

NHS GRAMPIAN**Minute of Meeting of the Engagement and Participation Committee
10.00am Wednesday 11 August 2021
via Microsoft Teams****PRESENT:**

Amy Anderson, Chair, Non-Executive Board Member
 Stuart Humphreys, Director of Marketing and Communications
 Louise Ballantyne, Head of Engagement
 Cllr Isobel Davidson, Non-Executive Board Member
 Nigel Firth, Equality & Diversity Manager
 Liz Howarth, Consultation & Engagement Officer
 Jenny Ingram, Associate Director of Quality Improvement and Assurance
 Chris Littlejohn, Deputy Director of Public Health deputising for Susan Webb
 Professor Louise Locock, Professor of Health Services, University of Aberdeen
 Anna Rist, Consultation & Engagement Officer
 Dave Russell, Public Lay Representative
 John Tomlinson, Non-Executive Board Member
 Lauren Tweedley, Consultation & Engagement Officer

ATTENDING:

Marilyn Elmslie, Communications Officer, Clerk to the Committee
 Adam Coldwells, Deputy Chief Executive and Director of Strategy
 Sarah Duncan, Board Secretary,
 Jenna Young, Planning Manager
 Linda and Tony Miller, NHS Grampian Disability Discrimination Act Review Group (DDARG) representatives
 Marlene Westland

No.		Action
1.	<p>Welcome and apologies</p> <p>The Chair welcomed everyone to the meeting, acknowledging guest speakers Linda and Tony Miller, who attended as representatives of the NHS Grampian DDARG to present item 4 on the agenda.</p> <p>Apologies were intimated on behalf of Paul Allen, June Brown (Jenny Ingram deputising) Kim Cruttenden, Cameron Matthew, Dr Lynda Lynch, Professor Nick Fluck, Rachel Little and Susan Webb.</p>	
2.	<p>Minute of the meeting held on 9 June</p> <p>Apart from a minor typing error on page 3, the minute was approved as an accurate record of discussions.</p>	
2a	<p>Action/Decision Sheet update</p> <p>Action 1 Women's services at Dr Gray's Hospital</p> <p>Stuart Humphreys reported that the Sensemaker engagement activity, which had been due to start in March, had been paused at the request of the</p>	

	<p>Scottish Government following its commissioning of an Independent Review into Maternity Services in Moray. Following the outcome of the Review in the autumn it is likely that Sensemaker, or similar engagement activity, will still be required as part of the Best Start campaign for NHS Grampian and Highlands.</p> <p>Action 2 Participation of Children and Young People Group Louise Ballantyne confirmed that the work of the North of Scotland Child Health Services Review continues. It was agreed to invite Tracy Davis, Child Commissioner and Anna Rist to provide an update at a future meeting. Action</p> <p>Action 3 Handling and Learning from Feedback Jenny Ingram confirmed that a meeting had been held with LB, SH and NF to discuss future reports for the EPC. The group discussed producing a report capturing key themes from the wider experience of patients and members of the public, a draft of which will be shared for comment at the next EPC meeting. Action</p> <p>Action 4 Advocacy A review of the funding provided to the 3 Independent Advocacy providers is being conducted. Louise Ballantyne noted that we await the findings of the review. A further update to be provided at a future meeting Action</p> <p>Action 5 Renewal and Development of the Board Role of EPC Further discussed under item 3.1</p> <p>Action 6 Draft Workplan of EPC It was agreed that relevant statutory documents and papers will be available for Committee members to read prior to publication. Action</p> <p>Action 7 Strategic Plan Development Further discussed under item 6. Standing item at all EPC meetings. To be removed from Action Tracker.</p>	<p>SH</p> <p>LB</p> <p>JI</p> <p>LB</p> <p>LB,NF & ME</p>
3.	Matters Arising	
	<p>3.1 Engagement and Participation Committee Discussion Paper for the Board – Version 2 The revised version of the paper presented at the EPC meeting in June was discussed at length and the input of Sarah Duncan as Board Secretary and change in structure of the document was acknowledged.</p> <p>Dr Chris Littlejohn welcomed the detail provided in the paper, in particular Appendix 1 which highlighted the publications that legislate and guide Boards. He referenced opportunities to work with Community Groups and the Community Empowerment (Scotland) Act 2015, which had notably generated few asset transfer requests.</p>	

