

**Patient Advice and Support Service (PASS):
Monitoring and Evaluation Advisory Group**



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A minute of the PASS Monitoring and Evaluation Advisory Group

held on Friday 11th March 2016

in Meeting Room 6A, Delta House

50 West Nile Street, Glasgow, G1 2NP from 1.30pm – 3.30pm

Present:

	Allyson Angus, NHS Tayside (by teleconference)
	David Brownlee, Citizens Advice Scotland
	Brigitte Cosford, representing Arlene Campbell, NHS 24
	John Hamilton, NHS Greater Glasgow and Clyde
	Jennifer Haynes, NHS Greater Glasgow and Clyde
	Christine Lang, Citizens Advice Scotland
	Annemarie Long, Scottish Health Council
	Susan McLaren, Scottish Health Council (note taker)
	Tina Morrow, Public Partner
	Derek Neilson, Patient Advisor, Clackmannanshire CAB
	Francis Santos, Scottish Government
	Aaliya Seyal, representing Jonny Miller, Citizens Advice Bureau, Airdrie
	Liz Taylor, Scottish Health Council (Chair)
	Nigel Walker, Citizens Advice Bureau East Dunbartonshire
Apologies:	
	Shaben Begum, Scottish Independent Advocacy Alliance (SIAA)
	Alison Gunn, Citizens Advice Bureau, Orkney
	Pauline Marland, NHS Forth Valley
	Andrew Moore, NHS Ayrshire & Arran
	Niamh O'Driscoll, Citizens Advice Scotland
	Rowena Price, Patient Advisor, Lothian
	Susan Siegel, Public Partner
	Dr Elspeth Weir, Community Pharmacy Scotland
	Shona Welton, NHS Lanarkshire

1. Welcome and introductions

The Chair welcomed those present to the meeting and thanked them for taking part in the group.

Apologies received in advance of the meeting were noted and group members introduced themselves.

2. Minute of meeting on 30th November 2015

The minutes of the last meeting were noted and approved.

3. Matters Arising

Extension of Framework Agreement for Patient Advice and Support Services

A letter was issued to NHS boards in January to inform them of the extension of the framework agreement for PASS. This extension will run from 1 April 2016 to 31 March 2017 and discussions are continuing about the retender for next year.

The group was asked to note that pricing over the extension period is 5% reduced from the previous year. This has had the effect that marketing of the service has to be reduced and from June 2016 the post of Marketing Officer will go. Some budget for marketing still remains but as the service is operating at capacity, to continue with the activities undertaken by the Marketing Officer, there would be a risk of unmet need.

Web page

The web page for this group is now up and running on the Scottish Health Council website www.scottishhealthcouncil.org/PASS.aspx. At present it contains minutes of the group since 2014, together with the terms of reference for the group and links to the PASS pages. It was agreed to put the agendas for group meetings on the web page in future as well as minutes, and time would be given at each meeting to discuss which other papers should be included. It was agreed that it would be helpful to have a link to the Independent Evaluation of PASS included on the web page.

4. Recommendations from Evaluation report

The independent evaluation of PASS was published in March 2015. There were recommendations for Citizens Advice Scotland, for Scottish Government, for Scottish Health Council, for local Citizens Advice Bureaux (CABx) and for NHS boards. The evaluation can be downloaded from the link below.

<http://www.cas.org.uk/about-us/partnerships-services/cab-service-partners/patient-advice-and-support-service>

Citizens Advice Scotland have made progress with some of the recommendations given in the report:

PASS statistics – a staff working group met twice last year to consider the statistics currently produced by the case recording system. This system is now being redeveloped with the design phase taking place between March and September 2016 looking at what can be provided and what boards need. This is with the aim of having the right statistic available for future provision. There are likely to be only minor changes to the report made within the current term as there is a requirement for certain information to be provided.

Client feedback – a quarterly report provided for the last PASS Monitoring and Evaluation Advisory group was felt to be useful. It was good to reflect that satisfaction rates were high. To date >180 clients have fed back which will provide sufficient data for a national year-end report. To provide more detailed work by board might not be possible for every one as in some areas the figures are quite small.

Alternative to face to face – a piece of work was carried out which identified that people's preference would be for local phone lines, rather than a national one. This is something that may be considered within the tender.

For **Scottish Government**, work on the recommendations has been focused around the extension and retender. It should be noted that Our Voice and the National Conversation are separate pieces of work and not to be confused.

