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10 July 2009

A meeting of the **St John's Hospital Stakeholder Group** will be held within **Meeting Room 1, Strathbrock Partnership Centre, 189(a) West Main Street, Broxburn, EH52 5LH** on **Friday, 17 July 2009 at 2.00pm**.

A handwritten signature in black ink, appearing to read 'Alan Colquhoun', is centered on the page.

for Stakeholder Group

Business

1. Apologies.
2. Order of Business.
3. Declarations of interest.
4. Minute of Group Meeting held on 19 June 2009 (herewith).
5. NHS Lothian Rezoning Proposals – Update on Transport Issues.
6. Group Workplan (herewith).
7. AOCB.

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MINUTE of MEETING of the ST JOHN'S HOSPITAL STAKEHOLDER GROUP held within STRATHBROCK PARTNERSHIP CENTRE, BROXBURN on FRIDAY 19 JUNE 2009.

Present – Councillors Peter Johnston (Chair), Gordon Beurskens and Ellen Glass; and Bob Anderson (substituting for Dr Charles Winstanley), Maureen Anderson (Patient Representative) and Theresa Douglas.

Apologies – John Jack (Director of Facilities, NHS Lothian), Dr Ian McKay, Derek Thompson (Staff Representative) and Dr Charles Winstanley.

In Attendance – Dr Patrick Armstrong (Consultant Anaesthetist and Chair of Medical Staff Committee, St John's Hospital), Jim Forrest (Director of West Lothian CHCP) and Jennifer Stirton (Director of Communications, NHS Lothian).

## 1. MINUTE

The Group confirmed the minute of its meeting held on 8 May 2009 as a correct record, subject to the removal of the word 'adequate' in the second paragraph of item two on page 29.

Councillor Glass highlighted that there were certain items raised at the last meeting on which the Director of Facilities had undertaken to report back to this meeting. She was very disappointed that despite the undertakings, there had been no progress on these matters to her knowledge and no information had been forthcoming.

Councillor Glass informed the Group that she had met with the Director of Facilities since the last meeting to clarify a number of the requests for information. She had also asked for information on other matters.

Dr Armstrong advised that the Director of Facilities had since confirmed that in order to obtain some of the information requested, significant further detailed profiling would be required by the Performance Management team at the Edinburgh Royal Infirmary. He added that the requests had been passed to the Performance Management team and that an early response had indicated that some of the information requested could only come from the Scottish Ambulance Service and that some information may prove to be unobtainable.

Councillor Glass highlighted that at her meeting with the Director of Facilities she was not informed that there may be difficulties in obtaining the information requested and indeed, left the meeting with the expectation that it would be reported to this meeting of the Group. She advised that her requests could be worded differently if that would help.

The Chair advised that he shared Councillor Glass' disappointment at the apparent lack of progress with her requests for information. He suggested that a practical way forward would be for Councillor Glass to confirm the details of her requests with the Clerk who should then communicate these to the Director of Facilities with a further request from the Group that the information be reported back to the Group as soon as was reasonably practicable. He added that the Group should also be advised if certain information was unobtainable and the reasons why.

The Chair was of the opinion that where information was requested by any member of the Group at a meeting, or where an undertaking was given at a meeting that information would be reported back to the Group, then this needed to be acted upon accordingly. He advised the Group that he would raise this matter with Dr Winstanley

and the individuals concerned outwith the meeting.

Dr Armstrong advised that the Director of Facilities was on leave until week commencing 29 June 2009 however he would endeavour to discuss these matters with him on his return.

Decisions -

1. To agree that Councillor Glass should confirm the details of her information requests with the Clerk who should then communicate these to the Director of Facilities with a request that the information be reported back to the Group as soon as was reasonably practicable;
2. To agree that the Group should be advised if certain information was unobtainable and the reasons why; and
3. To note that the Director of Facilities was on leave until week commencing 29 June 2009 however Dr Armstrong would endeavour to discuss these matters with him on his return.

