

Meeting of the Scottish Health Council Committee

Date: 15 September 2022

Time: 10:00am-12:30pm

Venue: Delta House/Hybrid

Present

Suzanne Dawson, Chair (SD)

Michelle Rogers, HIS Non-Executive Director Member (MR)

Dave Bertin, Member (DB)

Simon Bradstreet, Member (SB)

Elizabeth Cuthbertson, Member (EC)

Emma Cooper, Member (EmC)

Jamie Mallan, Member (JM)

In Attendance

Lindsey McNeill, Interim Director of Community Engagement (LM)

Ruth Jays, Director of Community Engagement (RJ)

Tony McGowan, Head of Engagement & Equalities Policy (TM)

Claire Curtis, Acting Head of Engagement Programmes (CC)

Derek Blues, Engagement Programmes Manager (DBI)

Robbie Pearson, Chief Executive, Healthcare Improvement Scotland (RP) (Item 1.6)

Jane Illingworth, Head of Governance and Planning (JI) (Item 1.6)

Richard Kennedy McCrea, Operations Manager (RKM)

Paul McCauley, Risk Manager (PMC) (Item 3.1)

Gill Graham, Non-executive Director (Item 3.1)

Denise Symington, Principal Service Change Advisor (DS)

Joy Vamvakaris, Social Research Analyst (Observer)

Susan McLaren, Project Officer (Observer)

Maureen McDowall, Engagement Officer, (Observer)

Sharon Bleakley, Engagement Programmes Manager (Observer)

Apologies

Alison Cox, Member (AC)

Nicola Hanssen, HIS Non-Executive Director Member (NH)

Victoria Edmond, Senior Communications Officer (VE)

Committee Support

Susan Ferguson, PA to Director of Community Engagement & Chair of SHC

Declaration of interests

No Declaration(s) of interests were recorded

1.	OPENING BUSINESS	<u>ACTION</u>
1.1	Chair's Welcome, Introductions and Apologies	
	The Chair (SD) welcomed everyone to the meeting and noted it was the first Scottish Health Council Committee (the Committee) hybrid meeting since Covid. She extended a warm welcome to Lindsey	

	<p>McNeill (LM) the new interim Director of Community Engagement (HIS-CE) and thanked Ruth Jays (RJ) for attending, and for all that she had achieved during her time in the role as Director of HIS-CE. An introduction was made to Michelle Rogers (MR) who has recently joined the HIS Board and was attending her first meeting as a SHC Committee member.</p> <p>After some reflection on the death of the Queen and the personal loss to the Directorate with the sad passing of Jane Davies, Head of Engagement Programmes, SD provided the following update to the Committee.</p> <p>1) Due to the recent change of the HIS-CE Director, the planned virtual Staff Away day session for all the Directorate will be used as an introduction for LM to the Directorate. She advised that timings would be shortened to a half day and that Committee members were still welcome to join.</p> <p>Apologies were noted as above.</p>	
1.2	Draft Minutes of Meeting	
	<p>The draft minutes of the Scottish Health Council Committee meeting, held on 19 May 2022, were approved as an accurate record of the meeting.</p>	
	Matters arising	
	<p>There were no matters arising.</p>	
1.3	Review of Action Point Register	
	<p>SD presented the Action point register to the Committee.</p> <p>CC provided an update on item 3.3 (19/05/2022) Redesign of Urgent Care (RUC) and advised that they are still awaiting re-establishment of the RUC Evaluation Advisory Group pending the results from their commissioned engagement work and at present there is no specific current role for HIS-CE.</p> <p>The Committee noted the content of the action point register.</p> <p>Action: SF to remove JD's initials from Item 3.5 (27/05/2021) Operational Plan 2021/22 and replace with Richard Kennedy McCrea (RKM) and change 'easy read' to 'easier read' as <i>Easy Read</i> is a brand name.</p>	SF
1.4	Business Planning Schedule	
	<p>SD presented the Business Planning Schedule to the Committee.</p> <p>The Committee noted the Business Planning Schedule.</p>	
1.5	Director's Update	
	<p>RJ provided the Committee with her last update and thanked them for</p>	