With reference to Local Advisory Groups (LAGs), there is no intention to issue new guidance at present but Scottish Government will be engaging with boards as to what they would require in future. Boards represented at the meeting felt that it would be useful to have new guidance, particularly incorporating recommendations about involving the public. The guidance provided at the start of PASS was reflective of the fact that different boards started their Local Advisory Groups at different times and in some areas the functions of the LAG were incorporated within other existing groups. There is not a current overall picture of Local Advisory Groups across the country although it is known that some are still active.

An up to date overview of Local Advisory Groups across the country will be provided for the next meeting.

Action: D Brownlee

For **Scottish Health Council** the recommendations were about considering (with others) the evaluation of PASS and this group will be looking at progress against the recommendations.

Now that the web page is operational this can be used to share examples of good practice. It was felt that CABx would be best placed to identify where things were working well.

Christine Lang and Liz Taylor will discuss what examples might be useful to share in this way. Many of the positive relationships are built on day to day interaction between boards and the Patient Advisors.

Action: C Lang/L Taylor

The recommendation for local **Citizens Advice Bureaux** was around developing working relationships with relevant service providers such as advocacy organisations and this work is ongoing. In some areas additional codes (for reporting) have been created to see if where the links are can be identified.

For **boards** the recommendations were about supporting development of structures and mechanisms such as LAGs.

5. Retender of Patient Advice Support Services

Hazel Johnstone introduced herself as working on the retender for patient advice support services and explained the process and timescales for this, which is required under EU procurement rules. It is expected that the tendering process will commence in June and conclude in September 2016 with the new service due to start in April 2017.

As part of the process, feedback will be sought from NHS boards and a meeting is being held in March 2016 at which boards will be asked to help shape the requirements. It is hoped to have every board including special boards linking in to this meeting.

Hazel welcomed similar feedback from Citizens Advice Scotland.

Action: C Lang/D Brownlee

A number of points were made which should be considered as part of the retender process:

- Clients can be supported through the complaints procedure and have resolution of their complaint but capturing the changes to services that take place as a result of PASS intervention might not happen. It would be good to have something to cover this within the tender.
- Patient Advisors encourage a letter to come from the client, so replies from NHS go directly to the client. Patient Advisors might not get to know of the response if a client does not contact them again so recording of the outcome can be difficult.

6. PASS National Reports

An error to the figures has been spotted in the report sent out with the agenda. This will be corrected and the updated report shared with the group.

Action: C Lang

An annual report on client feedback will be produced at financial year end. This will be shared with the group.

Action: C Lang

The high numbers of referrals coming from Macmillan were noted. This is thought to be as a result of continuing relationships from previous agreements, rather than a current one.

A paper from Francis Santos was tabled which gives figures for new clients, total enquiries, enquiries at level 3 or above and enquiries dealt with by generalist advisors. Some anomalies appear in the figures but this is probably reflective of the fact that the final quarter figures are not included for 2015-2016.



Patient Advice and
Support Servic - stats

7. Feedback from PASS/NCPAS events

Joint PASS/NCPAS meetings are held biannually for Patient Advisors and NHS complaints staff with Scottish Government and Scottish Health Council also represented. Meetings took place this week in Glasgow and Dundee at which Paul McFadden, Head of Complaints Standards, SPSO gave a presentation on the revisions to the complaints process.

8. Any other business

Francis Santos advised the group that the Scottish Government is committed to bringing the existing social care complaints system more closely into line with that in health, and other public service sectors through the SPSO's model complaints handling procedure. The SPSO will work with stakeholders, to produce a Model Complaints Handling Procedure, which will be published before the SPSO takes on the function for social work complaints in April 2017.

The Scottish Public Services Ombudsman's Model Complaints Handling Procedure places an emphasis on 'getting it right first time' and is based firmly on quicker, simpler and more streamlined complaints handling with local and early resolution by empowered and well trained staff. The SPSO will have the power to make recommendations in relation to social work decisions including the power to exercise the discretion on the basis of professional judgement. The SPSO will obtain advice from experts in the context of these investigations, similar to when investigating clinical judgement decisions made by health bodies, the SPSO refers to expert medical practitioners.

9. Date of next meeting

It was agreed that the next meeting should be held off until late 2016 at which point there should be more clarity around the retendering.