2. NHS Lothian Rezoning Proposals –

(a) Update on Social Work Issues

The Director of West Lothian CHCP informed the Group that he had met with the Director of Edinburgh CHP to discuss Social Work issues relating to NHS Lothian's rezoning proposals. An agreement had been reached that the current arrangements and protocols for Social Work assessments being undertaken prior to patients being discharged from a hospital which was outwith their area of residence would continue. These arrangements would also continue to be monitored closely particularly in relation to delayed hospital discharge.

Councillor Beurskens asked whether or not the Director of West Lothian CHCP thought that such arrangements would satisfy Lothian NHS Board as to the Social Work issues relating to rezoning, or whether these issues would remain an obstacle to progressing the rezoning proposals.

The Director of West Lothian CHCP undertook to write to the Medical Director, NHS Lothian, to advise him of the detail of the arrangements for Social Work assessments and to give a firm commitment to monitoring the situation. It would then be for the Medical Director to report that position to Lothian NHS Board. He also advised that reports on the matter would continue to be taken to the appropriate forum.

The Chair sought confirmation from the Director of West Lothian CHCP that there were currently no Social Work issues from a West Lothian perspective which would hinder the progress of NHS Lothian's rezoning proposals. The Director of West Lothian CHCP confirmed accordingly.

Decisions -

1. To note that the current arrangements and protocols for Social Work assessments undertaken prior to patients being discharged from a hospital which was outwith their area of residence would continue;

2. To note that the Director of West Lothian CHCP would write to the Medical Director, NHS Lothian, to advise him of the detail of the arrangements for Social Work assessments and to give a firm commitment to monitoring the situation; and
3. To note the confirmation from the Director of West Lothian CHCP that there were currently no Social Work issues from a West Lothian perspective which would hinder the progress of NHS Lothian's rezoning proposals.

(b) Update on Transport Issues

Councillor Beurskens advised that, as far as he had been able to ascertain, the Director of Facilities had not met with the Council's public transport officers to seek to address transport issues relating to NHS Lothian rezoning proposals, despite his undertaking to do so at the last Group meeting.

Councillor Beurskens advised that he accepted there would not be a solution to issues such as incompatible fare structures and buss passes in the short term, however he was very disappointed that there was no sight of solutions even in the medium term. He added that, in another forum, the Medical Director had undertaken to hold discussions with the Director of Facilities, who had responsibility for transport within NHS Lothian, with a view to these matters being progressed. He was not aware if these discussions had taken place. He was minded that urgent dialogue on realistic options was required and that a pragmatic approach to finding solutions was essential.

Councillor Beurskens advised that in recent years the Council had provided transport links for West Lothian patients travelling to the Edinburgh hospitals. He was of the opinion that it should be accepted that the public transport service, originally put in place for those travelling from West Lothian to Edinburgh, could and should be used by Edinburgh residents travelling to St John's Hospital. He added that if the travel times for West Lothian residents using this service to travel to Edinburgh were deemed acceptable, then the travel times should also be deemed acceptable for Edinburgh residents travelling to St John's Hospital using the same service. He was further minded that it was looking increasingly unlikely that the aspirations from the public for significantly decreased travel times for journeys from Edinburgh to St John's Hospital could be delivered upon.

The Chair was of the opinion that equity on transport issues should be the main goal that was pursued.

The Director of Communications advised that for around 18 months a Transport Group had been meeting to discuss transport issues as they related to health services. The Group's membership included the Director of Facilities, the Council's Public Transport Manager, transport officials from other local authorities, patients and other stakeholders. The Group did not have a remit to deliver on a specific piece of work but instead considered a wide range of general transport issues, as and when they arose or were highlighted.

The Chair asked whether there was an expectation that the Transport Group would recommend improvements before rezoning happened.

The Director of Communications advised that although she had not been present at the Transport Group's last meeting she understood that discussions on certain transport issues relating to rezoning had been progressed. She clarified that it could not be said however, that the Transport Group would recommend improvements before rezoning happened.

The Chair was keen that the Council's Public Transport Manager be briefed on the expectations of the Group in relation to progressing the aforementioned transport issues, so that he could convey these to the next meeting of the Transport Group.

Councillor Glass requested copies of the minutes from previous meetings of the Transport Group and the Director of Communications advised that she understood that these would be available.

