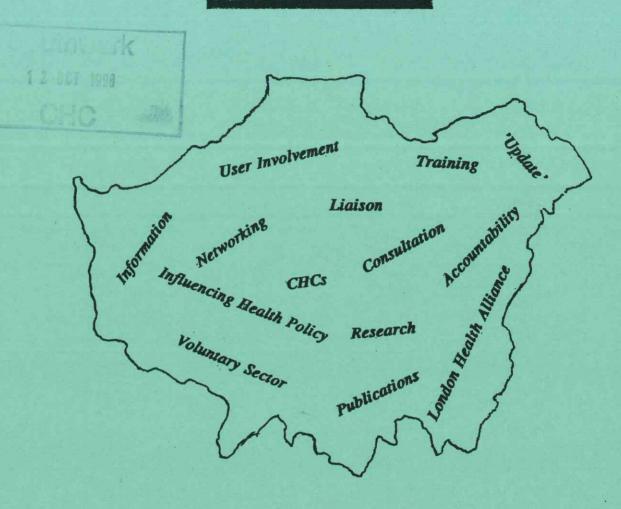
GLACHC

The Greater London Association of Community Health Councils



# **Annual Report**

of the

Greater London Association of Community Health Councils

April 1997 - September 1998

356 Holloway Road, London N7 6PA
Telephone: 0171 700 8125 \* Facsimile 0171 700 8126
Registered as a company with limited liability. No. 2662266

## ABOUT GLACHC

The Greater London Association of Community Health Councils (GLACHC) is a voluntary organisation founded in 1984, in recognition of the need to give a voice to Londoners as users of health services.

In 1991, GLACHC became a Company limited by guarantee, and its Memorandum of Association States that it is established:

- \* to provide information, training and support to Greater London Community Health Councils;
- \* to help Greater London Community Health Councils acquire a higher profile;
- \* to provide a forum for users of the National Health Service in London to express their views on the health service;
- \* to promote co-operation and liaison between Greater London Community Health Councils, user groups, and voluntary organisations.

The main aim of GLACHC is to strengthen the voice of London's NHS users and potential users in policy making and decision taking forums.

## In order to achieve its aims GLACHC:

- \* Undertakes research on a variety of health service issues, with particular relevance to CHCs and health service users;
- \* Publishes research findings, discussion documents and conference papers;
- \* Provides information on health policy issues and London CHC initiatives;
- \* Provides training for CHCs, voluntary organisations and statutory organisations;
- Undertakes consultancy;
- Liaises between London CHCs and other organisations;
- \* Ensures that the views of CHCs and health service users are included wherever possible;
- \* Works on London-wide issues to encourage a strategic and co-ordinated approach to London' health services.

