

NHS 24

Patient Focus and Public Involvement Annual Self Assessment Report 2009/10

1. Summary

1.1 Background

During 2009/10 NHS 24 presented evidence to indicate that a significant amount of planning and activity took place to progress Patient Focus and Public Involvement (PFPI). Progress was monitored through quarterly portfolio assessment submissions to the Board's Equality Diversity and Involving Patients and Public (EQIPP) Committee. The Scottish Health Council was represented on that Committee.

The examples given in this report were agreed with NHS 24's Public Partnership Forum (PPF) and Clinical Governance Public Panel (CGPP). A copy of this draft report has been shared with the Scottish Health Council.

The Board demonstrated that it has made significant progress in identifying and putting in place systems to record, monitor and evaluate key PFPI activities. For example, it established a database of events to quantify the time spent in interacting with the public. It also identified appropriate software, VOiCE, which will help the Board to plan, record and measure PFPI activities by integrating it into its IT system. They also developed a support proposal with the Scottish Community Development Centre. The Board also ensured that members of the public are represented on key projects this year such as the Call Streaming Project (a project concerned with giving patients a timeframe for when NHS 24 will call them back), National Health Information Support Services (NHISS), Strategic Frontline Application (SFLA) and Interactive Voice Response (IVR). The public were also represented on NHS 24's Pandemic Flu Programme Board.

1.2 PFPI governance arrangements with the groups and how they worked.

The governance arrangements in NHS 24 work as follows:

Board level – the (EQIPP) Committee has overall responsibility for ensuring that PFPI is progressed and that the quarterly assessment portfolios are approved. This Committee includes executive and non executive Board members, staff representation and members of NHS 24's PPF.

Local level – NHS 24 made significant progress in developing links with local communities, PPFs and Community Health Partnerships (CHPs) across Scotland with a programme of visits, meetings and discussions. It also made links with diverse groups, such as Deaf Connections, Deafblind Scotland and Indian, Pakistani, Chinese, Gypsy/Travellers and Polish communities. Feedback agreements were also developed with some PPFs including East Dumbartonshire, North Ayrshire and Dundee Public Partnership Groups to ensure NHS 24 listens to the public through structured channels.

In addition, local community groups worked in partnership with NHS 24 on a number of projects including the development of an information DVD for British Sign Language users on how to use NHS 24 which was distributed to relevant agencies across the country and uploaded on to www.nhs24.com.

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1.3 The progress made in developing NHS 24's Public Partnership Forum (PPF).

In 2009/10 significant strides were made to expand NHS 24's PPF membership, extending links to other organisations and raising awareness within NHS 24 to ensure that the views of the public are central to the organisation's progress.

NHS 24 successfully advertised and recruited an additional 17 members of the public into its PPF. Nine recruits joined the PPF core group which expanded to its maximum capacity of 20 members including NHS 24 staff representatives. NHS 24 also developed a database for three further levels of involvement with NHS 24.

Members of the PPF are also linked at national level with, for example, the Scottish Telehealth Centre, as well as being involved with NHS 24's functions and projects. NHS 24's PPF organised a national PPF event to share information about the service and to develop better links with other PPFs across the country.

1.4 Influencing the delivery of the service.

The public had a direct influence on a range of actions, some of which are outlined below:

- The Scottish Council on Deafness has worked with NHS 24 on several projects including the introduction of BSL interpreters to the Breathing Space service.
- Reviewing NHS 24's PFPI Strategy for 2006/09 and contributing to the development of the new PFPI strategy for 2009/12.
- NHS 24's PPF developed its own work plan and monitored its implementation.
- Members of the PPF took part in the Annual Review of NHS 24 on 26 August 2009.
- Members made direct contributions to equality and diversity policies, Impact Assessments, a new draft Volunteer Policy and NHS 24's Communications Strategy 2009/12.
- Members joined a working group that developed recommendations based on the results of research about users and potential users of NHS 24 and public awareness and understanding of the service.

1.5 What has worked well in progressing PFPI?

- NHS 24's PPF members attending the EQIPP Committee meetings.
- Increased local awareness of NHS 24 services and developing closer working relationships with Public Partnership Forums and accepting verbal and written feedback on NHS 24's services.
- Production of a British Sign Language DVD on accessing NHS 24 services.
- There was progress made on the Board's PPF, identifying its structure, expansion, raising its profile internally and mainstreaming PFPI further in to the organisation.
- Identifying and holding demonstration workshops for planning, recording and producing PFPI activities within the organisation using VOICE software developed by the Scottish Community Development Centre.
- Development of a Volunteer Policy for NHS 24.
- Establishment of support and partnership working with the Scottish Health Council and agreement on involving hard to reach groups for example Polish, Gypsy and Travellers' communities.

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- The name and brand for the National Health Information Support Service (NHS Inform) was developed through research with the public including hard to reach groups.
- Implementation of NHS 24's Learning Disability Action Plan.
- Development of an accessible PFPI Strategy document 2009/12 including easy read and BSL formats.

