, he went on to say that Clyde Maternity had just been launched and the adverts are due to appear in the local papers next week. There are pre planned events and drop in sessions taking place at the different localities in both Inverclyde and the Vale of Leven Hospital CMUs.

We are still waiting on comments to come back from the Scottish Health Council before we can launch Clyde Mental Health but we are hoping to go along with the planned date of 9th April.

There is no date as yet for the launch of Vale of Leven consultation on unscheduled emergency care.

11. AOCB

Peter informed the group that Brian Bannerman has started a pilot project with five volunteers for long term patients with literacy problems, they will help with reading literature, leaflets, prescriptions etc. In view of previous presentations to this committee on literacy issues this initiative was to be welcomed.

12. DATE OF NEXT MEETING

It was agreed that Committee would meet again on Monday, 2nd June 2008. The meeting would commence at 10.00 am to 12.00 midday. The venue will be Meeting Room 3rd floor centre (opposite lifts), Dalian House, 350 St Vincent Street, Glasgow.

Linda Davidson
19th May 2009