	<p>the support throughout her time with HIS-CE.</p> <ol style="list-style-type: none"> 1. A tribute was made to Jane and the impact her loss has had on the Directorate and the wider Healthcare Improvement Scotland (HIS). Staff huddles were held to check in on the well-being of everyone and these were well received by colleagues. She advised that there are discussions in place on how to honour Jane's legacy going forward. 2. Noted that the Committee were already aware of this difficult time for the Directorate with the increasing financial pressures, workforce, and the recent leadership changes which has led to extension of interim structure until March 2023. 3. Highlighted that the March 2023 Workforce planning was going forward, and advised that in her role as Interim Director, LM will be involved in this and also highlighted the importance of the Committee's involvement . <p>LM provided the Committee with a short update on what her immediate priorities were in the coming weeks:</p> <ol style="list-style-type: none"> 1. Getting to know the Senior Management Team, (SMT) Department Management Team (DMT) and their priorities. 2. Also getting out to meet all colleagues either face to face or virtual. <p>The Committee acknowledged the challenges that are facing everyone at this time and advised their focus would be on this.</p> <p>They thanked RJ for the verbal update and wished her success in her new role at Scottish Government and thanked LM for sharing her priorities for the Directorate.</p>	
<p>1.6</p>	<p>HIS Strategy Update</p>	
	<p>SD welcomed the Chief Executive (RP) and the Head of Planning and Governance (JI) to the meeting.</p> <p>RP reinforced the earlier tribute to Jane and welcomed the work that is going on to provide a legacy that is fitting for the void that Jane has left.</p> <ol style="list-style-type: none"> 1. An update was provided to the Committee on how the HIS Strategy is evolving from its original planned content to reflect the new and emerging operating context in which the wider public sector is now facing due to the financial challenges. 2. Highlighted the importance of clarity of vision, purpose and service delivery for the Directorate. 3. Advised there will be a need to make hard choices but HIS-CE are at the heart of HIS's response to the system. 4. JI shared a presentation with the Committee on the HIS Strategy. <p>There was a wide-ranging discussion with the Committee on the following points:</p> <ol style="list-style-type: none"> 1. What these financial challenges could potentially mean for NHS Boards in relation to their ability to conduct meaningful engagement with respect to service change, as well as what 	

	<p>that may mean for the work of the HIS-CE Colleagues.</p> <ol style="list-style-type: none"> 2. There was recognition that the <i>Scottish Approach to Service Design</i> may be seen as the default approach by some NHS Boards, however it was imperative to ensure that this be seen as part of a much larger suite of tools which can be tailored to meet local needs. 3. The need for the Committee to oversee this work to ensure it remains fit for purpose, that colleagues can oversee and be assured effective engagement is carried out, and that all major service changes are properly identified as such, and then formally reviewed by the Committee. <p>Assurance was provided to the Committee that further work is underway within the Directorate to ensure clarity of vision, purpose and service delivery.</p> <p>The Committee thanked RP and JI for the update and attending the meeting.</p> <p>Action: Engagement Programme Managers to ask about <i>Scottish Approach to Service Design</i> activity as they map part of the reconnection work.</p>	CC
2.	SETTING THE DIRECTION	
2.1	Quality Framework for Community Engagement	
	<p>Engagement Programmes Manager (DBI) provided a verbal to the Committee and highlighted the following points:</p> <ol style="list-style-type: none"> 1. Work with test sites is continuing with the regular meetings with partners being beneficial in sharing experiences. Colleagues attended a recent session in East Renfrewshire and reported back their findings, which were positive. 2. Another session took place for Colleagues to further upskill and build confidence to support partners. 3. Reached out to the Care Inspectorate for the future co-badging of Self Evaluation statements. 4. <i>Planning with People</i> (Version 2) has moved back to Spring 2023. Noted thanks to Julie Simac for the support provided with this. <p>The Committee thanked DBI for the verbal update.</p>	
2.2	Engaging People in the work of HIS	
	<p>The Head of Engagement and Equalities Policy (TMG) provided a verbal update to the Committee and noted that a full update would be provided at the next meeting.</p> <ol style="list-style-type: none"> 1. Accessibility and Easy Read training is underway with a positive reaction from all colleagues who are taking part in it. Guidance and process to follow with mainstreaming into the Directorate after September. 2. People's experience volunteer panel, three people have been recruited in Fife and we are now extending into 	

