

Engaging the third sector in the Refreshed *Strategy for Volunteering in the NHS*

Voluntary Health Scotland is a member of the National Group for Volunteering in the NHS which was established by the Scottish Government in 2008.

The aim of the National Group is to provide leadership for the implementation and on-going development of the *Refreshed Strategy for Improving Health and Wellbeing through Volunteering in NHS Scotland*.

The National Group is a working group, providing practical solutions for people involved in delivering the Strategy, as well as playing an active part in commenting on guidance materials produced by Volunteer Development Scotland and the Scottish Government Health Directorate.

Through its membership of the National Group, VHS is able to keep the third sector updated on the progress of the Strategy and the ongoing issues which may affect organisations or individuals, such as the payment of out of pocket expenses for volunteers.

The feedback protocol which VHS has developed ensures that its own membership can provide input to each meeting and everyone who uses the protocol receives a reply to their individual query.

The VHS Protocol was used at the National Group meeting in November 2009 for the first time

and received an enthusiastic response, with Pat Dawson, Associate Nurse Director for NHS Lothian and Chair of the National Group, offering to respond personally to each person who contributed.



With the agreement of the Chair of the National Group and following an appeal to all members by VHS, Dawn Mackay from Health in Mind, Edinburgh, volunteered to attend the November meeting on behalf of VHS.

Dawn provided very comprehensive feedback to VHS following the meeting.

The National Group has set up six meetings for 2010, along with a series of short life working groups.

Among the key work areas being considered, there is agreement that the Group will look into remuneration inconsistencies in the Patient Focus Public Involvement strategy, where some people are being paid for their input and

others are not.

The Group also wishes to appraise how it supports CHPs in developing their own strategies for volunteering and VHS is in a strong position to support this initiative through its position on the Steering Group for the Association of CHPs.

Overall there has been a reported increase in the numbers of people registering an interest in volunteering with the NHS, although it is recognised that there are other external factors which may have contributed to this.

The next steps will be to assess the contribution of the Strategy to increasing volunteering in the NHS in Scotland and looking at the impact that the increased numbers of volunteers has brought. The National Group will be instrumental in providing support for these assessments.

VHS would like to thank Dawn Mackay for her support in attending the National Group on its behalf.

If you would like to become involved with the National Group for Volunteering in the NHS in Scotland, through VHS or you feel you could contribute as a member of one of the short life working groups, please contact VHS at bill.weir@vhscotland.org.uk, telephone 0131 220 9942 or helen.tyrrell@vhscotland.org.uk, telephone 0131 220 9943.

Invest to engage - an "insider's" view of the NHS

Invest to engage: enhancing connections with the NHS

This is an unprecedented opportunity to hear an "insider's" view of how to engage with the NHS.

Brian Cavanagh, former chair of NHS Lothian and City of Edinburgh Councillor, and Voluntary Health Scotland are jointly hosting a series of one-day seminars across Scotland to equip third sector organisations with the skills to engage with NHS Health Boards.

Brian brings his unrivalled expertise and knowledge of health services and local authorities to lead these events in Dumfries, Falkirk and Inverness during January and February 2010.

These events aim to:

- ◆ Increase awareness of current strategic health policy in Scotland

- ◆ Identify the key players within Scottish Government and NHS Scotland
- ◆ Explain how the Direct Elections to Health Boards will work and the opportunities for engagement
- ◆ Increase awareness of how Health Boards operate and how to navigate Health Boards' decision making process
- ◆ Increase confidence in influencing and engagement strategies
- ◆ Design a best practice engagement framework for individual organisations



Each seminar is planned to help members of voluntary and community organisations, Councils for Voluntary Service, Volunteer Centres, Social Enterprises and Equality and Diversity

groups develop strategies for increasing influence on and engagement with the NHS.

Interest in these seminars is already high and as there are limited spaces it is advisable to book early.

To register for the seminars please complete and post / fax the registration form on the event flyer (available at: www.vhscotland.org/events/seminar/flyer%20for%20jan_feb2010_events.pdf), or fill in the online registration at: www.surveymonkey.com/s/6QXHWP3 or call Voluntary Health Scotland on 0131 225 7290.

The dates and locations of the seminars are:

19th January: Dumfries
2nd February: Falkirk
16th February: Inverness

Exact venues for each event will be confirmed soon and following registration, a programme for the day will be issued.

