

## NHS GRAMPIAN

### Delivering Sustainable Primary Care Access to Dispensed Medicines in NHS Grampian – Supplementary Paper

#### Consultation Proposal

#### 1. Actions Recommended

This supplementary paper is to reflect on feedback provided at the Grampian NHS Board meeting on 2 June, and to provide further details of the consultation process.

1 The Board is asked to confirm the recommendations agreed at the Board meeting held on 2 June 2016:

- The Board is asked to accept the recommendation of the Primary Care Integrated Management Group (PCIMG), having taken advice from the Area Pharmaceutical Committee (APC) and the GP Sub Committee, that the practices of Strathdon, Glenlivet and Rinnes at Tomintoul should continue to be required by NHS Grampian to dispense for all of their registered patients living within their agreed practice boundary.
- The Board is asked to agree to the proposed review for the six remaining dispensing practices in Grampian i.e. Portlethen, Skene, Rhynie, Gardenstown, Udry Station and Auchenblae, to determine which patients of each of these practices, continue to have a serious difficulty in accessing prescribed medicines and appliances from a pharmacy as defined in the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2004 Paragraph 44 of Part 3.

2 The Board is further asked to approve the proposed consultation process described below and to agree to this process being launched on 4 July 2016.

#### 2. Strategic Context

At the Board meeting held on 2 June 2016 the Board considered the position where in some parts of rural Scotland General Practitioners dispense medicines to their own patients who are unable to secure the services of a community pharmacy. In 2015 the Board agreed to conduct a review of general practice dispensing across Grampian, to ensure that where a practice has been asked to dispense, this is in line with existing regulations.

The Board agreed to the recommendations in the paper submitted on 2 June 2016 but made some helpful suggestions about the consultation process. This process is described in more detail in this paper.

#### 3. Consultation Process

NHS Grampian is an open and transparent organisation, with public involvement and engagement a key component of operational delivery, service change and modernisation and all its processes and engagement being subject to scrutiny.

The way in which NHS Grampian involves, engages and communicates with the people of the north east is in accordance with CEL 4 (2010) – Informing, Engaging and Consulting People in Developing Health and Community Care Services.

A comprehensive communication and involvement plan has been developed for this work (Appendix 1). In developing the consultation process care has been taken to ensure that all stakeholders have the opportunity to express their views and that these can be considered by the review group, before any recommendations are developed.

The consultation process will include the following actions:

- Initial discussion with Scottish Health Council to inform them of the work and to seek advice on the process. The Scottish Health Council promotes Patient Focus and Public Involvement in the NHS in Scotland. A key aspect of their role is to support NHS Boards and monitor how they carry out their statutory duty to involve patients and the public in the planning and delivery of NHS services. The Scottish Health Council's core functions include:
  - Community Engagement and Improvement Support
  - Participation Review
  - Service Change
  - Participation Network
- The development of an information sheet and questionnaire to patients of Auchenblae, Gardenstown, Portlethen, Rhynie. Skene and Udney Station.
- Letters to the dispensing practices under review
- Information sheets and questionnaires to all elected members (Councillors, MPs and MSPs), independent contractors – (community pharmacies and medical practices), community organisations and Community Councils in the areas where dispensing is under review (Appendices 2 and 3)
- In conjunction with Aberdeenshire and Aberdeen City Health and Social Care Partnerships, proactively establish local community information/drop in/feedback events in the communities where dispensing is under review
- Separately there will be communication with the GP practices, communities and stakeholders in Strathdon, Glenlivet and Rinnes at Tomintoul that they are outwith the scope of the review.
- All written information will be adapted for NHS Grampian's website and for an online Lime survey.
- A consultation poster with dedicated nhsg.involve email address and contact telephone number will be developed and distributed
- All groups and organisations in the areas of the six GP practices where dispensing is under review with active Facebook pages and Twitter accounts will be mapped and involved through social media

- All Public Involvement Network members living in the six areas where dispensing is under review to be mapped and informed about the consultation
- All documentation to be Impact Assessed prior to launch of consultation
- Consultation to be launched with comprehensive media release to all media
- Scottish Health Council major service change template to be completed
- Posters and flyers to be distributed across the six areas where dispensing is to be reviewed utilising shops, libraries, community facilities, GP practices, community notice boards, community centres etc
- Corporate NHS Grampian Twitter and Facebook accounts to be used to disseminate information
- Consistent process to be in place to ensure logging, acknowledgement and response to all email and written enquiries, requests for meetings etc.
- Consultation to be discussed at regular meetings with Grampian MPs and MSPs
- All material to be available in translated format or all other formats on request e.g. alternative languages, large font, cd, Braille etc.

#### **4. Review Group methodology**

At the Board meeting on 2 June 2016, Board members provided some helpful guidance on the methodology that should be adopted for the review group.

On the basis of this advice, it is proposed that the review group responds positively to all requests received for groups and individuals to make representations and presentations. Clear guidelines will be produced describing the process for doing this. For example, written submissions must be provided in advance, those presenting will have a clear timeframe for their presentations and the meeting will be recorded to enable accurate transcription of the information presented.

The opportunity to make representations and presentations to the review group will be opened up beyond those defined as “Principal interested parties” in the original Board paper, to include individuals and organisations who request this facility.

Once the review group has heard all representations and presentations and has had the opportunity to ask questions of all presenters, the review group’s deliberations will take place in private. This acknowledges the fact that certain information that the Review Group will be party to could be about individual patient circumstances and confidential in nature and cannot be discussed in public etc. However the recommendations resulting from the Review Group’s deliberations will be made widely available.

Depending on the number of representation requests received the time required for the Review Group to meet and the administration required to support its functioning could affect the overall timeline. Whilst it is important to move the work of the consultation and review forward in a timely manner, there will be no effort to constrain the time required and Review Group members will be informed of the anticipated time commitment from the outset.

The membership of the Review Group will include two members of the NHS Grampian Public Involvement Network, who are not patients of the practices affected by the proposed changes to dispensing.

The recommendations of the Review Group will be provided to all those who provided submissions and made representations and presentations.

Following the final Review Group recommendation being considered by the Integration Joint Boards (IJBs), the recommendation will come to Grampian NHS Board for final decision. The Board is reminded that Standing Orders allow for the receipt of deputations should this be requested at that time.

## **5. Key matters relevant to recommendation**

It is essential that the process of consultation is rigorous, comprehensive, inclusive and allows everyone the opportunity to participate. Care has been taken to establish a comprehensive process but also to share this with the Scottish Health Council and colleagues in the Scottish Government. The process will remain flexible and responsive and will be reviewed on an ongoing basis.

## **6. Risk Mitigation**

The risks involved in the review include ensuring that sufficient time is allowed for a robust consultation process and that sufficient capacity is directed towards this work. Both these areas have been the subject of careful discussion, adjustments to workloads and detailed preparation. The work will be overseen by a Steering Group and the consultation process will be reported through the Patient Focus and Public Involvement Committee.

The key learning from the Judicial Review of NHS Grampian's decision making with respect to Haddo Medical Group was that any process must be fair and provide fair opportunity for those stakeholders involved to engage with the review process.

## **7. Responsible Executive Director and contact for further information**

If you require any further information in advance of the Board meeting please contact:

### **Responsible Executive Directors**

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## **Additional supporting information**

- a. Copy of paper submitted to Grampian NHS Board – 2 June 2016
- b. Communication and Involvement Plan
- c. Information sheet to all stakeholders
- d. CEL 4 2010