

NHS Grampian Engagement and Participation Committee Constitution

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Manager

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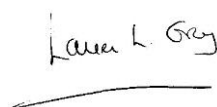


Identifier:

Reviewer:

Director of Corporate
Communications and
Board Secretary

Signature:



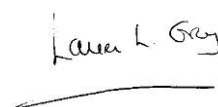
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2020

Approver:

Public Engagement
and Patient
Experience
Committee

Signature:



Approval Date:

2017

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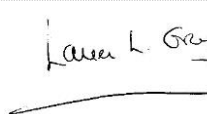
Revision Date	Previous Revision Date	Summary of Changes (Descriptive summary of the changes made)	Changes Marked* (Identify page numbers and section heading)
2017		Change of name of Committee	

* Changes marked should detail the section(s) of the document that have been amended i.e. page number and section heading.

Document approved by:

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Signature: 

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Designation: Director of Corporate Communications and Board Secretary

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Date:

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ENGAGEMENT AND PARTICIPATION COMMITTEE

“Engagement is by definition a two-way process, involving interaction and listening, with the goal of generating mutual benefit.”

(National Co-ordinating Centre for Public Engagement)

“Participation is a right held by all people to engage in society and in the decisions that impact their lives. Participation is thus a political endeavour that challenges oppression and discrimination, in particular of the poorest and most marginalised people. Participatory processes enable people to see more clearly, and learn from the complexity that they are living and working amid. Through participation people can identify opportunities and strategies for action, and build solidarity to effect change.”

(Institute of Development Studies)

1. BACKGROUND

NHS Grampian is an organisation in transition following the delegation of certain services to the Health and Social Care Partnerships. Our Local Delivery Plan 2016/2017 highlights the importance of NHS Grampian focussing on the strategic issues that it is uniquely placed to develop.

The 2020 vision for healthcare in Scotland describes a healthcare system where we have integrated health and social care, with a focus on prevention, anticipation and supported self management. Care should be provided to the highest standards of quality and safety, and the patient will be at the centre of all decisions.

In order to achieve our commitment to provide the best possible care and patient experience, we need to engage with patients, families, carers and the general public by:

- Making sure that when we are considering making changes we ask users of our services what they think and involve them from the outset in discussing options and planning the change
- Making sure that we involve people who might find it harder to give their views, such as those who are non-English speaking or have communication difficulties
- Improving how we involve children and young people
- Involving more members of the public in decision making by utilising Youth Forums, Multi-Cultural Forums, the Public Involvement Network and through partnership working with colleagues from the Integration Joint Boards (IJBs) in Aberdeen, Aberdeenshire and Moray
- Making it easier for people to tell us about their experiences and ensure that we value all feedback and learn from both positive and negative comments about our services

We must also ensure that we comply with all relevant legislative and policy requirements:

National Standards for Community Engagement outline best practice guidance for engagement between communities and public agencies. Inform, Engage, Consult CEL4 (2010) provides detailed requirements for participation.

The Equalities Act 2010 sets a public service duty to ensure that in the planning and delivery of services we contribute to: Eliminating discrimination; harassment and victimisation; advancing equality of opportunity and fostering good relations between groups.

The Patients' Rights (Scotland) Act 2011 aims to improve patients' experiences of using health services and to support people to become more involved in their health and health care.

The Public Bodies (Joint Working) (Scotland) Act 2014 requires that NHS Grampian and the Integrated Joint Boards ensure that there is effective engagement with all communities and partners in relation to the work of the partnerships.

The Community Empowerment (Scotland) Act 2015 requires public bodies to engage with 'community bodies', as they now have a right to participate in processes to improve outcomes. The Act requires NHS Grampian and the Integrated Joint Boards to implement a participation process, and in due course report annually on the outcomes, including how engagement has shaped the result.

2. ROLE AND REMIT OF THE COMMITTEE

The role of the Engagement and Participation Committee is to provide strategic direction, quality assurance and monitoring of progress on all aspects of Engagement and Participation.

The remit of the committee is to ensure that NHS Grampian and the Integrated Joint Boards:

- 2.1 Have robust mechanisms in place to ensure meaningful Participation and Engagement.
- 2.2 Meet Engagement and Participation legislative and policy requirements.
- 2.3 Have the mechanisms to engage with a wide range of people at locality level.
- 2.4 Provide a forum for members of the public who are committed to supporting the work of the partnerships.
- 2.5 Raise the profile of partnership and engagement activities and opportunities.
- 2.6 Provide opportunities for collaborative working across sectors with an ability to build capacity for participation and engagement.
- 2.7 Adhere to Equality Legislation by actively seeking to involve those within local communities who are not often heard.