Councillor Beurskens clarified that the Transport Group being discussed was not the Rezoning Group led by the Medical Director which in part was tasked with progressing the issues and concerns over public transport services between West Edinburgh Corridors 1 and 2 and St John's Hospital.

#### Decisions -

To note the discussion on transport issues relating to NHS Lothian rezoning proposals.

### 3. SHORT STAY ELECTIVE SURGERY CENTRE – SUGGESTED OPTIONS FOR PUBLIC CONSULTATION

The Chair initiated a discussion on suggested options for public consultation relating to the Short Stay Elective Surgery Centre (SSESC) by recalling the following comments and suggestions made by Dr Winstanley at the Group's meeting held on 8 May 2009:

- Local input would be welcome and it would be appropriate to consult with the West Lothian public on certain aspects of the execution of the development. This was not to say however, that the overall concept of the development should be open for challenge.
- The SSESC development needed to be described in lay terms in order to accurately and simply convey what it was proposed to look and feel like. A leaflet could be prepared, an event/exhibition held and a webpage produced, all to be utilised as mechanisms for collecting views on certain aspects of the development from members of the public. He suggested that NHS Lothian's communications team be asked to recommend what form such engagement and consultation would take.

The Chair invited the Director of Communications to contribute to the discussion on this matter.

The Director of Communications informed the Group that she was a member of the SSESC Project Board. She was minded that although there was no requirement to hold public consultation in respect of such a development, NHS Lothian were engaging with patients and staff through the Project Board. She informed the Group that the membership of the Project Board included the Chair of the St John's Hospital Patient Forum and a Partnership Representative.

The Director of Communications advised that the communications plan for the SSESC was in the process of being finalised. Information on what the SSESC would entail would be published in the next editions of NHS Lothian's Healthlink publication and Connections, its staff newspaper. There was also an opportunity to insert an article in the Council's Bulletin which was issued to every home in West Lothian. Furthermore, information would be made available for publication by the local, regional and national press.

The Director of Communications continued to advise that large promotional boards would be placed throughout St John's Hospital itself to inform people of the changes which would be happening. Prints and drawings of the proposed development had been exhibited in the dining room within the hospital for some time and information about the SSESC had been displayed on large electronic information screens.

The Chair indicated that he was fully supportive of the suggestion to place an article in the next issue of Bulletin, as this would also help reinforce the partnership between the Council and NHS Lothian. He asked whether there was scope to include a mechanism for people to return their views on the development.

The Director of Communications highlighted that care would need to be taken when considering this matter. She was keen to stress that there would not be a formal consultation as part of the communications plan and would not wish to raise the public's expectations as such, as there was no requirement for NHS Lothian to hold a public consultation.

The Chair was minded that there should be a mechanism to engage with the public, gauge their views and include them in the process of developing the SSESC, not because it had to happen, but because it would be a beneficial way for all parties to proceed.

Dr Armstrong indicated that from his perspective every possible step should be taken to avoid delays to the project. He was however supportive of obtaining feedback from the public on certain aspects of the SSESC development, for example, on the look and feel of the area for children to go when people were being picked up, but not for instance, on the number or designation of spaces which could be used for patients. He added that he would be concerned if any engagement was not constructed in appropriate terms and highlighted that public expectations needed to be carefully managed through any engagement process or mechanism.

The Chair did not wish to pre-empt what comments or feedback members of the public would give but he agreed that any engagement process or mechanism would need to be clear about its purpose.

Councillor Beurskens was of the opinion that at this stage, notwithstanding the fact that there had been no public consultation undertaken by NHS Lothian in respect of the SSESC development, a 'full-blown' consultation exercise was not necessary or desirable. He was however keen to see information about the development disseminated to the general public and for there to be some sort of facility or mechanism for comments to be gathered. He was hopeful that an appropriate way to proceed on this matter, which would be of benefit to all parties, could be found.

Theresa Douglas was minded that there was currently an opportunity for members of the public to feed into the SSESC development as the St John's Hospital Patient Forum had a representative on the Project Board. In respect of seeking views and comments from members of the public, she was concerned about how to accurately

define the purpose of such an exercise and how to ensure that the SSEC could be properly conceptualised.

Maureen Anderson suggested that if comments and views were sought from members of the public then these should only be on the non-medical elements of the development.

