Introduction

Welcome to the first Annual Report of Shetland’s Public Partnership Forum (PPF).

The PPF was first established in August 2010, replacing the previously successful NHS100.

In Shetland the role of the PPF is to:

- Inform local people about the range of health and social care services that are provided locally;
- Engage local service users, carers and the public in discussion about how to improve Community Health and Care Partnership (CHCP) services, such as GP services, Mental Health and Social Care services;
- Support wider public involvement in planning and decision making about public services; and
- Broaden and deepen public involvement in service provision through developing new networks.

Through this Annual Report we aim to highlight a number of activities where the public have contributed to the work of the NHS Board and/or CHCP, as well as having successfully influenced the decision making process.

As the current chair of the PPF, it gives me pleasure to present this report to you and I hope that you will find the report informative. I also hope that it may encourage you to consider what personal contribution you could make to helping improve the quality of care provided locally across hospital, community and primary care services.

If you would like further information on the work of the PPF, please do not hesitate to contact me on 01595 743377 or at edna.watson@nhs.net

Edna Mary Watson
Assistant Director of Nursing (Community) / PFPI Lead
Interim Chair of PPF
Getting Involved

The Public Partnership Forum is a network of local individuals and organisations who are interested in health and social care, and who want to be involved in how services are designed and delivered. Membership is open to anyone living or working in Shetland.

You can get involved in a number of ways, depending on what you are interested in and how much time you have to spare.

For example you can:
- Attend meetings to discuss relevant topics and issues;
- Sign up to receive information, updates or newsletters about local health and care services;
- Give your views about services by taking part in consultation exercises or by commenting on documents; and
- Give time to help to promote the Public Partnership Forum.

The PPF as a group meets approximately 6 weekly throughout the year and discusses a range of topics relevant to health and care services locally. Details of some of the topics covered over the last year can be found throughout this Annual Report.

National Consultation & Meetings

Local PPF members have represented the Shetland PPF on national groups.

Two members of the PPF have recently participated in the consultation on the proposed revision to the National Breast Screening service.

PPF Members have also been supported to either attend in person or to video conference in to national meetings regarding clinical services.

Why become a member of the PPF?

After each PPF meeting, members are asked to evaluate the session.

The evaluations are collated by the Local Officer of the Scottish Health Council, thus adding some independence to the process. Noted below are some quotes made by PPF members over this last year which highlight the benefits of the PPF;

- “Good thoughtful discussions on various topics, subject matters well explained”
- “Listening to views of lay people as well as staff, and how they intend to move things forward in the NHS”
- “Free-flowing discussion, it was relevant and good”
- “This is settling into a good meeting—well done”
- “Excellent discussion on Clinical Strategy — lots of good explanations”
Clinical Strategy
Following an open Shetland wide development process, the NHS Board approved it’s Clinical Strategy in February 2011.
An implementation plan was then developed to take forward areas of work under the following 5 work-streams;
- Integration of Health and Social Care
- Primary Care
- Child and Family Health Services
- Partnership Projects
- Hospital Services
Key areas of work that have been achieved or are in progress are:

Integration of Health and Social Care
- Implementation of a shift based system to provide a community nursing service on a 24 hour a day, 7 day a week basis, thus enabling more support to be provided to people in a community setting;
- Pilot of a generic health and social care worker role to be used to support individuals with health or social care needs to remain in their own homes;
- Provide new health clinic facilities for Fair Isle and Foula and pilot telehealthcare options to support the delivery of care in the remote island setting.

Primary Care
- Increasing access to appointments with Allied Health Professionals by implementing a trial for patients with a musculoskeletal problem to self refer directly to a Physiotherapist (without the need for a GP appointment). This service will commence in Autumn 2012;
- Review of the GP out of hours service. This project is being undertaken along with work to look at the sustainability of medical staffing in the hospital during the out of hours period, i.e. from 5pm weekdays and at weekends;
- Work has been undertaken to review patient pathways and reduce unnecessary review clinic appointments. For example, individuals who have had an endoscopy from which the results are normal will receive a letter from the consultant advising them of this as opposed to attending a review Out-Patient appointment. This will save patients travelling time and costs, as well as reduce the number of follow up appointments necessary.