## CHC MEMBERS OF GLACHC AS AT 1ST APRIL 1998

All twenty-nine Greater London Community Health Councils are members of GLACHC.

```
Barking, Dagenham & Havering
Barnet
 Bexley
 Brent
  Bromley
   Camden
   City & Hackney
    Croydon
     Ealing
     Enfield
      Greenwich
       Hammersmith & Fulham
       Haringey
        Harrow
         Hillingdon
          Hounslow
          Islington
           Kensington, Chelsea & Westminster
            Kingston
            Lambeth
             Lewisham
              Merton & Sutton
              Newham
               Redbridge
                Richmond & Twickenham
                 Southwark
                 Tower Hamlets
                  Wandsworth
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## Associate Membership of GLACHC

Other organisations and individuals who are not eligible for full membership, and who support the aims of GLACHC, may become Associates of GLACHC, on payment of a small annual subscription. Although they do not have voting rights, or take part in the management of GLACHC, they are welcome to work closely with GLACHC and make use of its work.

At present we have seventeen associate members, which include CHCs outside Greater London, voluntary and charitable organisations.

## MANAGEMENT OF GLACHC

A management committee of ten people, including the Chair, Vice Chair, Hon. Secretary and Hon. Treasurer, are elected annually at our Annual General Meeting by Greater London Community Health Councils. A further four people, who need not come from CHCs, may be co-opted. Co-opted members are welcomed for their particular interests and expertise, and co-options enable us to ensure that the management committee reflects GLACHC's commitment to equal opportunities to a greater extent than might otherwise be possible.

The management committee meets approximately every six weeks, on a week-day evening at venues around London. Member CHCs may send observers to the meetings if they so wish, whether or not they have a representative voted or co-opted onto the management committee.

At present GLACHC has six sub-committees: Quality; Fundraising; Personnel; Projects; Complaints, Grievances & Disciplinary; Appeals.

# GLACHC Management Committee Members as of 1st April, 1998.

## Executive

Chair:

Linda Ah-Fong

(Wandsworth CHC)

Vice Chair:

Rachel Brook-Shaverin

(Harrow)

Hon. Secretary:

Clara MacKay

(Merton & Sutton)

Hon. Treasurer:

Donald Roy

(Wandsworth)

## Members

Fran English

(Ealing)

Bert Johnson

(Merton & Sutton)

Siobhan McCollum

(Hammersmith & Fulham)

Jagdish Sharma

(Croydon)

Steve Stevenson

(City & Hackney)

Sue Young

(Barking, Dagenham & Havering)

In the absence of Linda Ah-Fong, Dr. Jagdish Sharma agreed to become acting Chair in May 1998.

#### GLACHC STAFF

Director:

Sue Towns

Research & Information Officer:

Bolaji Bank-Anthony

Judith Friend continues to be our excellent book-keeper, and we are fortunate that Nikki Joule and Mandana Hendessi, freelance researchers, have continued to contribute to the work of GLACHC.

In the past year we were very sad to lose Vicky Nicholls, Assistant Director, who made a unique and special contribution to our work, and Chris Kelly, our very able Administrator.

However, we were extremely fortunate that Bolaji Bank-Anthony who took up the post of Research & Development Officer in June, brings to GLACHC a rich and varied research and training background.

Due to financial restraints, we have not as yet been able to replace our administrator.

#### HONORARY OFFICERS' AND DIRECTOR'S REPORTS

#### ACTING CHAIR'S REPORT

The last twelve months have proved extremely exacting and challenging for GLACHC.

However, despite financial pressures, the Director's report shows that we have still been able to undertake a substantial amount of work.

Under the Chairpersonship of Linda Ah-Fong, several new sub-committees were established: Quality, to develop London Boroughs' Grants (our principal core funders) twelve 'core' quality assurance measures and quality indicators, and GLACHC's strategic direction plan and work programme; Fundraising, to explore new opportunities to raise income; Personnel, to oversee personnel issues and staff appointments; Projects, to develop new areas of work and oversee projects; Complaints, to investigate complaints made against GLACHC; Grievance and Disciplinary; and Appeals.

Sadly, due to unforseen circumstances, Linda Ah-Fong our very hard-working and able Chair, was unable to continue her work with GLACHC, and I was asked to become Acting Chair in May, a task I have greatly enjoyed.

We look to the future with renewed enthusiasm. The establishment of a new NHS Executive Regional Office for London, and a Greater London Authority with a public health agenda, will provide for GLACHC we believe, an enhanced and more focused role. Exciting times are ahead!

I thank members of the Management Committee and staff members, who have worked so hard and maintained commitment and enthusiasm for GLACHC, to our funders, who have continued to have confidence in the quality of work we produce, and very importantly, to CHCs in Greater London who have been closely involved in our work and continue to support us.

GLACHC is a small organisation with a big job to do!

Jagdish Sharma (Dr)

