

Association of
Community Health
Councils for England
and Wales

Annual Report

Director's introduction

Our focus for the past twelve months has been to secure a strong future for CHCs in the "New NHS".

There was every reason, when I took up post in October 1998, to believe that the future was far from secure. The White Paper *The New NHS: Modern, Dependable* was strong on fine words about accountability, but weak on specifics, and CHCs were conspicuous by their absence.

This was swiftly followed by the publication of *In the Public Interest*, part funded by the NHS Executive, and scattered with sweeping statements critical of CHCs.

Then in January 1999, CHCs had their budgets frozen - news that most people heard on the CHC grapevine, after the first verbal report to a regional association.

Then the Health Bill was published at the end of January - it made no mention of CHCs, patients or the public in the body of the text.

With the support of Honorary Officers, Standing Committee and member CHCs, ACHCEW's priority has been to co-ordinate the fightback. CHCs do wonderful work, in many different ways. They change people's lives. They are often the only support for vulnerable patients and the sole champions of local communities when health authorities act against the public interest. If they were not there, you would have to invent them. Our job at ACHCEW has been to

- take that message to a wider audience
- harness the goodwill that so many opinion formers feel towards CHCs
- provide a national voice for CHCs in the corridors of power
- add value to the work of individual CHCs

This annual report summarises the ways in which we have started to do this, working in partnership with CHC staff and members across England and Wales.

We have a long way to go in making sure that the public's interest is represented in the health service in the years to come. The past twelve months have seen the start of a programme to make the future more secure for CHCs.

Donna Covey
Director

Association of Community Health Councils for England and Wales

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Chairman's introduction

It has been an honour and a privilege for me to chair ACHCEW during 1998/9. I was elected at a time of uncertainty, both for CHCs and for ACHCEW. I hope that in the past twelve months the Association has grown stronger. It has certainly adopted a new focus, to the benefit of its members at a time of upheaval in the health service.

Initiatives such as the Nationwide Casualty Watch and the all-party parliamentary group show that when CHCs work together, with ACHCEW at the centre, we can be a powerful voice for patients and the general public.

The Commission on Representing the Public Interest in the Health Service is exploring the wider context in which we work, and the possibilities for the future.

We have been fortunate indeed to engage the interest of a group of very eminent people in this endeavour.

For this, and much else, we are indebted to the drive and commitment of our new Director, Donna Covey. However, none of it would have come about without the input of many others. In particular, the staff at ACHCEW have worked tirelessly to make sure our voice is heard, especially in the debate around the Health Bill.

My thanks also go to my fellow Honorary Officers, Alan Hartley, Michael Downing and Graham Girvan. Standing Committee have continued to provide welcome advice, and individual CHCs have shown a real enthusiasm for working with the ACHCEW team in taking the organisation in new directions.

I hope that we can build on these initiatives in the coming year.

Joyce Struthers

Chairman ACHCEW 1998/9

ACHCEW: Supporting CHCs

The main purpose of the Association of Community Health Councils for England and Wales is to support the work of CHCs.

During 1998/9, we have done this in part by continuing to provide the legal, information and training services that CHCs value. This support helps CHCs to improve their performance at local level, and provide the best possible value to the communities they serve.

We have also, during the year, focussed on a small number of high profile flagship activities, aimed at increasing the influence of CHCs at national level.

There are also a number of policy and legal issues that we have pursued at national level, to the benefit of all CHCs.

A national voice for CHCs

The flagship activities have been:

The ACHCEW Commission on Representing the Public Interest in the Health Service

In February 1999, ACHCEW announced the setting up of an independent commission to look at how best to represent the public interest in the health service. This followed on from the recognition by member CHCs that there needed to be a debate about the future of CHCs, and that this was best put in the context of representing the public interest. A significant amount of work had been done in this area, and it was felt that ACHCEW's role, in setting up the commission, was to provide a forum for different models for the future to be scrutinised, and ways forward in representing the public interest to be identified. We were fortunate in attracting a wide range of respected and influential members for the commission.

The terms of reference of the commission are:

"To recognise that the ultimate purpose of the NHS is to serve the public interest and to identify the ways in which that public interest can best be served by the achievement of a full and effective system of public accountability."

