ASSOCIATION OF COMMUNITY HEALTH COUNCILS FOR ENGLAND AND WALES

A STRONG ROLE FOR CHCS IN THE NEW NHS

The past twelve months have shown that after 25 years of making the health service better, CHCs are at the cutting edge of the modernisation of the health service.

We now have clear rights with regards to primary care trusts. The Commission for Health Improvement values our role in their work. We are represented on the NICE Partners' Council and a variety of NHS Direct related bodies.

Successive reports of the powerful Health Select Committee on Adverse Clinical Incidents, and Private Health Care have proposed a stronger role for CHCs.

At local level, most primary care groups have welcomed CHC participation with open arms. CHCs are partner organisations in some of the most innovative Health Action Zones. CHCs are at the heart of involving the public in health improvement programmes.

In Wales, CHCs have brokered a new structure that makes clear the Welsh Assembly's commitment to strong CHCs.

We did all this, for the most part, in spite of a budget freeze for English CHCs and real financial problems for Welsh CHCs. The consequent decision to increase central CHC budgets by more than inflation was a welcome financial recognition of the value that we add to the NHS.

A recent Community Service Volunteers' report estimated the value of CHC members' unpaid work at £7.9m. Add to that the many hours of unpaid overtime worked by CHC staff, and it becomes clear that CHCs represent some of the best value for money in the modern health service.

Donna Covey

Tana Corry

Director

CHAIRMAN'S INTRODUCTION

I was pleased and proud to be re-elected at last year's conference and thus given the opportunity to help take forward the initiatives of the previous twelve months.

At the time when I first became Chairman, in July 1998, the team of Honorary Officers, except for our Treasurer, was entirely new. Our new Director came into post in October. Clouds of uncertainty seemed to envelop the future of CHCs and ACHCEW.

However in March of this year the Department of Health issued the following message:

"It is clear at the moment that CHCs will have a positive future in the new NHS. We can see them playing a clear role in building bridges between local NHS providers and the communities which use them... However, we will need to coordinate our work with the findings of the Independent Commission lead by Will Hutton....."

The Hutton Commission, of which I have had the privilege to be a member, was initiated and serviced by ACHCEW. The fact that it has attracted so much interest is due to the strenuous efforts of many groups and individuals who have worked tirelessly to highlight the potential of CHCs.

In particular, we are indebted to my fellow Honorary Officers, Alan Hartley, Michael Downing and Graham Girvan, to Standing Committee colleagues, to the dedicated staff at ACHCEW - and, pre-eminently, to the energy, dynamism and talent of our Director, Donna Covey.

The future now seems full of promise!

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Joyce Struthers

Chairman

ACHCEW

A VITAL YEAR FOR ACHCEW

ACHCEW's constitution identifies three core functions for the Association

- To promote the role, work and activities of CHCs
- To provide a forum for exchange of views for CHCs, and express views on NHS matters to government and other bodies
- To provide information and advisory services to CHCs

THESE ARE SOME OF THIS YEAR'S HIGHLIGHTS IN CARRYING OUT OUR WORK

A NATIONAL VOICE TO PROMOTE CHCs

Our priority over the past year has been to expand and enhance our role as the national voice for CHCs - the one thing that only ACHCEW can do. We have done this in a number of ways:

USING THE MEDIA

The appointment of a press officer, Helen Eldridge, in July 1999 meant that we were well placed to input into the high profile of key health debates in the media this winter.

In particular Nationwide Casualty Watch 2000 in January highlighted issues affecting accident and emergency units. It attracted enormous media interest throughout the UK regionally and was covered in all the national daily newspapers the next day.

The press increasingly seeks our views, on behalf of CHCs, on a wide range of health issues.

YOUR VOICE IN PARLIAMENT

Our parliamentary activity has increased both in volume and effectiveness in the past year.

The All Party Parliamentary Group on CHCs was provided with briefings during the Health Bill and the role of CHCs was successfully raised at the committee stage of the Bill. An Early Day Motion congratulated CHCs on their 25th anniversary and recorded its appreciation of the work done. It attracted over 100 signatures and a letter of support on behalf of the Prime Minister.