		<p>Adam Coldwells suggested that we bring into the paper more of an understanding of the wide spectrum of engagement methods, which need to be fitting to the objectives of specific pieces of work, in order to achieve people powered health.</p> <p>Adam also recommended that the paper include reference to our approach being an iterative one that builds on the relationships with stakeholders, rather than being ‘a moment in time’.</p> <p>John Tomlinson highlighted that Equalities work requires to be included in the recommendations as they need to be embedded in everything that the NHS Grampian Board does. It was agreed that Equalities work is a core element that should be more prominent in the paper as well as the future Terms of Reference and assurance framework of the Committee.</p> <p>Dave Russell also noted that the importance of building relationships with Partnership colleagues and that representation from various organisations was required. Discussions were had on how that would best be achieved and it was felt that this would be better provided through a working/operational group of the Committee who could then provide feedback to the EPC to allow the Committee to become more strategic in their approach on assurance for the NHS Grampian Board.</p> <p>Amy enquired whether the chronology of the work required would fit within timescales for the Board and John Tomlinson highlighted the importance of ensuring that the work dovetails with the approach of all the other Board Committees. Sarah Duncan advised that the revised paper, incorporating feedback received, is required to be presented to the Board in October in order for it to approve the reshaping of the Committee. Once approved the development of the assurance framework and a review of the Terms of Reference can proceed with the aim of bringing a package to the Board in February or April 2022.</p> <p>Amy thanked everyone for their contributions. It was agreed to incorporate the constructive comments received and recirculate an updated copy by early September in readiness for submission to the October Board.</p> <p style="text-align: right;">Action</p>	<p>EPC small working group (AA, SH, LB, JT, DR)</p>
3.2		<p>NHS Grampian Engagement Gap Item taken after section 4 to allow guest speakers to participate and leave the meeting.</p> <p>Louise Ballantyne gave a presentation on the Scottish Approach to Service Design (SAtdSD). Louise explained that this method uses a shared, participatory approach to designing public services and is currently being used for the development of the ‘NHS Grampian</p>	

	<p>Plan for the Future 2022 – 2028’. Louise also noted that a framework is currently being developed by the Scottish Government which is intended to support Boards to move from the moment in time engagement set out in CEL4 (2010) engagement guidance to the more continuous participatory approach as set out in the new ‘Planning with People’ (2021) guidance.</p> <p>John welcomed the approach and sought assurance that partners, particularly Health and Social Care Partnerships, had been involved. Louise confirmed that an inclusive engagement leads group called the Grampian Engagement Network (GEN) has been set up and led by the Public Engagement Team. The GEN have received training on the SAtSD, National Standards for Community Engagement and the new Planning with People guidance, and are coproducing a best practice approach to engagement and an accreditation Hallmark for use across Grampian.</p>	
4.	<p>Equality and Diversity</p> <p>Nigel introduced Tony and Linda Miller who were invited to attend the Committee to provide an insight into their valuable voluntary work with NHS Grampian, Local Authorities and many other organisations to promote the rights of disabled people.</p> <p>Linda and Tony provided an overview of DDARG’s role and raised concerns over the funding allocated to provide disability access. They also highlighted the importance of being involved at the planning stage for new buildings such as the new Balfour and Gilbert Bain Hospitals to ensure the needs of disabled people are taken into account before construction work begins. It was agreed that some of the insights shared be included in the EPC Board Report.</p> <p style="text-align: center;">Action</p> <p>Amy thanked the Millers for providing the Committee with insights that can help inform its role in providing assurance to NHS Grampian Board.</p>	LB, SH, AA
4.1	<p>NHS Grampian “Mainstreaming Report April 2019 to March 2021”</p> <p>Nigel explained the requirement for the report under the Equality Act 2010 (Specific Duties) (Scotland) Regulations - which details the overarching work relevant to all 9 “protected characteristics”.</p> <p>Amy sought clarification on the difference between the Mainstreaming report brought to this meeting and the Outcomes report discussed at the EPC meeting in June. Nigel confirmed that the Outcomes report is what NHS Grampian will be doing in the future and the Mainstreaming report is retrospective and details what has been done in the past 2 years.</p> <p>Nigel then highlighted that draft no 4 of the NHS Grampian Equality, Diversity and Human Rights Policy was available to EPC</p>	