The remit of the Committee is also to ensure that NHS Grampian:

- 2.8 Provides a strategic overview of engagement and participation.
- 2.9 Ensures that patients, carers and the general public are effectively informed about and involved in services, and the strategic and corporate agenda in a variety of ways.
- 2.10 Takes ownership of the Scottish Government CEL 4 (2010), Informing, Engaging and Consulting People in Developing Health and Community Care Services.
- 2.11 Has an overview of the implementation of the Community Empowerment Act, 2015, and the Scottish Health Council guidance regarding major health service changes.
- 2.12 Takes responsibility for the components of NHS Grampian's Communication Strategy and Clinical Services Strategy relating to engagement and participation.
- 2.13 Ensures that system-wide issues such as prioritisation, service improvement, service redesign, efficiency, productivity and financial sustainability are managed in the public domain and meaningful involvement is demonstrated.
- 2.14 Monitors and reports performance to the Board in relation to engagement and participation, and to provide assurance to the Scottish Health Council.
- 2.15 Ensures engagement and participation work links to the Clinical Services Strategy, IJB improvement plans and other community engagement plans.
- 2.16 Facilitates change by setting and promoting models of good practice and challenging poor and ineffective practice.
- 2.17 Takes responsibility of reviewing and challenging risks that are on the strategic or corporate risk control plans in respect of engagement and participation.
- 2.18 Assists the Board by the commission of key pieces of work.
- 2.19 Develops an annual work plan which takes account of the strategic outcomes of the Board, the IJBs and key strategic risks relevant to the role and remit of the committee.

The Committee must receive assurance from Sector and IJB Leads that engagement is:

- **Compliant**; with legislation, guidance and policies.
- **Coherent**; clear and carefully considered.
- **Comprehensive**; in its approach and delivery.
- **Co-ordinated**; effectively organised so that all the parts work well together.
- **Collated**; ensuring information has been gathered from different sources and has been studied carefully.
- **Critically reflected**; ensuring a reasoning process has occurred to make meaning of experiences.
- **Constructive**; that further development or advancement has been promoted.

- **Challenged**; ensuring engagement outcomes have been based on practical experiences and not ideas.
- **Clear**; why we are engaging, who we are engaging with and why, what we are doing with the information gained and is the engagement meaningful and proportionate.

3. RELATIONSHIP WITH THE NHS BOARD AND OTHER COMMITTEES

The Committee operates in order to assure the NHS Grampian Board on the effectiveness of system-wide engagement processes. In line with other Committees, the Engagement and Participation Committee will submit a report to the Grampian NHS Board, highlighting the main items discussed and agreed at each meeting. This will complement the existing process of engagement activity assurance reports linked to the risk register and submitted to the Performance Governance Committee.

The Committee's business (and agenda) is divided into the areas of

- Performance monitoring, assurance and assessment
- Patient experience and feedback
- Public involvement and consultation
- Patient, public and carer information
- Equality and Diversity
- Advocacy and Volunteering
- Carer Information Strategy

4. MEMBERSHIP

See attached Appendix A.

5. ATTENDANCE

The Director of Corporate Communications and Board Secretary acts as a key advisor between the Engagement and Participation Committee and other Committees in order to support each committee to deliver its roles. Other staff may be invited to attend Committee meetings to inform and/or report on specific matters.

All NHS Grampian and IJB Board Members have a right to attend as observers. Other members of NHS and IJB staff in Grampian may also attend as contributors or observers by prior arrangement.

6. QUORUM

A quorum is 50% of members plus one.

7. DEPUTIES

The Chair can appoint a Meeting Deputy (to cover unavoidable absence) from the members. Member deputies are required if attendance not possible.

8. MEETINGS

Meetings will be held approximately quarterly and dates will be arranged in advance for the year.

9. MINUTES/REPORTS

The minutes of meetings are submitted to NHS Grampian Board, and other Committees as appropriate.

All minutes are publicly available online under the terms of the Freedom of Information (Scotland) Act 2002.

10. STANDING ORDERS

The provisions of the NHS Grampian Standing Orders for Board meetings shall apply to this Committee as far as is practicable and appropriate.

Decisions reached by the Committee are by consensus with all members agreeing to abide by such decisions (to the extent that they are in accordance with the constitution of the Engagement and Participation Committee).

11. SUB-COMMITTEES

There may be other informal working groups dependent on programme of work of the Committee.

ENGAGEMENT AND PARTICIPATION COMMITTEE MEMBERSHIP LIST

Amy Anderson (Chair)	Non Executive Board Member
Paul Allen	General Manager, Facilities and Estates
Louise Ballantyne	Public Involvement Manager
Professor Amanda Croft	Interim Chief Executive
Kim Cruttenden	Principle Pharmacist (Clinical) – Chair of Area Clinical Forum
Cllr Isobel Davidson	Non Executive Board Member
Nigel Firth	Equality and Diversity Manager
Professor Nick Fluck	Medical Director
Fiona Francey	Deputy Director of Acute Services
Jenny Gow	Public lay representative
Laura Gray	Director of Corporate Communications and Board Secretary
Caroline Hiscox	Acting Director of Nursing, Midwifery and Allied Health Professionals
Liz Howarth	Public Involvement Officer
Linda Lever	Interim Feedback Manager
Rachael Little	Employee Director
Professor Louise Locock	Professor of Health Services, University of Aberdeen
Dr Lynda Lynch	Chair, NHS Grampian
Fiona Mitchelhill	Patient Safety Programme Manager - Safe Team Leader
Jonathan Passmore	Non Executive Board Member
Dave Russell	Public lay representative
John Tomlinson	Non Executive Board Member
Susan Webb	Director of Public Health
Marilyn Elmslie (Committee clerk)	Communications Officer/PA to the Director of Corporate Communications