VHS looks forward to your involvement in these important seminars.

VHS seeks examples of your good practice

Case studies are an extremely effective way of highlighting and demonstrating how a new technique or approach has been used.

They can also be used to show how an existing technique has been adapted or a challenge overcome.

VHS is seeking case studies of third sector health work to showcase on our website and to highlight to our Government partners.

The VHS website receives over 100,000 hits per month and is an

ideal place for projects and organisations to publicise the work they are doing.

The site is regularly used by third sector and statutory organisations as well as being accessed by individuals working within the Scottish Government.

To support people to develop their case studies we have brought together a range of information into a *Case Studies Top Tips* which is available from VHS on request.

Once we have assisted you in

developing your case study you can also use it with funders and partners as a part of your own evidence base.



For more information on developing or submitting a case study please contact Phil McAndrew, VHS

Communications Officer at phil.mcandrew@vhscotland.org.uk or Bill Weir, VHS Partnership Development officer at bill.weir@vhscotland.org.uk

Shifting the Balance of Care focuses on the needs of older people

Shifting the Balance of Care (SBC) is an improvement process describing potential changes at different levels across health and care systems that will bring about better health outcomes; provide services which reduce health inequalities; promote independence; and respond in ways which are quicker, more personal and closer to home.

Voluntary Health Scotland is represented at both SBC strategic and delivery levels, and is thus able both to lay out ways in which the third sector could contribute to high-level change and encourage operational change at local level through third sector delivery in key areas, such as care for older people and those with long-term conditions.

The operational place for change is within CHPs, as they provide a practical context for planning and delivering services in consultation with local communities.

VHS is working extensively with the CVS network to encourage the relationship between thousands of local third sector organisations and CHPs.

In addition, VHS is now a member of the Steering Group for the Association of CHPs, which provides an additional channel for influence.

Currently, SBC is focusing on shifting the balance towards providing better care for older people.

Addressing their needs is urgent: by 2031 Scotland's 65+ population will have risen by

62%, with a 144% rise in the 85+ population over the same period.

Emergency hospital admissions will rise to match, as will the demand for specialist residential care.

Clearly, the third sector, with its expertise in caring non-medical services, could be working strategically now with Scottish Government to plan ahead for a much greater input to supported self-care at home, which makes up 70 – 80% of need.



David Manion, Chief Executive of Age Concern and Help the Aged in Scotland has commented:

The Scottish Government is moving in the right direction, but whether its thinking is radical and long-term enough remains to be seen.

What is abundantly clear is that it will take vision, courage and a willingness to engage and collaborate meaningfully with the third sector if, as we believe, housing, health and social care budgets should be merged, their workforces integrated and services aligned.

This shouldn't simply be about saving money; it's about providing a more straightforward, less confusing system that makes it easier for people to navigate.

It's about focusing the system on the person, not the political or managerial convenience.

The regional leads group for SBC has heard from the Scottish Social Services Council (SSSC), which has documented the current provision for care of older people in Scotland: 1,400 third sector providers make available 30% of care, with the rest being split fairly evenly between the 32 local authorities and 1,500 private providers.

This is surely the ideal time for third sector providers of care services to be working with their local authority in planning future services which fit into the picture painted by the changing demographics and follow the ethos of *Shifting the Balance of Care*.

Future plans for driving forward the SBC agenda include further development of the community of interest to share learning and promote change and innovation.

This will be supported through expert workshops and greater access to evidence based information to support improvement.

VHS will promote attendance at the workshops and will gather more evidence from the third sector to support the improvement process.

If you have robust evidence of ways in which your organisation is contributing to SBC, through providing services which reduce health inequalities, promote independence, or which respond in ways which are quicker, more personal and closer to home for your clients, VHS would like to hear from you.

Contact either Helen Tyrrell – helen.tyrrell@vhscotland – or Bill Weir – bill.weir@vhscotland.org.uk at VHS or on 0131 225 7290

How the third sector can make use of the NHS Scotland Costs Book

Every year the Information Services Division (ISD), Scotland's NHS organisation for health information, statistics and IT services, collects data on the cost of providing health care in Scotland and publishes this information in Scottish Health Service Costs, commonly known as the Costs Book.

The Costs Book is actually a series of Excel spreadsheets whose detailed reports are structured to analyse around 93% of NHS operating costs, presenting information on Health Boards and hospitals that provide care directly to patients as well as giving an overview from a Scotland-wide perspective.