In July ACHCEW's Vice Chair, Michael Downing and Policy Officer, Gary Fereday gave evidence to the Health Select Committee during their enquiry into adverse clinical incidents. The subsequent report recognised the valuable role that CHCs play assisting complainants and recommended that patients' advocates be based in every CHC.

In December the Health Minster, Gisela Stuart addressed the group outlining some of the Government's current thinking

around the issue of public accountability. The minister also addressed the reception sponsored by ACHCEW as part of the Health Care Sans Frontiers project - enabling her to meet a number of CHC staff and members, including ACHCEW staff.

REPRESENTING CHCs

ACHCEW has increasingly taken its rightful place at the table within health circles. We are represented on a growing number of influential committees and working groups, including:

- The BMA Board of Medical Education
- NICE Partners Council
- NHS Racial Harassment Task Force

WORKING WITH PARTNER ORGANISATIONS

We have worked effectively with a number of partner organisations during the past 12 months. Our joint work with the Royal College of Nursing (RCN), which included the influential report "Why are we waiting?" was a particular highlight.

We have established a contact group with Action for Victims of Medical Accidents (AVMA).

We have also worked closely with the BMA, the NHS Alliance and the GMC over the past year.

NEW LIFE FOR HEALTH

This year saw the completion of the work of the Independent Commission on Representing the Public Interest in the Health Service - chaired by Will Hutton and established and serviced by ACHCEW. The report received widespread press coverage, and its recommendations are now forming the basis for serious debate around representing the public interest in the health service, and the future role of CHCs.

EXCHANGING INFORMATION

We have continued to provide a wide range of material, and to promote best practice to CHCs over the past year. We

have produced ten issues of Health Perspectives - dealing with topical health issues such as complementary medicine, the generic drugs budget and NHS Direct. CHC News continues to be produced ten times a year, and sent to all members. CHC Listings keeps CHCs up to date with best practice across the country, as well as recent publications and consultation documents. Briefing material has also been produced on a wide range of legal issues.

The AGM once again provided CHCs with the opportunity to meet, network and exchange views.

SUPPORTING CHCs

Much of the Association's day to day work is about supporting individual CHCs in carrying out their duties. The following services are provided from the ACHCEW offices:

LEGAL SERVICES

The past twelve months have seen the introduction of wide-reaching legislation affecting all aspects of CHC activities. In addition to inputting into ACHCEW's work around the Health Bill, the legal team has also advised CHCs on the implications of the consequent Act and secondary legislation. Work has also been done on the implementation of the Data Protection Act 1998, further parts of the Disability Discrimination Act 1995, the forthcoming Human Rights Act 1998, and a substantial tranche of secondary legislation.

The legal service has continued to produce briefings and fact sheets informing CHCs of the changing legal environment in which they function. Proactive advice has been issued identifying issues such as human rights and human organ retention at an early stage so CHCs are able to take an informed and active role in debates on these subjects.

In 1999, over 1000 legal enquiries were received from CHCs. Despite this high level of usage the average response time is still just one day.

TRAINING

ACHCEW Training has offered 78 training days in 17 locations. Nine hundred CHC members and staff attended training on a wide range of topics from Mental Health Issues to Media Skills. The ACHCEW Training Bulletin is sent out twice yearly to all members to keep them up to date with training initiatives across the regions and at the Association. The training reference group, with representatives from each region, continues to meet every six months, providing a coordinated look at CHC member training.

During the year, a Quality & Standards in Training Panel was established to assist us in developing external accreditation of our training. Following a successful funding bid to the NHSE and the Northern and Yorkshire Regional Office we are now working with the region in piloting this work.

INFORMATION AND ENQUIRY SERVICE

The policy team runs the ACHCEW information and advice service, which responds to requests for information and advice from member CHCs. The information and enquiry service maintains a database of information on reports produced and surveys conducted by CHCs, and information on other reports and publications that may be of interest to CHCs. Literature searches are conducted and reference lists sent out. All CHCs are encouraged to send reports and surveys to ACHCEW and there are over 2,000 of these held by the Association. This unique source of information is also of interest to academics and other organisations.

