



Skills for CHC Chairs

Unit 3: Working with the Public

HOW TO
USE THIS
UNIT

You will need:

* pen and paper

You should set aside about an hour to work through this unit.
[If it takes you more or less than that, it doesn't matter, as long as you feel you've given enough thought to the ideas].

Much of the unit, like the role of the Chair, is about complex situations, which do not have simple yes/no answers. Reflecting on these situations, and deciding how you would behave, is the most important part of the learning.

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1. Meeting the public
2. CHC meetings and the public
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4. Involving people

1. Meeting the public

The Chair is the public face and voice of the CHC, the person most identified with it in people's minds. This Unit looks at the various kinds of contact with the public you will have, and the skills you need in these different situations.

LIST

all the situations you can think of,
when as Chair you come into contact
with members of the public.

1.

2.

3.

4.

5.

NOW
CHECK

your answers with ours

ANSWERS

1. full CHC meetings
2. public consultations set up by the CHC, or jointly with the health authority or other groups
3. other conferences, discussion forums
4. radio phone-ins
5. schools, colleges [giving talks or taking part in education projects]
6. meetings of local groups or clubs, if you give a talk
7. projects where the CHC uses people as volunteers

You may have thought of more, especially if your CHC is imaginative in the way it works with people.

Some of these activities specifically need you as Chair; others you might divide up with the Chief Officer or other members, according to everyone's skills and preferences.

NOW
CONSIDER

what skills or personal qualities
you need in your public role

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

CHECK

your ideas with ours

1. clarity [about CHC policy, the purpose of the meeting, and your own role]
2. ability and willingness to listen
3. interest in the views of ordinary people
4. chairing skills [especially containing discussion and summarising]
5. assertiveness
6. reasonable self-confidence
7. articulacy
8. patience

There are probably many more!

GO OVER

your list and ours, and identify:
i: which of these you're good at
ii: which you might want to develop further

i:

ii:

These notes are for your own reference; so that you can monitor how you work, and look for opportunities to learn and practice.

Talk to your Chief Officer if you want to find training courses to help you.

2. CHC meetings and the public

IMAGINE

you have no formal connections with the CHC or the health service. You are not someone who usually gets involved in local issues, or attends public meetings.

You read in the local paper that the local maternity hospital is due to close. You're outraged. The hospital building is old and run-down, but it's part of your history and that of your community. Your children were born there, you have visited friends and neighbours in there. Its reputation is as an informal, friendly place, where women are listened to. You're aware that there have been serious problems recently - anaesthetists not being available at night, for instance - but you don't think that is a reason to close it.

According to the paper, the proposal is to centralise maternity services in a new hospital, twenty miles away. You don't see how this can work. Public transport is unreliable, and the ambulance service has more and more problems. You also don't think that a large busy ward can have the same atmosphere.

You come to the CHC meeting because you saw an ad in the same paper. You don't know what the CHC is or what it does. You think at least it's a chance to speak out.

WHAT
WOULD

help you cope with the meeting?

NOW
CHECK

your answers with ours

1. to be made welcome: spoken to, given papers, told where to sit, given a chance to ask questions before it starts
2. to be told who's who
3. to know what the CHC is, and what the meeting is for
4. to find out whether this is the appropriate place to raise your concerns, and if not, where is
5. to find out when it's appropriate for you to speak
6. to know whether you're allowed to speak at any other time
7. to be listened to with respect and attention
8. to find out what is going to happen as a result of the meeting
9. to be told how else you can make your views known, if you're not satisfied with this

As Chair you don't have to carry out all the tasks that this implies, but you do need to make sure they happen. It is easy to forget how excluding meetings can feel, to people attending for the first time. It's courtesy to help people feel more relaxed; it can also make it easier for you. Many 'difficult' members of the public wouldn't be, if they knew what was going on, and felt they could contribute.

Dealing with difficulties

CONSIDER

this example

You are chairing the CHC meeting, and someone comes in late. He causes a slight disturbance getting to his seat. You welcome him and tell him which item is being discussed. He takes a bundle of papers out of his bag and sorts through them, apparently taking no notice of the discussion.

Some time later you reach an item on the local children's hospital. The CHC has had concerns about standards of care, and the Vice Chair is reporting back on her meeting with the hospital management.

In the middle of her report, the man stands up and asks what the hospital is doing about negligence. You ask him to wait, and he sits down. As soon as she's finished he's on his feet again, reading out a series of questions about the hospital's management, staffing and professional standards. The questions are phrased in general terms, but he clearly has a personal agenda in asking them, and his tone is angry and accusing. You see the journalists picking up their notebooks at the back of the room.

How would you respond?

NOTE
DOWN

your thoughts about the situation.

