

Consultation on the role of the Scottish Health Council

Strengthening people's voices in health and social care

QUESTIONNAIRE

Healthcare Improvement Scotland is a public health body that aims to drive improvements that support the highest possible quality of care for the people of Scotland. The Scottish Health Council is a key part of Healthcare Improvement Scotland and currently plays a leading role in ensuring that NHSScotland listens to the views of people and communities and that it acts on those views. Healthcare Improvement Scotland is leading on a consultation which is designed to gather views on the future direction of the Scottish Health Council.

Healthcare Improvement Scotland wants to hear your views.

We want to hear your views on the future role of the Scottish Health Council. By answering the attached consultation questions, you will help us to ensure that the Scottish Health Council continues to evolve and play a valuable role in ensuring the voice of people and communities remain at the heart of health and social care. We hope to build on the Scottish Health Council's strengths and experience, giving it a renewed focus, which both fits the evolving service and policy context, and better meets the aspirations of people and communities across Scotland. We will collate and consider all responses to this consultation and aim to publish findings within three months of the consultation closing date.

The following questions should be read in combination with the full consultation document which can be accessed via:

www.healthcareimprovementscotland.org/shc_consultation.aspx

The consultation period runs from **21 July to 20 October 2017**.

If you require further information on this consultation, please contact:
Email: hcis.consult@nhs.net, tel: 0141 225 6999.

Who should complete consultation questions?

Healthcare Improvement Scotland is seeking the views of a wide range of stakeholders.

We are interested in the views of:

- **the public, individuals and organisations that engage or have engaged with the Scottish Health Council, or**
- **those which have a wider interest in patient, service user, carer and public engagement and participation in health and social care services.**

Confidentiality

Information provided in response to this consultation, including personal information, may be published or disclosed in accordance with the access to information regimes - these are primarily the Freedom of Information Act (FoIA) 2000, and the Data Protection Act (DPA) 1998.

If you want the information that you provide to be treated as confidential, please be aware that under the FoIA, there is a statutory Code of Practice with which public authorities including Healthcare Improvement Scotland must comply and which deals, amongst other things, with obligations of confidence.

Healthcare Improvement Scotland will process your personal data in accordance with the Data Protection Act 1998 and in the majority of circumstances this will mean that your personal data will not be disclosed to third parties.

Your Personal / Organisational Information

There is no need to answer all of the consultation questions unless you wish to do so.

Personal and organisation details will be used by Healthcare Improvement Scotland to demonstrate the range of individuals and stakeholders responding to this consultation. Contact details are requested in case we need to clarify what you are saying.

Individual names will not be disclosed in reports without prior additional permission.

(a) Please provide contact details:

Name	Prof Mark Strachan, Secretary
Organisation	Royal College of Physicians of Edinburgh
Email	l.paterson@rcpe.ac.uk
Telephone	0131 247 6373

(b) We may wish to contact you for further discussion relating to your responses. Please indicate if you are in agreement for this with an 'X'.

Yes, you can contact me	x
No, please don't contact me	

(c) Would you categorise your response as representing:
(Select one response only with an 'X')

Individual	
Public sector (health)	
Public sector (local authority)	
Charitable / voluntary sector health or social care organisation	
Academic / research institution	
Private sector – health or social care related	
Private sector – other	
Other (please state): Medical Royal College	x

- (d) If your response is from an umbrella organisation representing a wider membership, please indicate:

The number of members consulted	The College's Lay Advisory Committee was consulted
The number of responses received	

- (e) Please indicate (with an 'X') whether you currently (or over the last 12 months) engage with the Scottish Health Council:

	Yes	No	Unsure
Local office network (Community Engagement and Improvement Support)		x	
<i>Our Voice</i>		x	
Participation Network		x	
Performance and planning (Participation Standard)		x	
Public Involvement Unit (Healthcare Improvement Scotland)		x	
Service change		x	
Volunteering in NHSScotland		x	

If you engage or interact with the Scottish Health Council, why do you do this?

To obtain information

The following questions should be read in combination with the full consultation document which can be accessed via:

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There is no need to answer all of the consultation questions unless you wish to do so.