Over the past year, around 200 enquiries a month have been received from CHCs. The service also deals with information requests from a wide range of outside organisations - one of the many ways we spread the word about the work of CHCs.

MAKING THE HEALTH SERVICE BETTER

ACHCEW has been a powerful voice for patients over the past year, advocating positive policies on a number of key issues. These have included:

NATIONWIDE CASUALTY WATCH

The third Nationwide Casualty Watch took place in January. For the first time the survey covered England, Wales, Scotland and Northern Ireland simultaneously. This survey was also unique in that ACHCEW worked in collaboration with the RCN. In order to develop the project RCN stewards at a number of A&E departments carried out surveys at around the same time as the ACHCEW snapshot and A&E nurse managers gave their views about what they considered to be the pressures on A&E departments. The results of the surveys were published in Why are we waiting? a joint report by ACHCEW and the RCN. As well as highlighting the continuing problem of long waits in A&E departments the report recommends a number of ways in which the problem might be solved. Copies of the report were sent to all MPs in the UK urging them to take up the issues with the chief executives at their local hospitals.

PATIENT CONFIDENTIALITY

ACHCEW has continued to speak up for patient confidentiality. This has involved making representations to the various bodies which have considered issuing guidance on the use of patient information, including the General Medical Council, the Medical Research Council, Royal Colleges, the British Medical Association and the Department of Health. Efforts have been made to defend patient rights during the preparation of secondary legislation to the Data Protection Act and in the course of legal proceedings. ACHCEW has secured many allies in the fight to ensure that patient autonomy is respected and has successfully persuaded the GMC to modify their guidance to reflect this.

DATA PROTECTION ACT

The Data Protection Act 1998 and an array of secondary legislation finally came into force on 1 March 2000. Having identified problems that could affect patients' rights to access their own medical records, ACHCEW sought and obtained guarantees that these rights would be protected. In some respects patient rights have been enhanced, although the level

of charges for copies of records remains a bone of contention. We have kept CHCs informed of developments and lobbied the Department of Health to issue guidance to CHCs on their own responsibilities as data controllers under the Act.

COMPLAINTS

ACHCEW continued to put the case for the invaluable role that CHCs play in the NHS complaints procedure to be formally recognised and adequately funded. It is often overlooked that whilst assisting complainants with some 30,000 complaints every year CHCs have never had statutory responsibility or funding to undertake this work.

The Association was represented on the advisory body to the Public Law Project's complaints procedure research, and the NHS Executive's Complaints Evaluation Group. Dialogue with the Ombudsman's Office has also increased.

The Public Law Project's report received widespread interest and one of its main recommendations is that the Department of Health should formally recognise the role of CHCs in assisting complainants and that funding should be made available for the appointment and training of a complaints officer for every CHC. ACHCEW also gave evidence to the Health Select Committee, which made similar recommendations (see Your Voice in Parliament).

DENTISTRY

The lack of NHS dentistry has continued to give cause for concern. A motion at the 1999 ACHCEW conference gave rise to substantial media coverage for the Association on the issue. Meetings have consequently taken place with a variety of organisations such as the General Dental Council and the British Dental Association. We are working towards common agreement around likely solutions to the crisis in NHS dentistry.

MODERNISING ACHCEW

The Association has itself recognised the need to change during the year. Members have been consulted on options for the reform of ACHCEW's decision-making processes, and proposals will be discussed at AGM 2000.