NOW
COMPARE

your ideas with ours

1. The Vice Chair may be perfectly happy to deal with his questions. If she is, fine. The first rule of chairing meetings is not to intervene unless you need to.
2. One of the tricks of working with difficult people is to stop thinking of them as difficult. That makes you less defensive, and more able to think clearly. This man has obviously had some experience with the children's hospital that's made him angry and distressed. That's something you can understand, even if he doesn't express his feelings very constructively.
3. As in the previous example, he may not know the most appropriate way to pursue his concern; or he may have tried and got nowhere. Either of these would make some people behave aggressively.
4. As soon as you can, you need to work out whether what he's saying belongs at this point in the meeting. Listen to the content rather than the tone in deciding this. The main thing is to keep a balance between the needs of the meeting as a whole, and those of the individual.
5. Thank him for coming to the meeting, and stress that it is important for the CHC to hear his views.
6. Try summarising: 'As I understand it you want to know...' This lets you check that you have understood; it brings his contribution onto an equal footing with other people's; and it makes him feel heard. He's more likely to calm down if he feels he's being taken seriously.
7. If you've decided that this isn't the time to deal with his issues, say so as soon as possible. Suggest another point when he could raise them; under Any Other Business if necessary. Do this courteously; after all, it's not his job to understand the agenda.
8. If he's still angry, suggest other ways forward. You could ask a member of staff to go with him to another room, and take down details of his concerns.

Nobody finds this situation very easy: but you can develop the skills you need. If you have to deal with an incident like this, you might want to talk it through with the Chief Officer or Vice Chair afterwards, to identify what worked and what you might do differently in future.

3. Consulting the public

EXAMPLE

The DHA plans to open a new Minor Injuries Unit at the largest hospital in the district. CHC members discuss the plans thoroughly, and are unanimous in welcoming them. One of them says: 'So why do we need to consult on this one?'

What's your answer?

LIST

as many reasons as you can think of

1.

2.

3.

4.

5.

NOW
CHECK

your answers with ours

1. Because people have a right to express their views
2. Because members between them are unlikely to know the views of the whole community
3. Because CHC members aren't elected representatives, and don't have a mandate to act on their own opinions
4. Because you may all have missed something
5. Because there may be practical details you don't know about: that the bus from one estate to the hospital only goes on Fridays, for instance
6. Because it introduces people to the CHC as a concerned, responsive organisation

You may have more.

In public consultations your 'figurehead' role is most evident. You need to chair public meetings, establish a good relationship with any 'partner' organisations, and generally set a warm, intelligent, constructive tone. This involves many of the same skills you use in chairing other CHC meetings [see Unit 2]

The CHC decides to start a consultation programme on the plans for the Minor Injuries Unit. Your last major consultation was disappointing, with very low attendance at the public meetings. You're determined to make it work better this time.

This is what you know about the district:

- West Hamerton: affluent rural area, now with high proportion of incomers. Many commute to nearest city. No public transport, few shops or other facilities
- Saltbridge: on outskirts of town. Mainly new owner-occupied estates, plus pre-war semis. Many young families. Recession has brought increase in unemployment and financial problems. Out of town shopping [super-stores, shopping centre] here.
- Bamford & Willsfield: remaining suburbs. Large council estates, very high unemployment. Some areas considered dangerous at night. Some have active community centres and tenants' associations.
- town centre: very run-down. Privately rented accommodation in poor condition. Many shops closed, as well as cinema and social clubs.
- generally high proportion of elderly people, many living alone.
- sizeable African-Caribbean community, mainly in Willsfield. Some Bangladeshi families; also Polish community, including many elderly.
- public transport generally very poor, especially from council estates and West Hamerton.
- local organisations you know of:
 - sports clubs [football, tennis] in Bamford & Saltbridge
 - schools in Willsfield, Saltbridge & town centre
 - churches in most areas. New mosque in centre.
 - Council of Voluntary Service
 - Citizens Advice Bureaux [centre & Bamford]
 - Community Relations Office
 - Age Concern

CONSIDER

how you might plan your consultation. You don't have to come up with a complete plan, just some ideas about how to approach it. Assume for the sake of the exercise that you don't have to worry about time or money.

1.

2.

3.

4.

5.

6.

ON THE
NEXT PAGE

are some principles for planning a consultation. Go over your list, and check whether your ideas meet these criteria.

1. Go where people are. Not many people are likely to come in to the Town Centre specially, if the transport's bad and they don't have other reasons to be there. Take your meetings out to where people live.
2. Try natural communities or interest groups as a focus, rather than just geographical areas. The CRO will know what minority ethnic organisations there are. Sports clubs might be another starting point: they may have a particular interest in minor injury services.
3. Work in partnership. Organisations that have their own 'constituency' may be able to reach different people. They'll also know where, and when, and how to hold meetings.
4. Don't stick to the traditional format. Many people wouldn't speak up in a large public meeting, but might in a smaller, more familiar group. Adapt to what your contacts tell you is acceptable. CHCs have set up stalls in supermarkets, or organised radio phone-ins, as alternative methods.

4. Involving people

The more contact you have with members of the public, the more informed and alive the CHC will be. Don't leave it till there's a major consultation to initiate contact.

In general, people are likely to feel positive about an organisation that makes use of their ideas and skills. If you can draw people in - as volunteers on particular projects, as 'experts' on some aspect of their own lives - you will learn from them, and they will have a better idea of the CHC and its uses.

Unit 5, **Working with other organisations**, looks at the skills of networking with organised groups in the community.