	<p>Grampian region. The aim is for four to ten volunteers in each region.</p> <p>TMG noted thanks to Rosemary Hampson for taking this work forward.</p> <p>The Committee thanked TMG for the update</p>	
2.3	Development Day – Follow up	
	<p>RJ provided a paper on the Development day's actions and asked the Committee to reflect on these as priorities may have changed in the intervening time.</p> <p>The Committee and the SMT had a reflective discussion to decide if the key priorities identified from that day were still fit for purpose given the more recent changes in operating / financial context.</p> <p>After discussion the Committee agreed that the priorities were still appropriate, and these are:</p> <ol style="list-style-type: none"> 1. The structure and focus of the Committee 2. The need to proactively reach out to the public 3. The change to the public's approach to engagement since the onset of the pandemic (and understanding the changing financial climate across the whole system) <p>Action</p> <p>Committee Members and SMT to identify actions which would move these priorities forward.</p>	
3.0	COMMITTEE GOVERNANCE	
3.1	Risk Register and Discussion around Risk	
	<p>SD introduced Paul McCauley (PM) Risk Manager and Gill Graham (GG) Non-executive Director, who had been invited to the meeting to provide the Committee with an insight into risk management within HIS and how risks were identified for the Risk Register.</p> <p>After reviewing the risks for the Directorate, it was agreed that there was a need for the Senior Team to re look at the current risks and discuss with DMT.</p> <p>The Committee found this insightful and informative and thanked GM and PM for attending the meeting.</p> <p>Action</p> <p>SMT to review current risks on Risk Register</p>	LM,TMG,CC
3.2	Service Change Update	
	<p>DBI provided an update to the Committee and highlighted the following points:</p> <ol style="list-style-type: none"> 1. <i>Planning with People (PWP)</i> - Working with colleagues in 	

	<p>Planning and Governance Team for an Organisation wide response. The first draft has been sent to SMT for consideration.</p> <ol style="list-style-type: none"> 2. Capital Investment Group (CIG) - Next meeting is 28 September to consider Scottish Ambulance Service Glasgow South. 3. Engagement Practitioners – Had a successful meeting last week, membership of the MS Teams page continues to grow. Plans are to continue to support this network with workshops being delivered on request. Next phase is to move to evaluation of impact on Practice. The next meeting is scheduled for early December. 4. Transport Animation was published on the HIS-CE website on 6 September concluding the suite of animations. 5. Lochaber Redesign Programme – Service Change Team were asked to consider whether this was Major Service Change. The team concluded this did not meet the threshold for this and this recommendation was agreed by the Service Change sub-committee on 18 August 2022. <p>DBI asked the Committee to:</p> <ol style="list-style-type: none"> 1. Discuss and approve the Service Change sub-committee’s recommendations that Lochaber Redesign Programme does not meet the threshold for Major Service Change. 2. Note the highlights mentioned and other current activity. 3. Consider the approaches to Regional and National Planning set out in Appendices 3 and 3.1. <p>The Committee:</p> <ol style="list-style-type: none"> 1. Agreed with the recommendation made by the Service Change sub-committee that Lochaber Redesign Programme does not meet the threshold for Major Service Change. 2. Noted the highlights mentioned. 3. Considered the approaches to Regional and National planning with no further questions. <p>The Committee thanked DBI for the update</p>	
3.3	Remobilisation and Operational Plan Progress Report	
	<p>The Operations Manager (RKM) provided the Committee with a paper for discussion.</p> <p>He shared two appendices and explained that with support from colleagues and committee members, the change to the Directorate’s approach to reporting was formed in line with our Performance Measurement Framework.</p> <p>He advised, rather than describing activities on a team-by-team basis, the Q1 Update describes how our work contributes to 10 outcomes, under three main aims, building capacity, raising awareness and, increasing diversity and inclusion.</p> <p>The following highlights were taken from the new Q1 update;</p>	

