

## NOT YET APPROVED AS A CORRECT RECORD

GLASGOW CITY INTEGRATION JOINT BOARD  
PUBLIC ENGAGEMENT COMMITTEE

IJB-PEC (M) 30-05-2018

Minutes of meeting held at Conference Room 1, Partick Social Work Office,  
35 Church Street, Glasgow, G11 5JT  
at 10.00am on Wednesday, 30<sup>th</sup> May 2018

**PRESENT:****VOTING MEMBERS**

Simon Carr	NHSGG&C Board Member
Cllr Michelle Ferns	Councillor, Glasgow City Council
Cllr Kim Long	Councillor, Glasgow City Council
John Matthews	NHSGG&C Board Member (Chair)
Trisha McAuley	NHSGG&C Board Member

**NON-VOTING MEMBERS**

Susanne Millar	Chief Officer, Strategy and Operations / Chief Social Work Officer
Anne Scott	Social Care Users Representative
Ann Souter	Health Care Users Representative

**IN ATTENDANCE**

Dr Richard Groden	Clinical Director
Stuart Donald	Principal Officer (Planning and Governance)
Allison Eccles	Head of Business Development
May Simpson	Community Engagement & Development Officer
Robert Smith	Chair of North West, Locality Engagement Forum
Sheena Walker	Governance Support Officer (minutes)
David Williams	Chief Officer

**GUESTS**

Andy Bell	Project Leader, North West Carers Service (HSCP)
Maureen Bowers	Centre Manager, West Glasgow Carers Centre
Liz Burnjes	Centre Manager, North West Glasgow Carers Centre
Harry Ramsay	North West Carers Forum

**APOLOGIES**

Janet Hayes	Head of Planning, Adult Services, NW
Cllr Jennifer Layden	Councillor, Glasgow City Council

The Chair welcomed all guests and presenters to the meeting, thanking them for their attendance and input to the Committee.

**1. DECLARATIONS OF INTEREST**

Simon Carr declared an interest in working with Health Care Improvement Scotland in producing a short film on housing and primary care; this will be complete by end June 2018.

**2. APOLOGIES**

The apologies for absence were noted as above.

**ACTION**

### **3. MINUTES**

The minutes of the meeting held on 11<sup>th</sup> April 2018 were approved as an accurate record subject to the amendment on page 5, item 8 raised by Trisha McAuley.

### **4. MATTERS ARISING**

There were no matters arising raised by the Committee.

### **5. ROLLING ACTION LIST**

Allison Eccles presented the rolling action list advising members that this was for information and noting.

Members referred to the comments raised at the IJB on 9<sup>th</sup> May regarding the long-term engagement plan for the safer drug consumption facility (SDCF) and the heroin assisted treatment (HAT) facility; and that this would be considered by the IJB Public Engagement Committee at an early stage.

Susanne Millar advised that the primary focus for the IJB Public Engagement Committee was the safer drug consumption facility, as the heroin assisted treatment facility was an extension of existing care services. Following discussion at the IJB officers had liaised with local elected members regarding the HAT facility and preferred location of Hunter Street; Cllr Layden had confirmed post meeting that an email from officers offering briefings had been received. A separate briefing for the HAT facility had been produced from the FAQ booklet and officers had contacted local elected members seeking an indication of what would be required in terms of engagement and how this should be operated; no response had yet been received. There had been no further enquiries regarding the HAT facility.

The Health Carer Users Representative proposed that awareness raising sessions take place for the community, possibly through the community cafes. Susanne advised that officers could brief the community on the issues that would lead to the safer drug consumption facility and that she would discuss with Ann out with the meeting.

**Susanne Millar**

### **6. STRATEGIC PLAN – CONSULTATION, ENGAGEMENT AND COMMUNICATIONS STRATEGY**

Allison Eccles presented a draft Consultation, Engagement and Communications Strategy to support development of the Glasgow City Integration Joint Board's Strategic Plan 2019-22. The content was based on the standards developed and approved by the Committee. Section 3 of the report summarised the content, aims and core messages of the strategy. A high level identification of stakeholders had taken place to be as inclusive as possible. A report will be presented to the Committee at the completion of stakeholder consultation, engagement and communication to show the lessons learned. The methodology and communications channels were outlined in appendix 1.