1.6 Where further work is required?

NHS 24 recognises that further work is needed to enable NHS 24 to integrate PFPI into its services. This includes:

- Continuing to develop NHS 24's PPF membership to include more diverse groups of people.
- Integrating multi-user software, VOiCE, into NHS 24's system.
- Further embedding PFPI into the key functions of NHS 24.
- Consulting on information cards for carers of learning disability patients.
- Marketing NHS Inform as a brand for National Health Information Support Services.

1.7 How have the public been supported to be involved and the difference it has made?

The public have been supported by:

- Changing times and venues to allow members of the public to attend meetings.
- Having a dedicated contact to go through meeting papers with PPF members to support their understanding.
- Providing alternative means of communication for those who have no online access, for example, posting documents.
- Writing reports and papers in plain and understandable language, for example, PFPI Strategy 2009/12.
- Offering individuals the opportunity to discuss issues on a one-to-one basis.
- Supporting PPF members to attend relevant NHS 24 meetings and paying their expenses.
- Sending relevant papers in advance and organising introductory meetings with relevant staff or projects before undertaking responsibilities.
- Induction sessions for new PPF members and jointly chairing NHS 24 PPF meetings.
- Hosting and presenting at a range of meetings, contact centre visits and community events across Scotland throughout 2009/10.
- Holding a national NHS 24 event to which all PPFs in Scotland were invited to send representatives.

The examples referred to in this submission demonstrate that NHS 24's Board is committed to progressing the PFPI agenda by improving its internal mechanisms and developing services in partnership with service users.

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2. Progress against actions for 2009/10

Identify and produce a contact list of communities in specific Hard to Reach groups.

This collaborative piece of work between the Scottish Health Council (SHC) and NHS 24 involved working with two hard to reach groups. Following approval of a proposal, the SHC provided support to compile a list of contacts from the Polish and Gypsy/Traveller communities in Scotland. These groups were identified through consultation with NHS 24 frontline staff and by analysing Language Line usage reports from BT. Two short-term posts were advertised on NHS 24's intranet, www.nhs24.com, S1 Jobs, amongst the gypsy/travellers' network and Polish magazine published in Scotland. This project will produce a list of contacts and consents from the two communities to be involved with NHS 24. It is also anticipated that the project will identify any issues related to the communities getting involved and accessing NHS 24 services. The project is expected to be completed by June 2010.

Develop plans with PPFs and interested community groups to increase their knowledge of NHS 24 services and collect feedback on NHS 24 services.

NHS 24 continued to work closely with PPFs and met with a wide range of community groups. An outreach programme of visits to NHS 24 contact centres was conducted throughout 2009/10. Community group visits to NHS 24 contact centres were arranged at contact centres across the country for East Dumbartonshire PPF, West Glasgow PPF, Moray PPF amongst others. NHS 24 also sent representatives to meet with members of the public across Scotland including North Ayrshire PPF, Aberdeenshire Mental Health Partnership, Elgin District Cancer Group, Moray and Banff Osteoporosis groups in Elgin. NHS 24 also attended the Cancer Support Group Conference organised by CLAN and the Scotland Patients Association Conference held in Edinburgh.

To ensure that NHS 24 listens to the wider public it agreed to receive and respond to feedback from PPFs and community groups. There were also requests from organisations for a member of NHS 24's PPF to be involved in a range of projects, including a request from the Scottish Intercollegiate Guidelines Network (SIGN) to nominate a member of the public to sit on the panel and review the SIGN guidelines for dental decay in pre-school children.

NHS 24 continued working with diverse groups. It developed, published and distributed a leaflet about interpreting services locally first, then reprinted the leaflet to meet the demand. It distributed the leaflet to all GP practices across Scotland and highlighted the availability of interpreting service, Language Line, when calling NHS 24. The leaflet was produced in six languages (Urdu, Punjabi, simple Chinese, Arabic and Polish) as well as English.

In consultation with the Scottish Council on Deafness a British Sign Language (BSL) DVD was produced, with subtitles, informing the BSL community about the services available and how to use NHS 24. It has been distributed to relevant BSL organisations and uploaded onto www.nhs24.com.

Implement NHS 24's Learning Disabilities Action Plan.

Following the development of NHS 24's Learning Disabilities Action Plan, the organisation focused its attention on specific key areas for progress. It ensured that all training materials for frontline staff are referenced to people and their families with learning disabilities.

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For routine communication and Mental Health Sessions, NHS 24 ensured that all Nurse Practitioners, Nurse Advisors, Health Information Advisors and Call Handlers have access to legislation and quality assured websites for further reading. NHS 24 has also developed an additional Continuing Professional Development (CPD) session and resource pack about the Learning Disabilities Review “Safeguarding Vulnerable Adults” legislation and its applicability to patients with learning disabilities. To support this specific community group, NHS 24 developed patient cards/information booklets in consultation with the Learning Disabilities Group for patients and their carers to use when contacting NHS 24. A funding application has been forwarded to Equally Well to undertake focus groups to support the engagement with learning disabilities groups in order consult on the card.