The ACHCEW Commission on Representing the Public Interest in the Health Service

Membership

Will Hutton Chair

Editor-in-Chief, The Observer, and author of *The State We're In*

Professor Conor Gearty

School of Law, King's College London

Susie Parsons

Chief Executive, Commission for Racial Equality

Professor Allyson Pollock

Head of the Health Services and Health Policy Research Unit, University College London, and Director of Research and Development, University College London Hospitals Trust

Joyce Struthers

Chair of the Association of Community Health Councils for England and Wales (ACHCEW)

Stephen Thornton

Chief Executive, NHS Confederation

Stuart Weir

Senior Research Fellow in Democracy and Human Rights, and Director of the Democratic Audit,

The All Party Parliamentary Group on Community Health Councils

February 15th saw the launch of the all party group on CHCs. The group attracted over 220 founder members, most of whom were responding to an approach from their local CHC. The group adopted the following terms of reference:

- To provide a forum for members of both Houses of Parliament to debate the work and future activities of CHCs in England and Wales, Health Councils in Scotland and Health and Social Services Councils (HSSCs) in Northern Ireland
- To develop stronger links between parliamentarians and CHCs, Health Councils and HSSCs
- To help promote the role played by CHCs, Health Councils and HSSCs

The officers of the group are:

Chair	Patrick Hall MP (Bedford and Kempston, Labour)
Vice-Chairs	Peter Bottomley MP (Worthing West, Conservative) Bob Russell MP (Colchester, Liberal Democrat) Debra Shipley MP (Stourbridge, Labour) Rev Martin Smyth (Belfast South, Ulster Unionist)
Secretary	Hazel Blears MP (Salford, Labour)
Treasurer	Rosie Winterton MP (Doncaster Central, Labour)

ACHCEW staff will be acting as the secretariat of the group, which should provide a powerful voice within Westminster for CHCs.

The Health Bill

When the Health Bill was published at the end of January, the body of the text made no mention of CHCs, patients or the public. ACHCEW's main concern was to rectify this anomaly. In particular, we wanted to see a clear scrutiny role for CHCs over Primary Care Groups and Trusts. To do this:

- Discussions were held by ACHCEW legal and policy staff with civil servants
- Briefing meetings were held at the House of Lords, and briefings sent to individual peers with a particular interest in health issues
- The all party group on CHCs were kept regularly briefed
- Legal and policy staff took part in a variety of meetings with other patient and carer groups, to maximise support for our concerns.
- A number of ACHCEW drafted amendments were tabled aimed at extending the influence of CHCs
- We are continuing to seek to influence the final text of the act, and the consequent guidance notes.

Representing the public interest

ACHCEW has continued to speak up for CHCs on a wide range of policy issues.

Major issues during the year have included:

Nationwide Casualty Watch

The Nationwide Casualty Watch was run for the second time in January 1999. 157 Community Health Councils and Scottish local health councils took part. The result was a unique national snapshot of waiting times in A&E departments. The survey received widespread national and local news coverage, and helped raise the issues of both waiting times in A&E and the work of CHCs with opinion formers and the wider public.

Consultation protocols

Following on from local CHC initiatives ACHCEW staff have identified a number of areas of good and bad practice in consultation exercises. CHCs have been provided with information about the legal requirements of a consultation exercise. A briefing is being produced on the benefits of agreed protocols between health authorities and CHCs on how and when consultation should be carried out.

Secretary of State referrals

Following a number of requests for legal advice on referrals to the Secretary of State from individual CHCs, a survey was carried out to establish a comprehensive national picture of CHCs' experiences of the referral process. This identified a number of areas where, based on practical experience, the process could be improved. Work is continuing on recommendations for improvements to be put to the Department of Health.

Private Finance Initiative (PFI)

ACHCEW policy and legal staff have been in discussions with the Department of Health on issues of transparency, consultation and openness around PFI projects. As a result, a number of ACHCEW suggestions for improvements have been incorporated into the section on openness and public involvement in the Government's PFI manual. We are continuing to make the case for more specific references to consultation with CHCs.

Data Protection Act

ACHCEW staff have been in detailed discussions with the Office of the Data Protection Registrar, the Department of Health and the Home Office seeking to ensure that the rights of patients to access their own medical records and to have those records kept confidential are protected. We have also initiated contact with a wide range of other organisations that share our concerns, and they have used ACHCEW briefing material to raise these issues with opinion formers.

Raising our profile

The work of CHCs is often unappreciated by those people who do not have direct contact with them. At local level, CHCs carry out a wide range of activities to raise awareness of their work in their local communities. At national level, raising our profile has been one of ACHCEW's priorities in the past year. We have sought to do this through:

- Working with other organisations - exchanging information, speaking at conferences, playing our part in umbrella bodies
- Issuing press releases, briefing the media, writing articles for publication.
- Taking the CHC message to the Houses of Parliament and other influential people.