The Costs Book 2009 is now available online and it contains a wealth of financial information on NHS services from both a local and a national perspective in an easily accessible format.

It notes, for example, that across Scotland there were over 1.6 million attendances at Accident and Emergency in 2008 - 2009, with an average cost of £100 each.

To support *Shifting the Balance of Care*, NHS Boards must achieve agreed reductions in the rates of attendance at A&E within their 2010 HEAT targets.

Now, by using the local NHS costs information, third sector organisations will be able to show how and where they can be reducing pressures on NHS acute services by providing cost-effective services which complement and support existing health services.

Third sector organisations may want to do this by providing evidence that their services are influential in reducing their particular client group's attendance at A&E.

They may be able to provide evidence for services as diverse as preventing falls in older people, supporting young people to safely

manage their alcohol intake and improving self-management of long-term conditions.



Although it is in itself no guarantee of securing future funding, when used in this way the NHS Costs Book provides another tool which can be effectively used to evidence the added value of the third sector's contribution to health care

The NHS Costs Book is available online from the Information Services Division at www.isdscotland.org/isd/4683.html

For more information contact Bill Weir at bill.weir@vhscotland.org.uk

Seeking your news

Voluntary Health Scotland would like to include more articles from our membership and the wider third sector in our publications and invite you to submit articles to us for inclusion.



We have three separate news channels at the current time, and you are currently reading our Briefing, the paper-based magazine which is distributed to our full members.

To complement the Briefing we have an e-newsletter which features the latest Scottish Government and NHS

policy developments, members' news, forthcoming events, consultation updates and more, and our Community Health Partnership e-bulletin, which carries news of publications and events of interest to general managers and third sector members of CHPs.

To submit an article or news item to any of these publications please contact Phil McAndrew at phil.mcandrew@vhscotland.org.uk or telephone 0131 220 9941.

To subscribe to these newsletters please visit this page: www.vhscotland.org/info/subscribe.php



Season's Greetings 2009

With best wishes
from all at
Voluntary Health
Scotland

Health Works takes Healthy Working Lives agenda forward

With ill-health in the working age population costing Scotland around £10b a year in lost productivity and increased health and welfare costs, this area of health improvement is vital to the country's future.

The Scottish Government's revised approach to encouraging healthy lives at work and increasing employability - *Health Works* - came out in November.

The review has been carried out in the context of Dame Carol Black's *Working for a healthier tomorrow* (2008) and reflects the evidence that work is good for health.

The Scottish Centre for Healthy Working Lives (SCHWL) is the delivery arm for the HWL agenda, making available to employers (mainly in the Small and Medium Enterprise – SME – sector) advice and information on workplace health, safety and wellbeing and managing the Healthy Working Lives Award Scheme.

New measures in *Health Works* include:

- ◆ An SME HWL toolkit
- ◆ Work with the STUC to enhance the capacity of union safety reps
- ◆ Scottish-based help for those with health barriers to work
- ◆ Training of NHS staff to include employment and employability elements in healthcare
- ◆ Development of a HEAT target for supporting people into work

SCVO has been a member of the National Advisory and Advocacy Group (NAAG) for the SCHWL since 2008 and works closely with VHS to take forward the third sector's engagement with and contribution to HWL.

SCVO's commitment to HWL is:

◆ As an *employer* - SCVO has been progressing through the foundation stages of the HWL Award Scheme during 2009 and is now ready to apply for the Bronze Award (January 2010)

◆ As a *promoter* of the HWL Awards Scheme - encouraging take-up of the Scheme by the wider voluntary sector. Around 99% of Scottish third sector organisations are SMEs and currently, 105 third sector SMEs are engaged in the Scheme



◆ As a *promoter of third sector provision of services* in key HWL areas - employability and rehabilitation services, drug and alcohol services, smoking cessation programmes, counselling and psychological therapies, long-term conditions management, mental health support and stress management.

SCVO is already a major player in supporting employment and employability, at both strategic and

operational levels.

Along with the Scottish Government, SCVO has been responsible for setting up the Third Sector Employability Forum (September 2009) and leading on third sector engagement in the employability agenda through specialist programmes for people with disabilities and mental health issues - for example, Pathways to Work, Progress2work, as well as delivery of mainstream employability programmes such as New Deal and now, the Future Jobs Fund.