## HONORARY TREASURER'S REPORT

GLACHC had a large financial deficit in 1997/98, sufficient to eliminate its accumulated reserves. By the end of the financial year, expenditure had fallen into line with income, due to a reduction in staff costs.

The likelihood is that GLACHC will break even (at a somewhat reduced level of activity) in 1998/99. Both a grant from the London Boroughs' Grants and finance for specific projects have been obtained. Nonetheless, the financial position remains precarious and contingency plans for voluntary liquidation are being kept up to date.

Donald Roy.

Hon. Treasurer.

#### DIRECTOR'S REPORT

Whilst GLACHC has undergone a period of financial uncertainty and staff shortages, it gives me great pleasure to inform you of the work we have been able to undertake.

## Strategic Review of London's Health Services.

A great deal of time was spent in the summer of 1997 submitting evidence to the London Health Review Team.

GLACHC organised a pre-meeting for all London CHCs to prepare an agenda to discuss with members of the Review Team. The actual meeting was well attended by CHCs and many areas of concern raised and recommendations made.

The team specifically asked for two pieces of work GLACHC was undertaking at the time: the survey of London's minor injuries/treatment centres; initial research into the withdrawal/restriction of access services for Black and minority ethnic communities.

The meeting informed GLACHC's written evidence to what later became known as the 'Turnberg Report'.

Press releases were issued at various stages of the review and after the Government's response, and comments asked for by newspapers, journals and local radio.

#### GLACHC AND 'THE NEW NHS'

Trying to keep abreast of rapid and continuous changes introduced by the White Paper 'The New NHS. Modern, Dependable' has been a challenge for CHCs and the voluntary sector alike.

As stated elsewhere, GLACHC arranged for Mike Farrer, Head of General Medical Services, NHS Executive, to discuss changes to primary care at a seminar organised for London CHCs, the day after the White Paper was launched. A pure coincidence!

Alan Milburn, Minister of State for Health, was a keynote speaker at a conference GLACHC organised in March 'The New NHS. Modern, Dependable. Users: Involved or Ignored?' at which he made two Government announcements. (described later)

GLACHC has formed a Primary Care Groups (PCGs) Working Group for London CHCs, and has undertaken to circulate papers on CHC involvement and initiates, and areas of good practice. We are also seeking funding to expand this work, which will hopefully make life easier for CHCs!

GLACHC will be responding to the 'summer guidance' which includes CHC, voluntary sector, user and public involvement in PCGs. Our recommendations will include: CHCs to have a legal, explicit right to be consulted on all significant changes to commissioning intentions of the Primary Care/Local Health Groups and any other primary care providers such as dentists, opticians and pharmacists; CHCs should be given speaker observer status

on the Primary Care/Local Health Groups governing bodies; that there should be a statutory duty on PCGs to consult voluntary organisations, users, cares and CHCs in drawing up and reviewing their action plans, demonstrate and publish how they have done this and the outcome.

The working group will be identifying training needs for CHC staff and members.

## GLACHC RESEARCH AND PUBLICATIONS

Based on the concerns expressed by Greater London CHCs, the voluntary sector and users of services, GLACHC undertakes research into the provision of London' health services, highlights gaps in services and campaigns for change.

During the period in question, GLACHC has produced the following publications:

## Reports:

'Taking the Strain? A Report of a Survey of Minor Injuries/ Treatment Services in Greater London' - October, 1997.

As a result of concerns expressed by CHCs about the knock-on effects of Accident and Emergency (A&E) department closures on neighbouring services and patients, and the replacement of A&E departments by minor injuries/treatment centres, GLACHC undertook the very first survey of such services across London, including those established to alleviate pressure on A&Es.

The resulting report focused particularly on: definition of the service; accessibility; publicity; usage; direct access to other services; use of protocols; the availability of interpreting and advocacy services; monitoring; sources and length of funding.

A series of recommendations were made to central Government, NHS Executive Regional Offices, and to the London Strategic Health Review Team.

The report was funded by UNISON.

'Behind 'Open' Doors' and 'Opening the Door to Public Involvement in Health Authority and Trust Board Meetings. A Manual of Good Practice'. July 1998.

The report looked at how 'open' Health Authority (HA) and Trust board meetings were, whether CHCs as local statutory health watchdog bodies had speaking rights and access to the confidential part of meetings, the level of public participation in board meetings across London, HAs and Trusts plans to encourage public involvement, and how representative HA and Trust executive and non-executive directors were of the communities they serve.