Child and Family Health Services
- Implemented a single management structure for women and children’s services;
- Developed a pre-conceptual care service to support individuals who are planning to have a baby;
- Enhanced provision of maternity services, for example, by conducting elective Caesarean section procedures locally, where safe and appropriate to do so.
Partnership Projects

- The exercise project for individuals with a neurological problem, for example, MS or post-stroke, is well underway and is proving very popular and effective. Classes have moved from the Gilbert Bain Hospital to the Clickimin Leisure Centre as part of the move to integrate the exercise program into mainstream provision;

- A review of the Managed Clinical Networks (MCNs) is underway and objectives have been agreed for most of the networks. These networks provide a co-ordinated pathway for care between local services and services on mainland Scotland;

- A Visiting Services Operational Framework (VSOF) has been drafted to ensure that all operational aspects of visiting services are considered alongside the financial agreements. VSOF successfully piloted with the new Renal Visiting Service and its functionality will be reviewed throughout the year.

Hospital Services

- Improving the patient experience in the Accident and Emergency Department by enhancing the role of nursing staff in order that they can see, treat and discharge patients who present with injuries that they are able to treat within their level of competence;

- Creation of an “Admissions Desk” in the Out-Patient Department, Gilbert Bain Hospital to help improve the admission process for patients who are being admitted to the Hospital for a procedure;

- Reviewing pre-operative assessment services—Patients who are going to have surgery at the Gilbert Bain Hospital have a pre-operative assessment conducted face to face with a nurse. We are currently increasing the number of these assessments that are conducted by telephone to help decrease the number of times that patients have to attend the hospital prior to their surgery.

Dental Strategy

The Dental Strategy for NHS Shetland has been developed in 2011-2012.

The strategy has been developed with lay involvement throughout the process. A Dental Reference Group was established in the initial phases of the project, with lay members advising on the issues of concern to the local population and assisting in the development of a short questionnaire for distribution throughout Shetland to seek the wider communities views on both the current Dental service and on the priority areas for the future.

The PPF commented on the content of the questionnaire and discussed possible distribution methods to ensure as wide a coverage of the local population as possible.

Once in development, the Dental Reference Group and the PPF commented upon the draft strategy with a final presentation being made to the PPF prior to presentation of the strategy for approval to the NHS Board meeting in June 2012.
Pharmacy Developments
The PPF have been informed of a number of pharmacy developments over the last year.
Mr Chris Nicolson, Director of Pharmacy, has attended the PPF to discuss the following:

**Decision Making Framework for Medicines**
Mr Nicolson explained the process by which medicines become accepted for use within NHS Scotland through the Scottish Medicines Consortium (SMC).
The process by which appeals can be made against judgments was also explained to PPF Members.

**Pharmaceutical Care Service Plan**
Mr Nicolson discussed with PPF members the importance of having a Pharmaceutical Care Service Plan in place which could be used to shape and direct the future of pharmacy services in Shetland.
Members suggested the following as important aspects to consider when looking at the location of new Pharmacies:
- Transport Links
- Population centres / where people live
- Clusters of illness
- Location of current dispensing practices
- Local intelligence
- Convenience for the public, and
- Fit with the Board’s Clinical Strategy aspirations.

**Pharmaceutical Practices Committee**
Over the last year, four applications were received to open Pharmacies in Brae, Levenwick and Scalloway (2).
The Board set up a Pharmaceutical Practices Committee to review and consider the applications. Lay representation was key to this process.
The Pharmaceutical Practices Committee considered each of the applications and made site visits, prior to hearing each proposal for the establishment of a Pharmacy in the respective area. Three of the four applications were approved, however, Levenwick subsequently withdrew their application and thus only the Brae and independent Scalloway Pharmacies are being progressed.
The opening of Pharmacies in the Brae and Scalloway areas will enhance the level of pharmaceutical care available to residents in these areas as well as increase individual’s access to schemes such as the Minor Ailments Scheme and the Chronic Medication Scheme. All of this will enhance the appropriateness and timeliness of clinical decision-making for patients.