The year in ACHCEW at a glance

These are just some of the day to day activities that kept ACHCEW staff busy during 1998/9:

- Training 850 CHC members and staff on a wide range of issues from chairing and facilitation skills to the Private Finance Initiative
- Training took place on 63 days, at 16 different locations
- Starting work on a system of accreditation of training courses
- Dealing with over 1,200 requests for legal advice, with an average turnaround time of 2.5 days
- Producing 12 legal briefings on a range of issues, including human rights, recording and video taping of patient consultations, mental incapacity issues, access to health records and caselaw developments
- Answering over 2,000 requests for information and policy advice from CHCs
- Responding to over 50 consultation documents from Government, the Royal Colleges and other bodies
- Producing 10 *Health Perspectives*
- Producing 10 issues of *CHC News*
- Producing 10 issues of *CHC Listings*
- Servicing 6 meetings of Standing Committee - drawing up the agenda, writing and circulating papers and arranging the meetings
- Servicing and arranging 7 meetings of the Honorary Officers
- Organising and running the AGM - over 500 participants across three days
- Servicing the Commission on Representing the Public Interest in the Health Service - arranging meetings, providing background papers and advice
- Providing support services and briefing material for the all party group
- Attending around 300 meetings a year on behalf of ACHCEW
- Selling 150 *Health News Briefings*, over 20,000 leaflets, 75 *Health Perspectives* and over 200 training packs
- Maintaining a subscription service to a variety of outside organisations
- Issuing regular press releases
- Maintaining the ACHCEW databases

Finance

The Honorary Treasurer will present the Audited Accounts at the Annual General Meeting.

Who's Who at ACHCEW

Amanda Allen

**Administrative
Assistant/Receptionist**

Amanda is a member of the administration team. She works on reception two days a week, in addition to carrying out general office duties

Allison Anthony

Training Organiser

Allison is a training organiser. She job-shares, and works one day a week.

Vera Beswick

Administrative Assistant

Vera works part time. She maintains the sales ledger, and is responsible for invoicing for the AGM and training courses.

Angeline Burke

Policy Officer

Angeline has particular responsibility within the policy team for running the Nationwide Casualty Watch, and servicing the Commission on Representing the Public Interest in the Health Service. She also leads on mental health issues, and was the author of the influential ACHCEW report *Hungry in Hospital*.

Marion Chester

Legal Officer

Marion runs the legal service for CHCs. She provides legal advice to individual CHCs on a wide range of issues, as well as producing guidance notes and policy advice on a wide range of legal issues.

Chye Choo

Chief Administrative Officer

Chye is responsible for the day to day administration of the Association. She organises the Annual General Meeting.

Donna Covey

Director

Donna has been director of ACHCEW since October 1998. She is responsible for the day to day running of the organisation. She also acts as the public face of the Association, speaking at a wide range of conferences, and representing ACHCEW on a number of committees.

Gary Fereday

Policy Officer

Gary has particular responsibility within the policy team for work around the New NHS, including NICE and Primary Care Groups. He is also the lead on the complaints procedure. He acts as Secretary to the All Party Group, and has lead on the Health Bill. Gary represents ACHCEW on the steering group of the Patients' Forum.

Antonia Ford

Legal Assistant

Antonia works three days a week, assisting the Legal Officer.

Ben Griffith

Policy Officer

Ben has particular responsibility within the policy team for public health issues, rationing issues, PFI and medical records. He has represented ACHCEW on the Executive Committee of the Public Health Alliance.

Diane Jones

**Receptionist/
Personal Assistant to the Director**

Diane is Personal Assistant to the Director. She works three days a week, and also covers the reception on those days.

Estelle Kiss

Administrative Assistant

Estelle works part-time, running the publications service.

Frances Presley

Information Officer

Frances is a member of the policy team, and runs the information inquiry service.

Liz Rickarby

Training Organiser

Liz is a training organiser. She works three days a week.

Standing Committee

ACHCEW's Standing Committee provides a mechanism for two-way communication between member CHCs and the Association. It considers draft ACHCEW papers and receives responses submitted to consultations and enquiries on behalf of the Association.

The Standing Committee has met six times during the last year.

It consists of the Chair of the Association, the two Vice-Chairs, the Honorary Treasurer and three representatives from each of the English NHS regions and Wales. Membership during the period covered by this report is set out below:

North & Yorkshire

Alan Hartley Vice-Chair
Peter Putwain
Alan Kerr
Valerie Bryden

South & West

Dr Geoffrey Burston
Jacqueline Salter

Trent

Charles Briscoe
Andy Franik
Jackie Gladden

West Midlands

Cllr David Wilkinson
Sheila Rogers
Sue Clarke

Eastern

Joyce Struthers Chair
Michael Downing Vice-Chair
John Kotz
Valerie Leake
Margaret Tozer

North West

Martin Candler
John Seddon
Cath Arnold

London

Ann Seymour
Petra Willoughby until November 1998
Elizabeth Manero
Julie Cox until January 1999

Wales

South	Brian Lennox-Smith
North	Meurig Hughes
Assoc. of Welsh CHCs	Sue Wilshire

South East

John Clark
Tom Fellows
Jenny Hunt until January 1999
Mike Collinson

Honorary Treasurer

Graham Girvan

NHS Executive Observer

Steve Jolliffe

Society of CHC Staff Observer

Mick Rolfe