The 'Manual of Good Practice' was a compilation of ideas from CHCs, HAs, Trusts and GLACHC.

Again, a series of recommendations were made to policy and health bodies at all levels, and an encouraging response was received by GLACHC from Paul Boateng, Junior Health Minister.

Interestingly, there has been enormous interest shown in this report from all over Britain.

Contribution to the funding of the report was made by the Lord Ashdown Charitable Settlement.

## 'Community Involvement in Needs Assessment' - as yet unpublished

The report of a survey examining how, or if HAs were involving communities in needs assessment, particularly looking at examples of community development work, and highlighting good practice.

The project has been funded by the Health Education Authority, and has been with them for proof reading for over a year, although we have been assured by HEA that it will be published in the near future. This work will be particularly valuable with the development of Health Improvement Programmes.

'Sacrificing Dignity for Efficiency - Two Years On' A survey of CHCs views on the provision of single sex accommodation in London's hospitals' - May 1997.

The survey was undertaken two years after a major high profile GLACHC report 'Sacrificing Dignity for Efficiency' was published, highlighting the problems experienced by patients placed in mixed sex accommodation.

The survey revealed that in both acute and mental health facilities in many part of London, Patient's Charter standards regarding single-sex accommodation were far from being met.

GLACHC made recommendations to the NHS Executive, HAs, Trusts and CHCs. Baroness Margaret Jay, Health Minister at the time, expressed interest in the findings.

Joint GLACHC/Race on the Agenda (ROTA)/UNISON project 'Access support services for Black and minority ethnic people' Part one - 'Assessment of the availability of, and need for bi-lingual health advocacy'.

The first part of this on-going project, looked at the reduction/restriction of access services for people from Black and minority ethnic groups and refugees and focused on bi-lingual advocacy.

The findings of this report were submitted to the London Strategic Health Review team at their request.

Further funding has been agreed by UNISON to extend this vital work.

## **Information Briefings:**

'London as a Healthy City. Demystifying the Agenda'. January 1998.

GLACHC produced this briefing in response to the many initiatives which related to 'London as a Healthy City' with brief, jargon free explanations of some of the main developments which had influenced the agenda, eg. Health for All, Healthy Cities, Agenda 21, Health Action Zones, the Greater London Authority.

## 'Effective Visiting for CHCs' January 1998.

An update of the original version, which included the practicalities of visiting, visiting challenges, eg. to GP practices, monitoring race and health issues, and developing a patient centred checklist.

# GLACHC TRAINING/SEMINARS/CONFERENCES

Due to the shortage of staff, GLACHC has been unable to provide the usual amount of training sessions, conferences and seminars.

However, GLACHC did host a conference for CHCs in March 1998, 'The New NHS. Modern, dependable. Users involved or ignored?'

One of the keynote speakers, Alan Milburn, Minister of State for Health with a portfolio for London, took the opportunity to make two Government announcements: the establishment of an independent panel of experts to advise on controversial changes to local health services; a Government commitment to publishing information about all aspects of NHS performance.

Seminar on primary care changes for CHCs with Mike Farrer, Head of General Medical Services, NHS Executive. As this took place on the day after the launch of The New NHS', Mike was able to describe the introduction of Primary Care Groups and Health Improvement Programmes.

Seminar on The Green Paper. 'Our Healthier Nation', with Tessa Ing, the original author. This was jointly organised by London Voluntary Service Council and GLACHC for the voluntary sector and CHCs.

Action for Sick Children and GLACHC jointly organised a training day for CHCs, 'Good Practices in Children's Health Services'. This event was used by Action for Sick Children as a training pilot to be taken to groups of CHCs throughout the country.

'Monitoring Health Services' a day's training for CHCs which was open to voluntary organisations.

# GLACHC - STRENGTHENING THE VOICE OF USERS

# LONDON HEALTH ALLIANCE (LHA)

GLACHC continues to convene London Health Alliance, an informal coalition of pan-London voluntary organisations with an interest in health.

LHA meets six times a year and comprises: Alzheimers Disease Society; Age Concern London; Carers National Association London; Greater London Association of Alcohol Services; Greater London Association of Disabled People; Greater London Forum for the Elderly; Health Action for Homeless People; London Drugs Services Consortium; Race on the Agenda; London Voluntary Service Council; London Health Emergency; Mencap London Division; Refugee Council; South-east MIND; Women's Health; London Youth Matters; Princess Royal Trust for Carers; London Women's Aid; the Afiya Trust.