**Area Drugs and Therapeutics Committee**
The Area Drugs and Therapeutics Committee which considers prescribing issues locally has a lay representative from the PPF on the group.
**Better Together Surveys**

Better Together is the national patient experience survey which has been conducted in both the in-patient and primary care settings.

The in-patient survey was conducted for the second time in 2011 / 2012.

The top and bottom 5 areas rated by individuals who had had an overnight stay within the Gilbert Bain Hospital can be seen below:

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<th>The Top 5:</th>
<th>Lowest rated:</th>
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<td>• 99% reported that the information they were given before attending hospital helped them to understand what would happen.</td>
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<td>• 96% reported that the main ward or room they stayed in was clean.</td>
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<td>• 95% reported that they understood how and when to take their medicines.</td>
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<td>• 96% reported that, where their hospital visit was planned in advance, that they felt satisfied with the length of time they waited to be admitted to hospital after being referred.</td>
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<td>• 95% reported being treated with care.</td>
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<td>• 53% reported not being bothered by noise at night.</td>
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<td>• 52% reported that in the Accident and Emergency Department they were told how long they would have to wait.</td>
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<td>• 65% reported that they knew who was in charge of the ward.</td>
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<td>• 72% reported being told of any danger signals to look out for when they got home.</td>
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<td>• 86% reported feeling involved in decisions about their care and treatment.</td>
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It should be noted that whilst we are required to identify and action plan for our 5 poorest areas of performance, that the results we achieved in these areas were higher than the results achieved by most other Health Board areas.

As in the previous year an action plan was developed by staff with input from lay representatives via the PPF to address the areas where we performed least well.

**Volunteering**

NHS Shetland was successful in obtaining the Investors in Volunteers Award in 2011. As part of the work to achieve this award the Board has worked closely with Voluntary Action Shetland on the development of volunteering opportunities across primary and secondary care services.

There are various opportunities for individuals to become involved in the work of the NHS. This can be through working in clinical areas with patients e.g. befriending, being a musical volunteer or through being a member any of the various Board committees and groups and participating in some of their practical activities for example; cleanliness walkrounds, food tasting, etc as well as bringing the lay contribution to key group discussions.

If you are interested in volunteering within the NHS, please contact Mrs Janice McMahon, Assistant Director of Nursing (Hospitals), on 01595 743020
Scottish Ambulance Service (SAS)
The PPF has had 2 presentations from the Scottish Ambulance Service in relation to aspects of patient transport. Firstly, at the outset of the Re-procurement of the Scottish Air Ambulance Contract, representatives from the SAS gave a presentation to the PPF on the process which would be undertaken to re-procure the contract and sought information from the Forum as to what were the key issues in relation to patient air transportation to be considered for the Shetland population.

Secondly, in March 2012, the SAS presented the work that had been undertaken to progress their Scheduled Care Project. This project reviewed how the Patient Transport System worked across all of the Health Board areas in Scotland and has seen the introduction of a centralised booking system through the SAS regional call centres, introducing a standardised assessment for eligibility for patient transport and also a signposting service to local alternative transport providers for individuals who do not meet the criteria for SAS patient transport.

PPF members advised on potential locations for the information to be provided so that the local population became aware of the changes to the service.

You said, we’ve listened

From the evaluations of the PPF meetings a number of points have been raised by the members which we have acted on. These include:-

- Consider developing a local logo/Branding for the PPF - we are currently sourcing possible options for the “brand” and will select the final one with assistance from the PPF members;
- PPF meetings – members noted that some of the presentations given contained jargon which is not familiar to lay people and due to the complexity of some of the issues the number of topics presented in a session was too great. We now discuss with presenters their presentation and check for jargon. We have also reduced the number of topics presented to a maximum of 3 from previously 4 topics;
- Publicity – explore the use of Voluntary Voice to support spreading the word about the PPF. We have had an article in Voluntary Voice on the PPF and put forward dates of meetings for publication as well as using the Voluntary Action Shetland database to share this information amongst all voluntary groups in Shetland.