The Director of Communications stressed that care would need to be taken so as not to raise the public's expectations to the point that they could not be delivered on. She was also keen to stress that the Group needed to bear in mind that the SSEC was a development for patients from all across Lothian and not just West Lothian.

Councillor Glass was of the opinion that, although it was welcome that a representative from the St John's Hospital Patient Forum sat on the Project Board, the general public did not effectively feed into this forum and hence it could be said that such representation may not accurately reflect public opinion. The key point for her was to ensure that the public had confidence that the SSEC development would be for their benefit.

The Chair asked whether views of the general public could be gathered without raising expectations beyond what would actually be delivered. He was minded that there was an opportunity here for NHS Lothian to inform the public of what was being developed and at the same time ask what they thought about it.

The Director of Communications confirmed that she had no issue with the sentiments of the Chair. She confirmed that as part of an exhibition on the development, which would be taken to St John's Hospital, people would be asked to share their views about the SSEC. Furthermore, she highlighted that the articles placed in NHS Lothian's Healthlink publication and staff newspaper, and hopefully the Council's Bulletin, would also ask for people's views as well as signposting them to further information if required. It was the intention to have the communication plan finalised prior to the next meeting of NHS Lothian Board.

Further to a request from the Chair, the Director of Communications undertook to prepare a note of the parts of the communications plan which were relevant to the Group's discussion and forward this to the Clerk who would circulate it to all Group members.

#### Decisions -

1. To note that there was no requirement to hold a public consultation in respect of the SSEC development;
2. To note that it was the intention for the communications plan for the SSEC development to be finalised prior to the next meeting of NHS Lothian Board;
3. To note that opportunities would be available for members of the public to give their views on the SSEC development through the exhibition at the hospital and the articles in Healthlink, Connections and Bulletin; and
4. To note that the Director of Communications would prepare a note of the parts of the communications plan for the SSEC development which were relevant to the Group's discussion and forward this to the Clerk who would circulate it to all Group members.

4. ASSESSING THE HEALTH AND HEALTHCARE NEEDS OF THE WEST LOTHIAN POPULATION – TIMESCALES FOR COMPLETION OF WORK PROPOSED BY DIRECTOR OF PUBLIC HEALTH, NHS LOTHIAN

The Chair recalled that there had been lengthy discussions on this matter at previous meetings of the Group and was minded that the Director of Public Health needed to be in attendance at any meeting of the Group when this matter was being considered.

The West Lothian CHCP Director advised that as he understood it, the expectation was that the Director of Public Health would come back to the Group only when she had further details about her proposed work to report.

The Chair was of the opinion however that there needed to be a dialogue between Group members and the Director of Public Health prior to the details being reported back, in order that the expectations of all parties with respect to the proposed work could be confirmed and taken into consideration in the planning stages.

The West Lothian CHCP Director advised that he did not expect there to be any resistance to this suggestion.

The Chair asked if there was general support for the suggestion that members of the Group meet with the Director of Public Health to discuss the proposed work in more detail.

The Director of Communications advised that initially the Director of Public Health had been scheduled to be on leave at this time and as such would have been unable to attend this meeting. The Director of Public Health had recently cancelled her leave however, as she was responsible for coordinating the Lothians and Borders response to the Influenza A H1N1 Virus (Swine Flu). Indeed, currently the Director of Public Health's entire team were prioritising work on the Swine Flu situation above all else.

The Director of Communications advised that, although unable to confirm the position in the Director of Public Health's absence, she would expect there to be slippage with the initial timetable for the proposed work on assessing the health and healthcare needs of the West Lothian population, due to the priority which work on Swine Flu was being given.

The Chair was of the opinion that this was reasonable given the emerging situation with Swine Flu. He was minded that the Group's Workplan detailed the issues and concerns regarding the Director of Public Health's proposed work and that these would be the basis of any future discussions on the matter. He undertook to discuss these issues, and the timescales involved, with the Director of Public Health at an upcoming NHS Lothian away day, and would report back to the Group accordingly. He would also convey a request from the Group for the Director of Public Health to attend the Group's next meeting, if it was at all possible given the current Swine Flu situation.