NHS 24 continued its progress in developing additional CPD sessions and a resource pack about Learning Disabilities, the review “Safeguarding Vulnerable Adults” legislation and its applicability to patients with learning disabilities. These sessions were also incorporated into core induction training and CPD.

Further develop nhs24.com to ensure this service delivery channel is as accessible as possible.

In order for the public to negotiate our website smoothly and for the organisation to demonstrate a user friendly approach NHS 24 undertook a refreshment of the front page which included colour contrast options. This refresh will be tested by the Scottish Consortium for Disabilities for accessibility.

NHS 24 health information aims to provide quality assured health information to the public therefore an agreement was reached with NHS Choices (England) to use their content and put it in to a Scottish context for use on www.nhs24.com

As a dynamic organisation NHS 24 is leading on holding a bank of quality assured health information at national level called NHS Inform, this action includes developing quality assured web content around the Health A–Z and the Health Library.

To ensure that the public has an accessible channel to feedback on our services, NHS 24 developed an online feedback form that is now in use in consultation with Clinical Governance Public Panel. To continue its work on the diversity agenda it published translated and easy to read content around swine flu, vaccinations and other related information.

Explore ways of working together with Scottish Ambulance Service (SAS) on common PFPI issues.

This project has identified areas of common interest in relation to PFPI between the two Boards. NHS 24 and SAS are currently scoping the viability of shared services including provision of ‘in house’ BSL translation services which will provide BSL users with direct access to translation, similar to and benefiting from the evaluation of the Breathing Space BSL pilot. There is cross representation of members of NHS 24’s PPF and CGPP and the Scottish Ambulance Service’s PPF. A member of NHS 24’s PPF is also represented on NHS 24/SAS programme of work looking at the development of a single triage outcome. In addition, SAS and NHS 24 have agreed to develop joint engagement opportunities with the public including events and presentations and visits by the public and community groups to NHS 24/SAS contact centres in Cardonald, Glasgow, and South Queensferry.

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Involve members of the public, including hard-to-reach communities, in the development of the National Health Information and Support Service.

In 2008/09 NHS 24 took the lead on providing quality assured health information to the public in Scotland. In order to give a name to the service a branding exercise for the National Health Information and Support Service (NHISS) was undertaken. A series of focus groups with the general public were facilitated throughout May/June 2009. A name for the service has been identified – NHS Inform. Further research took place with diverse representative groups regarding further brand development in relation to a logo and strapline for the service. A report is available on request.

This action also involved NHS 24's PPF in identifying a member to sit on NHS Inform's Advisory Group and Quality and Accessibility Working Group.

An NHS 24 PPF member attended the Quality and Accessibility Workshop on 1st September 2009 and continued representing the PPF. Presentations were delivered to PPFs in North Lanarkshire, and North Ayrshire in September 2009.

3. Scottish Health Council verification

The Scottish Health Council agrees that this self assessment represents a fair and accurate account of the progress made in the last year by NHS 24 in relation to Patient Focus and Public Involvement.

Adrian Rootes, Area Manager
Scottish Health Council

21 April 2010

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Annex

<p>Action 1 NHS 24 to develop planning, recording and monitoring processes for PFPI.</p>
<p>NHS 24 has developed an event record file so that an initial analysis of the actual time spent by the organisation on meetings with the public is completed and is being reported to NHS 24's PPF core group.</p> <p>Appropriate Board staff met to discuss issues regarding the integration specifications of the VOiCE software technology. The cost of the future support and training was obtained from the Scottish Community Development Centre (SCDC). A draft agreement between NHS 24 and the SCDC has been completed with an evaluation of the software to be carried out to ensure it is fit for purpose.</p> <p>The Board has also developed a map of PPF members' representative areas. This map will be published on www.nhs24.com.</p>
<p>Action 3 Increase understanding of the people of Scotland about the role of NHS 24 in out-of-hours service provision within Scotland.</p>
<p>The Board continued to work with territorial boards, other out-of-hours service providers and community groups to increase people's understanding of NHS 24's services. Examples included: contribution to the 'Know Who To Turn To' campaign evaluation; co-ordination of NHSScotland's Be Ready for Winter/Easter marketing campaigns for 2009/10; and, development of a BSL DVD about NHS 24's services that has been distributed to relevant organisations.</p>
<p>Action 8 In tandem with the Equality & Diversity team, establish formal links with organisations representing diverse communities.</p>
<p>Stonewall Scotland are members of NHS 24's Equality and Diversity Impact Assessment (EDIA) team and have worked with the Board to revise the Sexual Orientation Equality Action Plan. REACH are also members of the EDIA team and are being commissioned to do research on behalf of NHS 24. The Board also continues to work with the Glasgow Centre for Inclusive Living (GCIL) as it reviews progress of actions contained within the Disability Equality Scheme Action Plan.</p> <p>The action on partnership arrangements with faith communities relates to the production of a Religion Equality Scheme. Work on this is unlikely to be completed until April 2010.</p>