**Allison Eccles**

Members discussed the link between the Strategic Plans and Locality Groups and how this would be demonstrated. Officers provided reassurance that the Strategic Plan would be discussed at Locality Groups and would amend the report to reflect this.

**Allison Eccles**

Members also requested that officers consider how the work of groups that work with and support the HSCP to consult with members is recognised.

In relation to the timescale for consultation and engagement with equalities groups, officers provided reassurance that although the phase on the draft document stated between October 2018 and January 2019, officers were looking at events now and will begin to engage.

The Chair acknowledged that it can be difficult to engage with the community; but that the report indicated that officers would reach all groups, and if members thought there was a gap as the process developed then they should inform the Committee.

***The IJB Public Engagement Committee:***

- a) reviewed and approved the draft Consultation, Engagement and Communications Strategy; and***
- b) instructed the Head of Business Development to provide further updates to Committee during 2018-19.***

## **7. NORTH WEST LOCALITY ENGAGEMENT FORUM UPDATE**

May Simpson and Robert Smith provided an update on the North West Locality Engagement Forum providing detail of the topics considered by the group this year, including the 5 Year Mental Health Plan, Locality Engagement Forum Planning, Diabetes, Woodside Health Centre Update, Accommodation Strategy, Strategic Plan 2019-2022, Locality Plan 2018-19, Performance 2017-18, Health Improvement priorities, Primary Care Improvement Plan, Moving Forward Together; and Out of Hours Review. Robert advised that the session for the mental health plan was well attended with 100 people in attendance.

There were also planned topics for the remainder of the year and areas of work that were to be scheduled, including young people, children and families, recovery communities and carers. The Public Engagement Strategy would be presented to the Locality Executive Group on 6<sup>th</sup> June and there would be an opportunity to engage with service users and patients face to face.

Discussion took place regarding the link between Locality Plans and the Strategic Plan and how the Locality Plans informed the Strategic Plan; and then the Board's priorities. Officers advised that both would be reviewed simultaneously; this was a two way dynamic process to establish the priorities for the next three years for the localities and the City.

In terms of the communication and information discussion, Robert advised the Committee of an example of an individual being discharged from hospital and the patient records not being transferred to the GP. Richard Groden advised that GPs can receive information prior to discharge, but that if there were any issues Robert should inform Richard and if this was a regular issue then officers would share this information with the hospitals.

David Williams referred to rolling action reference number 12; and advised that a paper had been produced on carers in Scotland and engagement with IJB's and that this paper could be presented at a future Committee for discussion.

The work of the voluntary sector in engagement was recognised and that they could be utilised to assist the HSCP in engaging with people to maximise the reach.

Robert referred to the Moving Forward Together work and the need for officers to speak to the general public to ensure that they understood what plans were; and that they be made aware of these at the beginning. Officers provided reassurance that there was representatives from the public on the Stakeholder Reference Group and also third sector representation; opinions were being sought from the group on the wider engagement process. Officers would also be based at hospital sites to speak with members of the public directly.

## **8. GAP ANALYSIS ON ENGAGEMENT**

Stuart Donald informed the Committee that a report was produced by the Health and Sport Committee in September 2017 on Integration Authorities approach to engagement. Evidence from the Committee's enquiry, reflected in the report, suggests that in some areas engagement with stakeholders may not be working as well as it could. There were five key areas that were relevant locally; public awareness of IJBs; making engagement meaningful; costs of engagement, and complexity of doing so; issues of governance; locality engagement and representation. Based on the findings the Committee was reassured that there were a lot of areas that Glasgow had already taken action on; but also recognised that there were areas that could be improved. These were outlined to the Committee.

Officers proposed that the Participation and Engagement Strategy be reviewed in Spring 2019 and that officers present the Committee with proposals for the Participation and Engagement Strategy and how this would link to the Strategic Plan going forward. The Committee agreed with this proposal and that officers would explore if this could be conducted by someone out with the HSCP. Officers would also develop a metrics and evidence to assess effectiveness.

**Allison Eccles**

Members discussed improving visibility of the IJB Public Engagement Committee and the use of social media and Community Councils to promote meetings, to allow people to attend to observe and hear discussions. It was recognised that engagement was important and that further work could be done to improve this and that officers would explore methods.

**Allison Eccles**

The Health Care Users Representative informed members that when officers presented to stakeholder groups there were too many presentations and insufficient time for members to ask questions and discuss. Officers would feedback comments to presenters and ask that shorter presentations are provided.