Other London voluntary organisations receive agendas, minutes and information, but due to resource restraints, including having only one or two staff members, are unable to attend meetings, but like to keep in touch.

## Work undertaken by LHA include:

- \* The production of an 'Election Manifesto', which was disseminated to all London's prospective parliamentary candidates. Campaigning included articles for journals/newsletters and a radio interview.
- \* LHA was one of the first organisation Alan Milburn, Health Minister with a portfolio which includes London, asked to see. Members were able to discuss at length with the Minister concerns about, and recommendations for improvements to London's health services.
- \* Responded to the London Health Review.
- \* Responded to and met a representative of London door to door transport review.
- \* Worked with GLACHC to undertake a survey of single/mixed sex hospital accommodation in London, and campaigned on the results via journals, newsletters, and radio interviews.
- \* Worked with London Voluntary Service Council to organise a seminar on the Green Paper 'Our Healthier Nation' for London's voluntary sector, and responded to the consultation document.
- \* Members were involved in the GLACHC conference on the White Paper 'The New NHS. Modern, Dependable. Users: Involved or Ignored?'.
- \* Responded to the Green/White Paper on a Greater London Authority.

Current on-going work includes: promoting/campaigning for a strategic approach to voluntary sector involvement in Primary Care Groups and Health Improvement Programmes; voluntary

sector representation/involvement in the Greater London Authority and influencing the public health agenda.

LHA provides a network to regularly exchange information and update on current work.

LHA is seeking Lotteries funding to employ a Development Worker to further develop and expand its unique role as the only strategic body representing London's voluntary sector on health issues.

# GLACHC FORUM MEETINGS FOR LAY REPRESENTATIVES OF MATERNITY SERVICES LIAISON COMMITTEES (MSLCS) IN GREATER LONDON

GLACHC convenes five forums a year for CHC and other lay members of Maternity Services Liaison Committees. The aim of the forums is to provide informal training, to network and exchange information and ideas, and to provide support, especially to new lay members and lay Chairs, many of whom still have to fight hard to get their voices heard on professionally dominated MSLCS.

A guest speaker of the women's choice is invited to the majority of meetings, but there is also time for discussion and networking.

The forums have focused on: quality of care in London's maternity units, issues around choice; surveys of women's experiences of maternity services; maternity handbooks; breast feeding support groups; ante-natal testing; the role of the lay representative; chairing meetings; networking with allies.

At present the women are comparing the reality of London's maternity services to the Changing Childbirth principles. Information is to be sent to Baroness Hayman, Parliamentary Under-Secretary for Health.

The forums are funded by the Inner London Health Authority Chief Executives group, for which we are very grateful.

## LONDON AMBULANCE SERVICE

GLACHC has developed a good, if somewhat challenging relationship with London Ambulance Service.

The Director of GLACHC attends their Complaints and Good Practices Panel which meets approximately five times a year. The Panel not only looks at complaints and the way they are handled, but also at the quality of service provided. Members are endeavouring to devise ways for service users and carers to comment on the service they receive, and of making the complaints procedure more widely available.

CHCs are invited to raise issues of concern to the Director, who will then raise them with the Panel.

The Chair and staff of GLACHC endeavour to attend the Trust board meetings and Annual General Meetings.

LAS's Director of Communication and GLACHC Director meet bi-monthly to discuss areas of interest/concern, including CHCs and public involvement in the board meetings.

## GLACHC AND LONDON'S VOLUNTARY SECTOR

As well as our work with London Health Alliance, we continue to strengthen and extend our contact with London's voluntary sector.

The appointment of Jane Belman, as Community Care Policy Development Officer at London Voluntary Service Council, has lead to some creative joint working and sharing of resources, including organising a seminar for Community Care Development Officers, members of London Health Alliance and other voluntary organisations, to explore The Green Paper 'Our Healthier Nation'. The seminar informed a joint response to this very important consultation policy document.

GLACHC is regularly requested to take part in voluntary sector advisory and steering groups and give talks at seminars/conferences on London's health services, and how users/potential users and voluntary organisations can influence health policy.

During the period in question, we have been represented on: Carers National Association London Advisory Group; Age Concern London GP and Primary Care Reference Group; Greater London Association of Disabled People (GLAD) Mental Health Group and Maternity Services Groups' Meetings convened by Maternity Services Alliance.