Many other third sector organisations across Scotland are already engaged in delivering specialist services, either through workplace programmes or on a referral basis for individuals.

A growing number of Social Enterprises are delivering workplace and employability health.

Over the coming year, VHS hopes to work with SCVO and others to establish the picture of fuller extent of the third sector contribution to HWL.

Meantime, we should like to encourage VHS members and other third sector organisations to contact us if you are already contributing to Healthy Working Lives, either as participants in the Awards Scheme or as providers of services.

For further information please contact:
helen.tyrrell@vhscotland.org.uk or telephone 0131 220 9943.

Health Works is available on the Scottish Government website at: www.scotland.gov.uk/Topics/Health/workingage-1

Tackling depression at Christmas

While the holiday season is a period of happiness and celebration for some, for others it is a time of isolation and an increase in feelings of depression.

It is an interval of frenetic activity, a time when people are trying to juggle work, an increase in social obligations, shopping, decorating, wrapping, entertaining and staying on budget.

It can be a worrying time particularly for those on low incomes and benefits, who may have gone into debt in order to buy presents.

All this leads to a rise in both physical and emotional stress which can bring about depressive illness. For those affected by depression, one in 10 adults in Scotland are reported to take anti-depressants on a daily basis (ISD), Christmas can be the very worst time of the year.

A large number of voluntary organisations throughout Scotland provide invaluable support and advice to people with mental illnesses such as depression all year round, but recognise that the winter months can prove more challenging.

Depression Alliance Scotland, (DAS) the leading Scottish charity providing information and support to those affected by depression, has produced a number of tips to help those experiencing depression cope over the Christmas period.

The charity suggests that

constructing a plan and developing some coping strategies may help gain control over thoughts and feelings and break the vicious circle of self critical thoughts, feeling low, tense and with low energy.

Such a plan should involve identifying the triggers for low mood and exploring possible ways of dealing with the problem to make things more bearable.

Triggers can include issues such as a lack of money, difficult relatives, too much alcohol and not having relatives close by.

Possible solutions to these examples include identifying enjoyable things about Christmas that don't involve spending money, minimising time spent with awkward relatives, making every second drink a soft drink and arranging to meet friends over the holiday period for a coffee or a meal.



A Christmas factsheet providing ideas of how to plan for, and cope with the holiday season is available to download from the DAS website at:

www.dascot.org/publications/factsheets/Christmas.pdf

DAS has also launched a new online service, *Living Life to the Full Interactive*, designed to help people with depression, low mood and anxiety.

The service is a self-help life skills training package based on the proven Cognitive Behavioral Therapy (CBT) approach and as it is run online, support from DAS has a much larger reach across Scotland.

To find out more about the course visit www.daslittfi.co.uk, contact the DAS Helpline on 0845 1232320 or email info@dascot.org.

Volunteering at NHS Education for Scotland

NHS Education for Scotland (NES), a Special Health Board, helps to provide better patient care by designing, commissioning, quality assuring and, where appropriate, providing education, training and lifelong learning for the NHS workforce in Scotland.

NES is now planning to increase the involvement of volunteers in its work, recognising the valuable contribution made by service users in activities such as recruitment and selection of trainee healthcare professionals, and providing advice and guidance on patient experience.

Through a consultation on their Volunteering Policy and Equality Impact Assessment covering many aspects of public involvement practice, NES is seeking the views of individuals and organisations to ensure that the policy and guidance supports professional practice both for individual volunteers and for NES.

Key points on which NES would like input on include:

- ◆ What should be the key principles to guide volunteering in NHS organisations such as NES?
- ◆ How should NES support volunteers involved in its work?
- ◆ How can NES ensure that volunteer involvement adds value to their work?
- ◆ Is the Equality Impact Assessment a fair summary of the issues affecting members of different groups as volunteers?

The consultation is available at: www.nes.scot.nhs.uk/pfpi/pfpi and responses are required by 15th January 2010.

For further information please contact Rob Coward on 0131 313 8095 or email: rob.coward@nes.scot.nhs.uk

Healthy Communities: Meeting the Shared Challenge – sharing the lessons learnt

It is hard to remember back to a time when community-led health (CLH) was mainly the pre-occupation of radical community health workers, as it is now widely understood within government and the NHS.

Embedding community-led approaches has taken time, but as *Meeting the Shared Challenge* moves through its second year, the emphasis is on developing a shared understanding of the value of CLH, supporting a more co-ordinated strategic approach, improving local practice and engaging communities better in the broader health improvement agenda.