QUESTION 1

Should the Scottish Health Council support the involvement of people in social care services, as well as in health services?

Please mark your answer with an 'X'.

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>
Unsure	<input type="checkbox"/>

If yes, how should it do this?

In order for the Scottish Health Council to have a meaningful role in the integration of health and social care, it is essential that it bridges both services to ensure that the implementation of policy and practice is equally considered. It is important that the Integrated Joint Boards have representation from across the range of interests that are essential to the integration process. The views of those involved in delivering health and social care are vital. The Scottish Health Council could be a vehicle for bringing together views which can then be represented on the individual Integrated Joint Boards.

The whole present ethos and set up of health and social care in Scotland is an integrated one that acknowledges the established WHO models of practice that have activity and participation in everyday life at the centre of human existence; with health, personal and environmental factors as key constituents to active participation.

For the SHC to do this effectively, it will need increased co-operation and collaboration with other representative bodies. However, it is important to note that paragraph 2 states that "There is much good work already underway to hear the voices of people and communities..." It is important that the SHC does not duplicate that work but offers a different perspective and makes its own distinct contribution.

QUESTION 2

Healthcare Improvement Scotland thinks that the Scottish Health Council should work in the following ways:

People and communities

- Help people to know their right to be involved
- Support people to get involved
- Help people to get the information they need
- Ask people what they think

Community groups and voluntary organisations

- Share the things that people are saying about health and social care services
- Share ways of listening to people and involving them
- Find out which groups of people are not being heard

NHS boards, local councils, and Health and Social Care Partnerships

- Understand more about good ways to listen to people and involve them in giving their views
- Help Health and Social Care staff to understand how important it is to use good ways to listen to people
- Understand more about *Our Voice* and how to use it

Should the Scottish Health Council work in the ways described with:

	Yes	No	Unsure
(a) People and communities	X		
(b) Community groups, voluntary organisations and membership groups	X		
(c) NHS boards, local councils, and Health and Social Care Partnerships	X		

Please provide reasons for your answers to (a), (b), and (c) giving details where possible.

(a)	<p>Through the local network of health councils attached to the health boards there is a great opportunity to work in tandem with health and social care to highlight the importance of local people engaging with the pertinent issues, providing information and engagement opportunities. There should however be a focus on how the SHC can offer a service to people and communities which cannot be sourced elsewhere.</p> <p>The documentation and report on work to date shows that some headway is</p>
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	<p>being made, but given the population size to interactors ratio quoted, there is considerable scope for progress to be made.</p> <p>Members of the College's Lay Advisory Committee felt an emphasis on engaging with young people was missing. Many people will have negative experiences, lack of information and accessing them may be difficult, unless they have an existing particular motivation. Real change takes a generation, at least, to become established. They may not be users of many health or social services but educating people when they are young about the inclusive nature of 'health' and the importance their voice in service delivery will pay long term benefits. With, what will always be limited resources, a targeting of youth may in the long term be more effective than trying to motivate participation from the adult population.</p>
(b)	<p>These are motivated people and the strategy seems appropriate. Sharing information is always valuable.</p> <p>Increased collaboration with other voluntary sector organisations can increase the flow of information about the generalities of health and social care as well as specific issues.</p>
(c)	<p>As above. The SHC can be a bridge in acquiring and sharing information but also monitoring implementation of policy and practice</p> <p>The point was made by some Committee members that NHS Boards and similar bodies should already understand how to listen to and involve service users and the public. A clear case needs to be made for the value of the SHC in this moving forward.</p>

QUESTION 3

The Scottish Health Council thinks more could be done to find evidence of the best ways of:

- Hearing people's views on health and social care
- Involving people and communities in health and social care services

Should the Scottish Health Council lead in finding evidence of the best ways to support people and communities to get involved and give their views?

Please mark your answer with an 'X'.

Yes	X
No	
Unsure	

If yes, how should it do this?

As previously stated to act as a bridge using its local presence, currently in health boards, which could be extended and ensuring that there is a presence on the local IJBs. A collaborative role is essential which maximises the expertise and experience of individuals and organisations

It is important to look to examples of good practice within Scotland, the UK and worldwide. There are other agencies which have extensive experience leading in developing best practice in consultation and engagement. The SHC should build on this existing good practice and disseminate that information.