Topics for the future

The PPF members have identified the following areas for consideration:

- Transport
- Adults with Incapacity and the role of Power of Attorney
- Mental Health - Psychiatric Emergency Plan and Crisis service
- Patient Experience
- Ophthalmic Services
- Managed Clinical Networks
- Dementia
- Update on the CT Scanner
- Occupational Therapy
- Public Engagement
- Chronic Pain Service
- Dental Strategy
- PPF Meeting - roles, responsibilities, conduct

If you have a topic you would like to see the PPF discuss please let Ben Gray know. Ben’s contact details can be found at the end of our Annual Report
PPF Work Plan

The following activities are in the workplan for 2012 / 2013:

- Conduct recruitment campaign for PPF members via various routes e.g. Community Councils, personal approach, “bring a friend” etc.
- Hold a minimum of 4 PPF meetings during 2012 / 2013.
- Agenda for PPF meetings influenced / directed by PPF membership.
- Review diversity of PPF membership against the Shetland population, identifying any gaps in representation.
- Explore ways to target sectors of the local community to address gaps found through the above review (e.g. area based community planning structures), both in terms of ethnic groups, the young and also health care groups, for example; Individuals with Mental Health Difficulties.
- Review Scottish Health Council PPF Development Tool for resources to support development of local PPF structure.
- Recruit PPF members to be part of the Equality and Diversity Virtual Network.

Joining the PPF

Anyone who is resident in Shetland can join the PPF, you do not need to have any special qualifications or experience. Generally, PPF members tend to have either experience of having used health and/or care services or an interest in supporting the development/improvement of services locally.

Our current PPF Members come from a range of backgrounds and experiences and bring with them a wealth of knowledge, and breadth of experience of everyday living in the Shetland community as well as experience of using services.

If you would like to join the PPF please contact Mr Benedict Gray, Community Nursing Services Co-ordinator on 01595 743339 or you can download a Registration form from Shetland NHS Board’s website at :http://www.shb.scot.nhs.uk/board/ppf/index.asp

Completed forms should be returned to Ben Gray at the address noted on the form.
Forthcoming Training and Development Opportunities / Events

Making Your Voice Heard Training

This training, provided by Mr Dave Bertin, Voices Scotland Trainer, Chest, Heart and Stroke Scotland, will help individual’s understanding of where they fit in to the NHS & will support the development of some new skills which will encourage/support them to consider becoming a patient/carer representative on NHS / CHCP groups.

Patient or carer representatives are people who are engaged routinely in active partnerships with health professionals in the planning, monitoring and development of health services. Following this training some of the activities you could get involved in include:

- Sitting on committees that consider planning & service re-design and those that review research proposals.
- Responding to questionnaires, focus and group interviews.
- Attending public meetings / consultations & workshops.
- Sitting on patient user representative groups.
- Attending professional committees, steering groups, working groups and advisory groups.

The training will be held in the week of 8th October 2012 as follows:

Monday 8th October 2012 at 1600 - 1900hrs in the Post Graduate Education Centre, Brevik House, Lerwick. Drop in session for those interested in knowing more about getting involved with statutory service planning and delivery.

Thursday 11th October 2012 at 1000 - 1600hrs in the Practical Skills Room, Staff Development Section, Montfield. Making Your Voice Heard session as outlined above.

For details of the latest development opportunities please contact Ben Gray on 01595 743339 or email benedict.gray@nhs.net

Public Consultation on Integration of Adult Health and Social Care Services

The Scottish Government is currently consulting on proposals to Integrate Adult Health and Social Care services. A local consultation event will be held on Wednesday 15 August 2012 from 0930-1230hrs in Room 12, Islesburgh Community Centre. The event will be hosted by Ms Alison Taylor from the Scottish Government. If you are unable to attend the meeting full details of the consultation and how to respond can be found at: http://www.scotland.gov.uk/Publications/2012/05/6469

If you would like to know more about the work of the PPF please contact Edna Watson on 01595 743377 or at edna.watson@nhs.net Alternatively you can view the PPF website at: http://www.shb.scot.nhs.uk/board/ppf/index.asp

We hope you have found this annual report to be of interest. Please let us know if you have any suggestions of how future reports can be improved.