Internal evaluation of the programme and feedback show that CLH approaches are gradually being taken forward, with growing numbers of local 'champions' for the value it brings to programmes such as *Equally Well* and the new *NHS Quality Strategy*, but that enthusiasm must be harnessed to local strategic and operational approaches, together with adequate resources.

Sharing the lessons learnt is now a priority. The Programme support team is therefore working on dissemination strategies, which include:

- ◆ A CLH pack for use by local partners
- ◆ Presentations to civil servants, politicians and other key strategic and operational groups, as well as third sector

networks

- ◆ Articles in relevant magazines and journals

In addition, a national conference - *Communities, inequality and health improvement: policy and practice for community-led health* - will take place on 1st February 2010, in Perth, to celebrate the achievements of *Meeting the Shared Challenge* since the production of the Community-led Task Group's Report - *Healthy Communities: a Shared Challenge*, in 2006.

For many in the third sector, the "proof of the pudding" that *Meeting the Shared Challenge* is bearing fruit is evidence of community-led approaches being supported and commissioned in local programmes.

VHS brought to the eighth meeting of the National Reference Group in late November some questions raised about the programme by third sector groups and organisations: the importance given to thematic issues in CLC, particularly mental health; how to maintain the integrity of the CLH process within strategic frameworks; and building good evidence of commissioning practices.

To find out more and to register for the national conference on 1st February, please visit www.scdc.org.uk/shared-challenge

For any other information about the Programme please contact Olivia Hanley - olivia@scdc.org.uk - or Angela Jackson - angela.jackson@health.scot.nhs.uk



VHS extends its membership reach

Voluntary Health Scotland members agreed a motion at its Annual General Meeting in November to extend associate membership, which is free of charge, to include organisations in the third sector concerned with the improvement of health and or health care in Scotland.

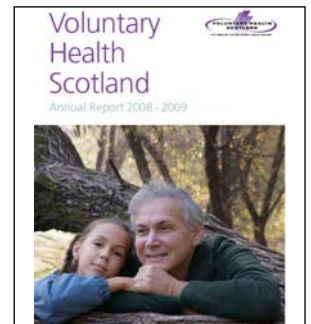
This means that any individual or organisation which supports aims and activities of VHS can join as associate members if they so wish, rather than having to join as full members.

Associate members of VHS enjoy all the benefits of full

membership apart from voting rights, reduced rates at conferences and events and mailed copies of the quarterly Briefing.

The AGM also reported on the past year's successful work programme, including the direct contribution VHS has made to key national programmes within *Better Health, Better Care* – in particular, *Meeting the Shared Challenge*, the anticipatory care programme *Keep Well, Healthy Working Lives*, the test sites for addressing health inequalities through the *Equally Well* initiative and the *Refreshed Strategy for Volunteering in the NHS*.

Early next year, VHS will publish its findings from the recent Stakeholder Survey which attracted over 400 responses and which will inform the work of the VHS team in the coming year.



Planning for health in 2010-2011 - now is the time for third sector action

In November two important pieces of guidance on local planning processes were published which will be of direct relevance to the third sector.

At the end of the month the updated Menu of Local Outcome Indicators was released, along with a Good Practice note for their use within Single Outcome Agreements (SOAs) and in mid-November, guidance was released which outlined the priorities and format for Local Delivery Plans for all of the Health Boards in NHS Scotland, including the eight Special Boards.

This year the updated Menu of Local Outcome Indicators for SOAs specifically cites the NHS HEAT targets, stating that, in general, they are not appropriate for inclusion in SOAs as these are too strategic.



Instead, HEAT targets are described as contributing to SOAs.

HEAT targets reflect short-term outputs and outcomes and, whilst Health Boards need to meet HEAT targets, as members of CPPs they also need to consider the wider contributions they make and demonstrate how they are working with partners to deliver them.

This is where Local Delivery Plans (LDPs) come in, as these set out

the delivery agreement between Scottish Government and each NHS Board, based on the 24 HEAT targets.

The Local Delivery Plans for 2010 - 2011 will record agreement on local progress towards meeting key national targets, and the additional commitments made to support relevant SOAs across the four national priority areas of Health Inequalities, Early Years, Tackling Poverty and Economic Recovery.