	<ol style="list-style-type: none"> 1. During Q1, regular strategic meetings were re-established with key contacts in boards and partnerships, to support their remobilisation. 2. The Quality Framework for Engagement is being piloted with NHS Ayrshire & Arran and three Health & Social Care Partnerships (HSCPs); NHS Greater Glasgow & Clyde; Aberdeenshire HSCP and East Renfrewshire HSCP. Planning sessions have been held with the Ayrshire & Arran teams and Aberdeenshire HSCP. 3. The Volunteering in NHS Scotland team continues to support robust and effective volunteering programmes. 4. The inaugural development session of the Engagement Practitioners' Network took place on 23 May. 5. Staff in our Fife office have been piloting an approach to the People's Experience Panel. 6. During May we carried out four discussion groups, ran an online survey and facilitated a discussion with Public Partners on the draft strategy for Healthcare Improvement Scotland. <p>The Committee were asked if they found the new Q1 update a helpful approach and they responded with the following feedback</p> <ol style="list-style-type: none"> 1. Found it helpful and pitched at the right level. 2. Liked the combination of text with infographics. 3. Really good, first steps to an overall improvement. 4. Appendix 2 is focused on activity but we need to make sure this is balanced with reporting on impact 5. In relation to Appendix 1, query over the logic of the whole approach. Feedback given that a logic model could be included. (What we do and how we do it?) 6. Requested that trend data be developed, although appreciated the time and effort involved in obtaining this. Discussion around internal linkages, especially with Finance and HR colleagues. 7. Need additional link to Finance and people. <p>RKM provided assurance to the Committee advising, that there was still work to do for the next iteration and going forward the report will be more about impact and activity reporting.</p> <p>Thanks were noted from RKM to EC and SB for their contribution.</p>	
3.4	Engagement Programmes update	
	<p>The Acting Head of Engagement Programmes (CC) provided the Committee with a verbal update, and acknowledged the attendance of colleagues observing the meeting virtually.</p> <p>Based on the three aims, building capacity raising awareness and, increasing diversity and inclusion, the following highlights were shared with the Committee:</p> <ol style="list-style-type: none"> 1. Engagement Practitioners network- meeting took place on 8 September 2022. 2. In Q1 One Webinar took place with 179 attendees. Q2 Webinar was cancelled due to national mourning for Queen 	

	<p>Elizabeth.</p> <ol style="list-style-type: none"> 3. Citizens' Panel 9 was published with significant press awareness and Impact Paper was sent to Scottish Government. 4. Citizens' Panel 10 fieldwork underway. 5. Chronic pain Gathering Views fieldwork underway finishing this week. <p>The Committee thanked CC for the verbal update.</p>	
3.6	Governance for Engagement sub-committee update	
	<p>TMG provided the Committee with a brief update and highlighted the following:</p> <ol style="list-style-type: none"> 1. Due to unplanned Senior Management absence the Governance for Engagement sub-committee (GfE SC) meeting scheduled to take place on 25 August 2022 was cancelled. Apologies were sent to both directorates involved. A new meeting date is planned for 2023. 2. As discussed and agreed at the last meeting of the GfE SC on 16 June 2022, the suggested revisions to the pro forma have been put in place, these pro formas will be in use for the next meeting which takes place on 27 October 2022. 3. A full GfE update will be provided at the next SHC Committee meeting. <p>The Committee thanked TMG for the verbal update and looked forward to seeing the full update at the next meeting.</p>	
4.0	RESERVED BUSINESS	
4.1	Service Change Sub-Committee meeting minutes	
	<p>DBI presented the Service Change Sub-Committee meeting minute from the meeting held on 4 September 2022.</p> <p>The Committee noted the sub-committee meeting minute.</p>	
5.0	ADDITIONAL ITEMS of GOVERNANCE	
5.1	Key Points	
	<p>After discussion, the Committee agreed the following three key points to be reported to the Board:</p> <ol style="list-style-type: none"> 1. HIS Strategy. 2. Development Day action plan. 3. Service Change Update Lochaber/Regional Planning. 	
6.0	CLOSING BUSINESS	
6.1	AOB	
	<p>The Committee shared their thoughts on the hybrid meeting and agreed it worked well for both those attending virtually and in person.</p> <p>SD noted that the next meeting would be held via MS Teams.</p>	

7.0	DATE of NEXT MEETING	
7.1	The next Scottish Health Council Committee meeting will be held on 17 November 10am-12.30pm venue via Teams.	
	Name of person presiding: Suzanne Dawson Signature of person presiding:  Date: 17/11/2022	