	members to read and provide comments. A link will be forwarded by email.	Action	NF
4.2	<p>Impact Assessment Explained The document was produced to explain the purpose of Impact Assessment and the importance for all policies, strategies or reorganizational proposals being introduced not to discriminate against the 9 “protected characteristics”.</p> <p>John enquired how the EPC can be ensured that Impact Assessments are completed when needed and the support for Executives are provided. Nigel replied that there are 40 trained Impact Assessors and that the documents requiring them are picked up by various sources such as the Policies and Strategies sub-committee of GAPF and the Print Review Group.</p> <p>Nigel enquired if Board Secretary, Sarah Duncan, had any thoughts regarding Executive support. Sarah confirmed that the Chief Executive’s office have agreed a new template for every paper going to the Board, which will include a section on Impact Assessment to ensure that, where required, it is done before it is received by the Board. It is also the ambition to ensure that papers going to all Committees will also use a similar template.</p> <p>Adam Coldwells noted that discussions are ongoing with a partner organisation to further develop an electronic method of completing Impact Assessments which should help to alleviate the risks for the organisation.</p>		
4.3	<p>Equality and Diversity Report Nigel commended the report to EPC – which provides details on Impact Assessor training, Equality and Diversity training seminars, meeting the communication needs of non-English speaking patients and disabled people and on the new Equality, Diversity and Human Rights Working Group.</p>		
5.	<p>Project updates – involvement and engagement activity Louise provided a brief overview of activity using an infographic showing 5 key priorities:</p> <ol style="list-style-type: none"> 1. Continue to develop relations and tap into more diverse, representative and hard to reach communities 2. Continue to support the NHS Grampian led system wide ‘Engagement Advisory Group’ 3. Continue to build momentum with continuous, real time, meaningful public and staff engagement 4. Continue to embed consistent system wide, evidence based, best practice engagement 		

	<p>5. Continue development of Engagement Champion roles and Gold Standard Engagement Accreditation.</p> <p>Louise also provided an update and highlighted the many projects, groups and support that the Public Engagement Officers are involved with.</p>	
6.	<p>Strategic Plan Development</p> <p>Jenna Young presented an update on the high-level process, timescales and approach of the NHS Grampian Strategic Development Plan. She explained that Phase 1 Engagement of the plan was formally launched on 28 June and continues until 31 August. Engagement reach will be monitored using the feedback from survey responses, facilitated sessions and in collaboration with partners. Statistics on the number of responses received and social media engagement were shared. Jenna noted the iterative process of engagement to support continuous learning and highlighted that learning points so far had populated a Learning Log. The next steps of the process will be a thematic analysis of feedback to inform Phase 2 activity and what the format of the end product will be.</p> <p>Discussions were had on the qualitative and quantitative data required and Prof Locock offered to meet with Jenna and Louise Ballantyne outwith the meeting to discuss further.</p> <p style="text-align: right;">Action</p> <p>John noted that an update to the EPC in November on the reach of the consultation and key themes identified would be useful. Adam commented that an outcomes framework will be established and will link with all the components which will be presented to the NHS Grampian Board in February.</p> <p>Dave commented on the cohort of “not digitally ready” and that the numbers this would represent. Louise Ballantyne explained that the consultation was targeting staff in areas such as Facilities to hold sessions that they can feedback into as not all staff have access to digital methods.</p> <p>Jenna was thanked for the useful update. The item will remain as a standing item on future agendas.</p>	Prof LL/LB/JY
7.	<p>Report to NHS Grampian Board</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. This was to highlight risks and opportunities.</p> <p>It was agreed that the report would include:</p> <ul style="list-style-type: none"> • EPC Board paper • Engagement Gap work • Equality and Diversity including the input from the guest speakers 	

	<ul style="list-style-type: none"> • Strategic Plan Development 	Chair
8.	<p>Any Other Competent Business There were none raised.</p> <p>The Chair thanked everyone for attending, the useful discussions and thoughtful questions.</p>	
9.	<p>The next meeting of the Committee is on Wednesday 10 November at 10.00am via Microsoft Teams</p> <p>Future dates 2022: Wed 9 Feb Wed 11 May Wed 17 Aug Wed 16 Nov</p>	