NHS Boards are expected to outline the key local outcomes shared across the national priority areas and identify their top three actions which contribute to each outcome. This year one of the actions suggested detailing Boards' engagement with communities and the third sector.

NHS Boards will be developing their plans to ensure the drafts are delivered to the Scottish Government for approval by the 18th February 2010.

Now is the time for third sector organisations to ensure they are engaging with their local health systems so that their efforts towards achieving shared outcomes are recognised and included in local planning for health.

VHS is currently working with Brian Cavanagh, the former Chairman of NHS Lothian, to deliver a series of seminars titled *Invest to Engage*, which will equip organisations with the skills and tools necessary for such engagement. For more information on the seminars, including details of how to register, please visit the VHS website at www.vhscotland.org.uk where the guidance notes are also available.

For more information contact Bill Weir at bill.weir@vhscotland.org.uk or on 0131 220 9942

Addressing the future for children and young people affected by alcohol

The Scottish Network of Alcohol Practitioners for the Young (SNAPY) is holding their conference, *Improving practice, improving lives - working together to create better futures for children and young people affected by alcohol* - on 2nd March 2010 at the Marriott Hotel in Glasgow.

SNAPY was launched in March 2009 and allows for the sharing of good practice, skills and resources and the advancement of new and innovative approaches to service development when working with children and young people affected by alcohol misuse.

This conference is aimed at all who work with children, young people or families who are concerned about the effects of both direct and indirect alcohol misuse.

It is intended for a broad audience of practitioners and workers from both the voluntary and statutory sectors whose work is either generic or specific to alcohol.

Guest speakers include Carol Craig from the Centre for Confidence and Wellbeing and Philip Raines, Head of Child Protection at the Scottish Government.

For further information, a conference programme and booking form please visit the Alcohol Focus Scotland website at: www.alcohol-focus-scotland.org.uk/training_events/events or call 0141 572 6700.



Demonstrating the impact of community-led health improvement work

Voluntary and community sector groups and organisations have long been confident of the value of their work in improving the health and wellbeing of individuals and communities.

However, in an increasingly outcome-driven environment, we need to be able to demonstrate the impact of our work to the NHS, local authorities, central government, and independent funding bodies.

The Report of the Community-led Task Group (2006) and research undertaken by VHS indicated that one of the most significant challenges to effective inter-sectoral partnership working is the difficulty of showing that health work carried out *by* communities, *in* communities, justifies the investment of resources.

This is partly because health improvement is about long-term gain, and partly because community-led approaches differ from those with which the statutory sector and funders are most familiar.

Additionally, in a competitive funding environment when there is pressure on available health resources, particularly in the context of economic recession, there is even greater need to demonstrate the outcomes and value of different approaches.

For nearly two years now, work has been going on to consider the current situation regarding economic evidence for community-led health and how this agenda may be developed. This has been supported by

NHS Health Scotland and steered by a national-level Working Group, including representatives from a range of sectors, organisations, and disciplines.

At September's *Healthier Lives, Wealthier Communities?* conference in Edinburgh, NHS Health Scotland took the lead in bringing together third sector providers and intermediary organisations, NHS representatives, national and local government bodies, as well as health economists and independent research organisations to hear about and discuss economic evidence.



Dr Liz Fenwick from Glasgow University explained the underlying principles of economic evidence and how this can apply to community-led approaches to health improvement. She indicated how this can be of use to organisations themselves and to funders and commissioners, and that a range of approaches and differing levels of depth can be used.

Geoff Pope of the Scottish Government's Third Sector Division gave details about one approach – Social Return on Investment (SROI), on which they have a programme of support which is being delivered by Forth Sector Development. Three case studies focusing on the

use and potential for economic evidence of community-led health work were commissioned by NHS Health Scotland and presented at the conference.

These involved initiatives and projects at the Mearns and Coastal Healthy Living Network; Lanarkshire Community Food and Health Partnership; and West Quarter and Redding Community Project.

The report is available at: www.healthscotland.com/documents/3698.aspx

Following the conference, NHS Health Scotland will work with the National Reference Group and partners in government and the different sectors to shape the onward agenda regarding Economic Evidence for community-led health improvement work.

This will be guided by the case research conclusions and the feedback from conference delegates.

To find out more about the content of the seminar and the case studies, contact Angela Jackson at NHS Health Scotland – angela.jackson@health.scot.nhs.uk

VHS is keen to find out whether voluntary organisations are already using or developing economic evidence of their health impact. Some investigation on this will be undertaken in the coming months.