We greatly value our membership of the Patients' Forum, a forum of national and regional voluntary organisations concerned to discuss and influence health and social policy. Under the Chairpersonship of Barbara Meredith from the National Consumer Council and latterly Francine Bates from National Carers Association, the credibility of the Patients' Forum has grown to the point where members are increasingly being consulted by the NHS Executive to advise on user, carer, public involvement/issues at national policy making level.

## NETWORKING AND LIAISON - THE LIFE-BLOOD OF GLACHC

Keeping abreast of current rapid changes in health and social services is a formidable task. This not only involves reading mounds of papers, consultation documents, NHS Executive Letters and Guidance, White and Green Papers, but liaising with other organisations and developing partnerships with them.

GLACHC regularly liaises with many organisations including: the King's Fund; College of Health; UNISON; Association of Community Health Councils in England and Wales; North and South Thames Regional NHS Executive Offices; Department of Health; Association of London Government (ALG).

GLACHC is represented on the London Community Care Action Group, ALG's London Health Network and Agenda 21 and 'London as a healthy city' projects' working groups.

GLACHC has also attended meetings at the King's Fund, ALG and London Voluntary Service Council who are concerned to promote a public health function for the proposed

Greater London Authority, and voluntary sector input into the decision making process.

#### SHARING INFORMATION

## GLACHC Newsletter 'Update'

In July 1997, GLACHC produced its one hundredth addition of 'Update', our newsletter which is regularly circulated to CHCs, voluntary and statutory organisations, funding bodies, interested individuals and all London MPs.

'Update' is a short and snappy news-sheet, giving information on health issues and changes in policies, London's health services, news from CHCs and the voluntary sector, affordable training, interesting publications and seminars and conferences.

Questions have been asked on the floor of the House of Commons as a result of information contained in 'Update'!

## **Giving information**

The staff of GLACHC regularly read all sixteen health authority papers, and all twenty-nine CHC papers! We also collect a great deal of information about London's health services, voluntary sector resources, and user/potential user issues. We have vast networks throughout London and are therefore in a position to provide an information service to those who need it.

Whilst we do receive many and varied information queries, we believe this is a very underused resource.

#### GLACHC and London's media

Hardly a day goes by, without an enquiry from a television, radio or newspaper/journal/periodical researcher/journalist, often seeking information on London health service issues, a willing 'body' to talk about a personal experience of a particular health service, or even ideas for future programmes or articles.

GLACHC's Director has given television interviews on waiting lists, cervical screening, winter pressures, London Ambulance Service, the Turnberg Report, 999 calls and complaints about London's hospitals as highlighted by the Health Services Commissioner's report.

GLACHC pro-actively issues press releases when launching our reports and on current issues of concern.

## 50th Anniversary of the NHS

This celebration provided an ideal opportunity to publicise the work of GLACHC and London's Community Health Councils. The Patients' Forum obtained a complimentary stand at the Earl's Court NHS Exhibition in July 1998, to which GLACHC contributed.

#### GLACHC AND CONSULTATION

GLACHC responds to as many consultation documents as our resources allow, which has included: The Green Paper 'Our Healthier Nation', the Green paper on Government for London, A Review of London's Accident and Emergency Protocols, and Review of Door to Door Transport for Disabled Londoners.

#### **MONEY MATTERS!**

The Director and Fundraising Committee continue to seek new opportunities to fund GLACHC, including exploring the possibility of applying for charitable status as this would enable us to approach a wider variety of funders.

Because of the nature of the organisation, our fundraising efforts continue to focus mainly on applications to fund research and development projects that would be of use to CHCs and the voluntary sector.

GLACHC publications, training, seminars and conferences continue to generate income.

We are grateful to London Boroughs' Grants for another year's core funding, to UNISON, the Lord Ashdown Charitable Settlement and the Inner London Health Authority Chief Executives for funding specific projects.

Thank you also to the CHCs who so generously donated towards GLACHC projects.

I would also like to take this opportunity to thank GLACHC staff past and present, the management committee members, CHC colleagues, London Health Alliance members, and everyone involved in the work of GLACHC.

Ros Levenson, former Director of GLACHC said that one of the nicest things about working for GLACHC, was the lovely people one meets. I wholeheartedly agree!

Sue Towns