Councillor Beurskens highlighted that he was concerned that any delay would also have an impact on the Short Stay Elective Surgery Centre, given that the Director of Public Health's work would also be used to inform the potential mix of services to be delivered there.

Dr Armstrong confirmed that the SDESC was scheduled to open in September 2010 and therefore the services which were being delivered there initially would be required to be determined three or four months before then.

Decisions -

1. To note that the Chair would discuss the issues and timescales relating to the proposed work on assessing the health and healthcare needs of the West Lothian population with the Director of Public Health at an upcoming NHS Lothian away day;
2. To note that the Chair would report back to the Group on these discussions;
3. To note that the Chair would also convey a request from the Group for the Director of Public Health to attend the Group's next meeting, if it was at all possible given the current Swine Flu situation; and
4. To note that as the Director of Public Health was responsible for coordinating the Lothians and Borders response to the Influenza A H1N1 Virus, and as this was the current priority for her and team, there may be slippage with the initial timetable for the proposed work on assessing the health and healthcare needs of the West Lothian population.

5. GROUP WORKPLAN

The Chair asked Group members if they had any issues they wished to be included in the Workplan and the consensus was that the items on the existing Workplan remain unchanged.

Decision -

To agree that the items on the existing Workplan remain unchanged.

6. PROPOSED SCHEDULE OF MEETINGS

The Clerk had consulted with all Group members and had prepared and circulated a proposed schedule of meetings for consideration.

Decision -

To agree the following dates and times for future meetings of the Group:

- Friday 17 July 2009 at 2pm;
- Friday 14 August at 2pm;
- Friday 2 October at 2pm;
- Friday 6 November at 2pm;
- Friday 4 December at 2pm; and
- Friday 15 January at 2pm.

## St John's Hospital Stakeholder Group – Workplan – 17 July 2009

Area	Rank	Action	Progress
Acute Emergency Status of SJH		Dr McCallum's work to inform Group's consideration of these matters.	
Accessibility and Transport for Patients Outwith West Lothian		Specific detail in this regard requires to be identified and appropriate agencies engaged.	
E.W.T.D: Impact of junior doctor training/rota compliance		Dr Winstanley to ensure information on this matter is brought to Group on an exception report basis.	
Cardiology provision in respect of SJH		Dr McCallum's work to inform Group's consideration of these matters.	
Colorectal Surgery at SJH		Dr McCallum's work to inform Group's consideration of these matters.	
Elective Orthopaedics & Theatre Utilisation		Dr McCallum's work to inform Group's consideration of these matters.	
Clinical Governance Issues - Dermatology		Clarity required from Group on the specifics.	
Further details on the development of the 'Hot/Cold' concept of patient care - including expected efficiencies and considerations being given to practical implementation.		Progress reports to be brought back to the Group periodically.	
Information on how the vision of St John's Hospital as a world leader in Head and Neck services and research could be realised, and on what was currently being done to progress this vision.		Progress reports to be brought back to the Group periodically.	

Information on how St John's Hospital's university hospital status could be further developed and enhanced.		Update on meeting with Sir John Savill given on 8 May 2009.	
Shared transport project – WLC, NHS and Ambulance Service		Progress reports on work between partners to be brought back to the Group periodically.	
Short Stay Elective Surgery Centre		On 19 June 2009 Director of Communications undertook to prepare a note of the parts of the SDESC communications plan which were relevant to the Group's discussion and forward this to the Clerk who would circulate it to all Group members.	
Assessing the Health and Healthcare Needs of the West Lothian Population.		Director of Public Health and Health Policy, NHS Lothian to confirm specific work which relates to the Group's remit and advise of timescales for completion.	
Traffic Management at SJH		On 8 May 2009 Director of Facilities undertook to re-engage in discussions with the appropriate Council officers.	
Nurse Escorts to the Royal Edinburgh Infirmary and the Western General Hospital		On 8 May 2009 Director of Facilities undertook to progress the request for info with Councillor Glass and report back the Group accordingly.	
NHS Lothian Rezoning Proposals – Transport Issues		On 8 May 2009 Director of Facilities undertook to report back on progress.	
Laser Services move to ground floor of SJH		On 8 May 2009 Director of Facilities undertook to report back with details of move.	