**Allison Eccles**

## **9. IMPLICATIONS OF THE NEW GP CONTRACT**

Dr Richard Groden presented a report to update the IJB Public Engagement Committee on the implications of the new GP Contract. In January 2018, the Scottish GP Committee of the British Medical Association voted in favour of the new GP contract offer from the Scottish Government; this is the first Scottish GP contract. The Contract aims to support the role of the GP to deliver high quality care to patients. The role of the GP was defined and that six key areas for delivery were required by 2021; these were outlined as per section 1.4 of the report. The HSCP was required to have a Primary Care Improvement Plan agreed with a range of stakeholders completed by 31<sup>st</sup> July 2018; and this would be presented to the IJB in September for approval. The contract also focused on recruitment and retention of GPs. The impact of the new contract was outlined to members as per section 2 of the report. Officers reported that

there was a shift in change of access routes to primary care and this may look different in the future.

Members discussed the new contract and the changes this would result in for people using services. It was proposed that a video be produced to inform the public of what changes will be implemented to make them aware of these and understand what they mean for them. Richard advised that he would discuss this at the local Primary Care Steering Group and then take to the Board-wide group.

**Dr Richard Groden**

Members also queried if there was a risk of patients stopping using the service as a result of the change of access to services. Officers stated that people will still have the option to see the GP and that they were not creating barriers. The new contract would free up GP time to spend more time with patients with complex needs; and that the additional professional roles will still be part of the Practice team.

***The IJB Public Engagement Committee:***

***a) noted the implications of the new Scottish GP contract.***

**10. LOCALITY FORUM PRESENTATION – ENGAGEMENT WITH CARERS**

Permission was sought to a photograph being taken for the Chief Officer's Twitter page; this was agreed by members and guests.

Andy Bell thanked the Committee for the opportunity to present on carers' engagement; and introduced carer Harry Ramsay; and colleagues Maureen Bowers and Liz Burnjes from the North West Carers Centre.

The Glasgow Carers Partnership was founded in 2011 and has established an integrated model of service delivery to carers between Social Work Service Carer Teams, commissioned third sector Carer Centres and condition specific organisations and carers. The Centre provides universal support across the whole city and provides six services. The Carers Centre works with a number of partners; including Education as a new partner to promote young carer services. The Committee was informed that recruitment of a Carers Champion was in progress and that this will be a dual role with elected member support. There will be two Carer Champions and meetings will take place four times per annum. Issues will be taken forward by the Carers Champions and Carers Reference Group; with an action plan being developed.

The 2017-18 key performance indicators for city-wide and North West were outlined to the Committee; as well as the care management process and details of carer engagement. There were 13,500 registered carers in Glasgow since 2011; and the role of officers was to capture carers' issues and gaps in services. Prevention and early intervention is also important and engaging with the community. Carer engagement took place through carer forums, events, networks with other forums and groups; and with carers themselves via carer support plans, carer evaluation, locality groups, social media, carer booklets and education material; and also at the assessment stage. Officers raised that people did not always identify as carers and this could be an initial barrier.

Officers introduced Harry Ramsay, a carer and member of the North West Carers Forum who had been participating in the Forum for a number of years. Harry advised the Committee of his personal experience as a carer; explaining

that there were different phases of being a carer and it helped to identify which phase you were in; and also referred to the difficulties faced including the financial burden. Harry spoke about the benefits of being a registered carer, including the benefit of the Glasgow Carers Card and how this has supported him.

Members welcomed the presentation and the assurance of the work undertaken in the City. There was an estimated 50,000 carers in Glasgow and the service was engaged with 13,500; officers acknowledged that they were not engaged with all carers and there is unmet need.

The impact of caring responsibilities on young carers was discussed and members questioned how further engagement could take place to support this group. Officers advised that they were working with partner agencies to raise awareness; and sibling training was also provided. Young carers are also a target group of MCR Pathways; however officers advised that some young people refused to identify as a carer and that this must be accepted and respected.

The Chair thanked all presenters on behalf of the Committee for informing them of carers' engagement; and especially to Harry for sharing his personal experience with them.

## **11. NEXT MEETING**

The next meeting will be held at 10.00am on Wednesday 29<sup>th</sup> August 2018, at Conference Room, Eastbank Conference & Training Centre, 22 Academy Street, Shettleston, Glasgow, G32 9AA

The meeting ended at 12.35pm