If your organisation is doing or planning some work on building economic evidence, please get in touch with us and provide brief details.

For further information please contact helen.tyrrell@vhscotland.org.uk or call 0131 220 9943.

The Healthcare Quality Strategy for Scotland – coming at the right time

NHS Scotland is developing a healthcare quality strategy for Scotland. It is considered that now is the right time to build on the progress achieved on the commitments in *Better Health, Better Care*, which came out exactly two years ago.

The proposed Strategy is not another top-down programme, but an approach to quality built on all the elements that should be present in all everyday interactions between the NHS and the public.

The time is right because demographic changes, an increasing need for longer term interventions, technological advances and ever-tightening resources create a unique opportunity for significant change and we know now that making small marginal changes does not achieve enough.

People in Scotland have been asked how they see high quality healthcare, and the elements they value accord well with the international definition of healthcare quality – the attributes of quality are person-centredness, good communication and collaboration, cleanliness, continuity of care and clinical excellence.

Significant elements of the *Healthcare Quality Strategy* have already been achieved or

are in development - anticipatory care approaches, including *Keep Well, Equally Well*, with its focus on improving health inequalities and access to healthcare, the self-management strategy for long-term conditions and the patients' rights elements in the *Participation Standard*, the *Patient Experience Programme* and the *Carers' Strategy*.



Central to the *Healthcare Quality Strategy* is the maintenance of mutuality and the fulfilment of patient's rights and responsibilities as contained in the forthcoming *Patients' Rights Bill*.

The Scottish Government consulted on the elements in the Bill earlier this year and consultation on the *Quality Strategy* closed in November.

The *Healthcare Quality Strategy* will be launched in January 2010 and it will be accompanied by a communications strategy, the setting up of a Quality Alliance, to promote high-level shared ownership (and where the third sector expects to be represented) and a commitment to align HEAT targets with quality measures.

For further information about the *Healthcare Quality Strategy* for Scotland, contact Andrew MacLeod, Healthcare Policy and Strategy Directorate at andrew.macleod@scot.gsi.gov.uk

SCVO expresses disappointment with lack of sector support in budget

SCVO has expressed dismay at the Chancellor's failure to provide additional support for the sector in his pre-budget report.

Martin Sime, Chief Executive of the Scottish Council for Voluntary Organisations said:

We're deeply disappointed that this statement offers no specific measures to help our sector as they struggle with the consequences of recession.

Scotland's voluntary sector provides vital services to the country's most vulnerable people and delivers added value in terms of quality and cost.

Simple reforms to Gift Aid and addressing inconsistencies in VAT could have meant real help for charities across Scotland.

But today the Chancellor has missed a golden opportunity to enable the sector to help to mitigate the impact of economic recession on those most in need.



For more information please call: Sarah Beattie-Smith
Communications Officer, SCVO –
0131 556 3882

Two new reports from the Institute for Public Policy Research

Getting on: wellbeing in later life

This excellent report (December 2009) takes the current debate on the implications of ageing in the UK – how to improve pensions, provide care and the cost to the country of doing this – into the broader territory of people's experiences of growing older, their expectations and quality of life issues.

The main contributor to the research is Dr Jim McCormick, formerly director of the Scottish Council Foundation.

The report sets out a wider agenda for policy makers and practitioners, offering recommendations for action which signal a fresh approach to later life and challenging outdated assumptions.

Getting on: wellbeing in later life is on the IPPR website at www.ippr.org/publicationsandreports

Copenhagen and beyond: an IPPR guide to the climate change

provides a short guide to the likely outcomes of the Copenhagen Climate Change summit and the background to the negotiations.

The report points to the top five possible advances to look out for:

- ◆ Will the US commit to an ambitious emissions target?
- ◆ Will industrialised countries agree to significant levels of financing?
- ◆ Will there be meaningful progress on technology transfer?
- ◆ Will developing countries commit to significant new action?
- ◆ Will a Copenhagen treaty replace Kyoto?