QUESTION 4

The Scottish Government wants NHS boards to listen to patients and local people about the quality of their services.

The Scottish Health Council has helped NHS boards to involve people and communities when changes are being made to local health services.

Should the Scottish Health Council offer advice to Health and Social Care Partnerships on how to involve people and communities when changes are being made to health and social care services?

Please mark your answer with an 'X'.

Yes	x
No	
Unsure	

If yes, how should it do this?

As for question 3.

QUESTION 5

The Scottish Health Council checks how well NHS boards listen and take account of people's views on changes to services.

The Scottish Health Council writes reports on how well people and communities' views have been listened to and taken account of. This is called "quality assurance".

Do you have any views on the Scottish Health Council's "quality assurance" role in NHS service changes?

Please mark your answer with an 'X'.

Yes	X
No	
Unsure	

Please tell us why you think this, and give details where possible.

Committee members had different opinions on this question.

There was a proposal that quality assurance is best achieved from within. An example in education is the turn round in Finish education when external inspections were effectively removed and internal autonomy and self-evaluation were seen as the key to participation and service improvement. Finland rose to the top of the 'world league' in education. SHC could play the central role in developing quality assurance standards and helping boards, areas and local units to use them effectively. This embeds long term change and improvement that is sensitive to local needs.

An alternative view put forward was that the SHC can bring the voice of recipients of care to the table and act on this, but there was a feeling that it would not be appropriate for it to have a quality assurance role as well. This is the role of Health Improvement Scotland to which the SHC makes a specific input: the SHC should have a very specific and focussed remit.

QUESTION 6

Some people are saying that not enough people know about the Scottish Health Council.

Some people are saying that we should change the name of the Scottish Health Council to something which explains more about what we do.

Do you think the name of the Scottish Health Council should be changed to make it easier to understand what it does?

Please mark your answer with an 'X'.

Yes	
No	
Unsure	x

QUESTION 7

We want to hear any ideas you have about how the Scottish Health Council might work in the future. We want to know any views you have on:

(a) **How the Scottish Health Council should be run and organised?**

The key result is what the SHC achieves and that its measurable outcomes improve over time. The results of the consultation should help officials make bold decisions for the future.

There was support for the local structure which was felt to be important in relation to the integration of services. The existing structure with local offices could be maximised to ensure that there is input at local level within health and social care and representation at the IJBs. Bringing this information together at a national level to provide evidence and feedback is important.

(b) How the Scottish Health Council should tell people about what it does?

It would be helpful to have a mission statement and short set of clear objectives that people can relate to. At present the SHC is far too inaccessible to most people.

It has a local presence with access to the range of places where people go for care, advice and information and this could be utilised to greater effect together with organising opportunities at local level to involve people in the community to be informed about the issues affecting them and to then voice the concerns/proposals etc back to the relevant authorities.

Any other comments

Is there anything else you would like to say about the Scottish Health Council?

Leading on from Question 6 and 7b:

It was felt the term 'council' is not inclusive or associated with engaging the population in general. Many Scottish people will associate the name council with bureaucratic and often inaccessible administrations. Any new title has to engage and to a large degree indicate the role of the body it relates to. In addition it requires a memorable acronym. Any new name must reflect inclusion of all, an aspiration and the earlier comments regarding integrated health and social care.

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You have completed this survey!

Thank you for taking the time to answer this survey.

Healthcare Improvement Scotland will collate and consider all responses to this consultation which will directly inform the future of the Scottish Health Council in co-ordination with our stakeholders. The outcome will usually be published within three months of the consultation closing date (**20 October 2017**).

Please email the completed survey to:

hcis.consult@nhs.net

Alternatively, you can post the completed survey marking the envelope with the following address:

**FREEPOST –
HEALTHCARE IMPROVEMENT SCOTLAND –
DELTA HOUSE**



If you require any further information on the consultation, please look at our website:

www.healthcareimprovementscotland.org/shc_consultation.aspx

You can also contact us via:

hcis.consult@nhs.net

or by calling 0141 225 6999

Thank you again for participating in our consultation.