THE YEAR IN ACHCEW AT A GLANCE

These are just some of the day to day activities that kept ACHCEW staff busy during 1999/2000

	Training 900 CHC members and staff on a wide range of issues from building links with local communities to the new NHS
	Training took place on 78 days at 17 different locations
	Dealing with over 1,000 requests for legal advice, with an average response time of just one day
	Producing 12 legal bulletins on issues ranging from patient confidentiality to the Disability Discrimination Act
	Answering almost 2,500 requests for policy advice and information from CHCs and other organisations
6	Responding to over 30 consultation documents from Government, the Royal Colleges and other national bodies
	Producing 10 Health Perspectives on a wide range of issues from the culture of health care to generic drugs budgets
	Producing 10 issues of CHC News
	Producing 10 issues of CHC Listings
	Representing ACHCEW on over 20 outside bodies
	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 400 participants across 3 days
	Servicing the Commission on Representing the Public Interest in the Health Service
	Providing support services and briefing material for the All Party Parliamentary Group on CHCs
	Attending over 100 meetings a year on behalf of ACHCEW
	Selling over 20,000 leaflets, and 400 other publications
	Speaking at over 30 conferences during the year - putting the CHC viewpoint to a wide range of audiences
	Meeting with Ministers and civil servants on a wide range of issues
	Handling over 500 media inquiries
	Achieving over 30 mentions in the national papers, and over 70 mentions on radio

WHO'S WHO AT ACHCEW

The ACHCEW staff group is very much a team, and all input into our core work. However, they all have their own areas of expertise and responsibility too, and these are set out below:

Allison Anthony

Training Organiser

Allison job shares and works one day a week. She is responsible for organising the twice-yearly training programme, in-house training, training resource data and the training bulletin. She is currently developing a system of accreditation for members' training.

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 is on the steering group for Help the Aged's Dignity on the Ward campaign.

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 also organises the Annual General Meeting.

Donna Covey

Director

Donna is responsible for the day to day running of the organisation. She acts as the public face of ACHCEW, speaking at a wide range of conferences. She represents ACHCEW on a wide range of committees, including the NICE Partners Council and the Clinical Disputes Forum.

Sheila Dollery

Receptionist/Administrative Assistant

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

Helen Eldridge

Press Officer

Helen is responsible for developing and implementing ACHCEW's media and public relations strategy. She is also responsible for marketing publications, assisting member CHCs in dealing with the media and for developing the web site.

Gary Fereday

Policy Officer

Gary has particular responsibility for ACHCEW's work on the new initiatives brought about by the Health Act. He is the lead member of staff on the NHS

complaints procedure. He is responsible for developing the Association's parliamentary activity and supporting the All Party Parliamentary Group on CHCs. He represents ACHCEW on the steering group of the Patients' Forum.

Maggie Flynn

Receptionist/Administrative Assistant

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

Diane Jones

Personal Assistant to the Director

Diane works part-time as Personal Assistant to the Director.

Estelle Kiss

Administrative Assistant

Estelle works part-time, running the publications service.

Frances Presley

Policy Officer

Frances is a member of the policy team and runs the information inquiry service. She also has responsibility for maternity care and telemedicine issues.

Liz Rickarby

Training Organiser

Liz job shares and works three days a week. She is responsible for organising the twice-yearly training programme, in-house training, training resource data and the training bulletin. She is currently developing a system of accreditation for members' training.

Legal Assistant

Appointment pending

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:

Joyce Struthers Chair

Alan Hartley Vice-Chair

Michael Downing Vice-Chair

Graham Girvan Honorary Treasurer

North & Yorkshire

Peter Putwain

Paulette Huntington

Valerie Bryden

Trent

Charles Briscoe

Andy Franik

Marilyn Merry

Eastern

Heather Barrow

Anita Shortland

Tony Tester

London

Donald Roy

Elizabeth Manero

Janis Bryan

South East

John Clark

Tom Fellows

Mike Collinson

South & West

Dr Geoffrey Burston

Jacqueline Salter

West Midlands

Elaine Garratt

Pauline Davis

Sue Clarke

North West

Martin Candler

John Seddon

Cath Arnold

Wales

(South) Brian Lennox-Smith

(North) John Leece-Jones

Association of Welsh CHCs

lane leffs

NHS Executive Observer

Steve McKenny

Society of CHC Staff Observer

Mick Rolfe



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