The IPPR is not very optimistic on any of these, except the possibility of faster progress on technology transfer, but urges the international community to keep its sights on:

- ◆ Keeping UK negotiations alive
- ◆ Focusing on domestic policies in high-emitting countries
- ◆ Progressing work on technology and step up funding for this

The report is on the IPPR website at www.ippr.org/publicationsandreports

VHS produced two short articles – *Climate change and health: a growing concern* – in its Autumn 2008 *Briefing* – and *VHS continues to keep a watching brief on climate change legislation* in its Winter 2008 / 2009 *Briefing* – both which are still available on the VHS website.



Information sharing and Getting it Right for Every Child - GIRFEC

Getting It Right for Every Child (GIRFEC) is a programme of change being introduced across Scotland.

Its values, principles and practice model are designed to change the way adults and organisations think and act to help all children and young people grow, develop and reach their potential.

Voluntary Health Scotland recently attended an informal Scottish Government round table discussion about the implications for smaller voluntary organisations of the GIRFEC approach to sharing

information about children with other agencies.

A key issue discussed was that a significant development over the next few years will be the new version of the eCare framework to aid information-sharing and decision-making surrounding the needs of children and young people.

As the third sector comprises thousands of disparate organisations, providing a wide range of services to children, young people and families, it will not be possible to have a single solution that allows the third sector to connect to the eCare framework, so

the Scottish Government is developing a range of solutions.

First, the Scottish Government is developing a system to enable some large third sector organisations to connect their own information systems directly to the eCare framework.

Secondly and in parallel, the Scottish Government is developing a new application that will allow smaller organisations access to the eCare framework which will be known as iACT. Early in 2010 VHS will view a demonstration of iACT and provide further progress updates.

Contact Phil McAndrew on 0131 220 9941 for more information.

Entitlements to NHS care for overseas visitors

Health Rights Information Scotland (HRIS) have just completed the first yearly review of a series of six factsheets explaining the circumstances under which particular groups of overseas visitors are entitled to NHS care in Scotland.

HRIS is a project based within Consumer Focus Scotland and funded by the Scottish Government Health Directorate.

It was formed in 2003 to produce information for patients in Scotland about their rights and responsibilities when using the NHS.

HRIS information is produced in consultation with NHS staff, patients, voluntary organisations and members of the public.

This is an important way of making sure that the information that HRIS produces meets peoples needs and is accessible in terms of format, language and style.

The revised entitlements factsheets are called:

- ◆ Health care for people coming to Scotland to work
- ◆ Health care for people coming to Scotland to study
- ◆ Health care for asylum seekers and refugees in Scotland
- ◆ Health care in Scotland for former UK residents now working abroad
- ◆ Health care in Scotland for UK passport holders living abroad

- ◆ Health care for UK pensioners visiting Scotland

Following publication of these factsheets, a number of health professionals asked HRIS to produce information for overseas holidaymakers on this topic.

A new resource has been developed in response to these requests.

The new factsheet is called:

- ◆ Health care in Scotland for holidaymakers from overseas



HRIS have published all the factsheets on their website (at www.hris.org.uk) where they are (or will be) available in a variety of formats, including large print, translated versions in a number of languages, English audio versions, translated audio versions (information for asylum seekers and refugees only), and British Sign Language (BSL).

HRIS NHS board contacts and relevant stakeholder organisations will be provided with links to the factsheets.

For more information about this work please contact Brigitte Cosford at brigitte.cosford@consumerfocus.org.uk, call 0141 227 8438 or visit www.hris.org.uk

Consultation on end of life care

Living and Dying Well, a national action plan for palliative and end of life care in Scotland (Scottish Government, October 2008), recognised that further work was necessary in order to achieve a solid, consistent and equitable approach to the provision of palliative care services across Scotland.

The Report's action points included the establishment of several short life working groups (SLWGs) to take forward key areas of work.

One SLWG addressed the issue of exploring ideas and issues for a public health and health promotion perspective, including public and professional awareness of and attitudes towards death, dying and bereavement.

The Group recently published a consultation document on the issue and while recognising that the issues are wide and far-reaching they believe that measures taken now will determine future direction and wider developments as well as achieve gains for patients, families, staff and volunteers within the current context of health and social care.

The consultation explores themes including:

- ◆ why do we need wider discussion of death, dying and bereavement across society?
- ◆ what might be a vision for the future?
- ◆ suggested areas for exploration and collaboration

The SLWG is seeking responses to the consultation to inform the final report. It is available at: www.vhscotland.org.uk/info/docs/consultation

Please email consultation responses to: Rebecca@palliativecarescotland.org.uk by Friday 22 January 2010