



# SCOTTISH EXECUTIVE

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Health Department  
**Trevor Jones**, Head of Department and  
Chief Executive, NHS Scotland

St Andrew's House  
Regent Road  
Edinburgh EH1 3DG

Telephone: 0131-244 2410

Fax: 0131-244 2162

[ps/hd@scotland.gsi.gov.uk](mailto:ps/hd@scotland.gsi.gov.uk)

<http://www.scotland.gov.uk>

1 March 2004

Dear Colleague

## **INFORMING, ENGAGING AND CONSULTING THE PUBLIC IN DEVELOPING HEALTH AND COMMUNITY CARE POLICIES AND SERVICES**

### **Purpose**

This letter seeks your views on draft guidance developed to provide the Health Department and NHS Scotland with materials to support the development of meaningful information provision, engagement and consultation with patients, carers, the public and other key stakeholders as a core element of all our work. The document also supports NHS Boards in meeting the proposed legal duty<sup>1</sup> to involve the public in the planning and development of local services.

### **Background**

There has been a considerable amount of work carried out to develop the agenda of informing, engaging and consulting the public on service developments within NHSScotland since the publication of *Our National Health*<sup>2</sup> in 2000. The White paper *Partnership for Care*<sup>3</sup> re-emphasised our commitment to this area. The Scottish Executive Health Department has also progressed this agenda in relation to policy development in partnership with members of the public and NHS colleagues.

Draft interim guidance was distributed to NHSScotland in May 2002 on the issue of *Consultation and Public Involvement in Service Change*. As highlighted in the document, this replaced the previous *Closure and Change of Use of Health Service Premises*, dated 3 June 1975 (the '1975 guidance'). This was distributed to NHSScotland for consultation and was

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<sup>1</sup> NHS Reform (Scotland) Bill is currently going through the Parliamentary process. It contains a duty of public involvement upon NHS Boards.

<sup>2</sup> Scottish Executive 2000

<sup>3</sup> Scottish Executive 2003

based on a pre-consultation exercise carried out by Scottish Health Feedback and the Scottish Consumer Council.

The Department last year held a Service Change workshop to identify key themes for inclusion in the final guidance. The workshop was attended by Chief Executives from NHS Boards that had identified challenges and opportunities in recent consultation exercises and was chaired by Scottish Health Feedback. The outcome of the event was an agreement on the main issues for inclusion in any public involvement guidance being distributed. The key message from this workshop was the need for NHS Boards to “inform, engage and consult” the public on issues of service development or change.

Simultaneously, a Health Department Working Group was developing guidance for the Department on public involvement in policy development as part of the Scottish Executive’s Changing To Deliver agenda. The group included representation from Health Department staff, members of the public, the Scottish Consumer Council, the Scottish Association of Health Councils and NHS colleagues. The guidance developed by the group set out clear steps to take to achieve meaningful public involvement within the wider policy context. Once completed, there was an agreement to merge both pieces of guidance. This is the first time that joint guidance has been developed for the Health Department and NHSScotland and presents opportunities for shared learning.

### **Action**

The final draft Health Department Letter and guidance are attached for comment. The draft guidance has been developed through an extensive process of consultation which has identified support for the general approach. We are therefore seeking final drafting comments on the guidance rather than views on the substance or use of the paper. Any comments or queries which you have on the draft guidance should be directed to Laura Ross, Scottish Executive Health Department, Health Planning & Quality Division, Ground East Rear, St. Andrew’s House, Edinburgh, EH1 3DG or [laura.ross@scotland.gsi.gov.uk](mailto:laura.ross@scotland.gsi.gov.uk) by no later than **Friday 30 April 2004**.

Yours sincerely,

TREVOR JONES

Addressees

NHS Chief Executives

Local Authority Chief Executives

NHS Designated Directors for Patient Focus and Public Involvement

Local Health Councils

Scottish Association of Health Councils

Commission for Racial Equality

Disability Rights Commission

Equal Opportunities Commission

Scottish Consumer Council

Health Department Public Involvement Working Group

Health Department Management Board

Health Department Heads of Division

Scottish Centre for Social Research

Scottish Health Council Steering Group

# Informing, Engaging and Consulting the Public in Developing Health and Community Care Policies and Services

Guidance for the Scottish Executive Health  
Department and NHSScotland



# Informing, Engaging and Consulting the Public in Developing Health and Community Care Policies and Services

## Guide sheet 1 : Getting Started

- Why are we involving the public in developing this policy or service?
- What do we expect to achieve by involving the public in its development?
- Which members of Scottish Executive staff or NHS staff and voluntary organisations can help / have knowledge?
- What is the current knowledge of public involvement on the issue?



## Guide sheet 2 : Planning

- Planning practical issues, e.g., developing a timetable, confirming budget
- Identifying specific individuals and/or groups who should be asked to take part; considering issues of age, gender, race/ethnicity, religion/faith, disability and sexual orientation
- Writing the evaluation process for public involvement and engagement
- Identifying appropriate budget



## Guide sheet 3 : Practical Methods of Informing and Engaging the Public

- Examples of methods of informing and engaging the public which could be used in policy or service development - consider the needs of the groups you are engaging



## Guide sheet 4 : Feedback

- Who should provide feedback? How will feedback be provided?
- Which stakeholders will you provide feedback to?
- What format will feedback to the public take?



## Guide sheet 5 : Evaluating Informing, Engaging & Consulting the Public

- Why evaluate?
- Who should evaluate?
- What should be evaluated?



# Informing, Engaging and Consulting the Public in Developing Health and Community Care Policies and Services

## Guide Sheet 1 : Getting Started

### ***Where do you start?***

Planning public involvement, including patient, service user and carer involvement in the development of health and community care policies and services should be seen as an integral part of the overall project plan.

The Scottish Executive Health Department (SEHD) and NHSScotland are committed to an inclusive process of communication and discussion, where the public “*have opportunities to influence decision making*” (*Patient Focus and Public Involvement*<sup>1</sup>). Similarly the *Fair For All*<sup>2</sup> approach requires the consideration of issues of equality for ethnic minorities and other potentially excluded groups and whether a proposed policy or service development, including service change will have specific impacts on any communities or equalities groups and the steps to be taken to ensure their involvement in the planned engagement process<sup>3</sup>. This approach to equality and diversity issues is essential at all stages of the planned process. A draft equality and diversity impact assessment tool will be distributed for consultation in Spring 2004.

The benefits of involving and engaging the public, including patients, service users and carers (referred to as patient and public stakeholders throughout the guidance) in developing health and community care policies and services are substantial in terms of presentation and ensuring that policies and services meet real needs. It will soon become a legal duty upon NHSScotland to ensure that public involvement is a feature of the planning, development and delivery of health services<sup>4</sup>.

Good practice in policy and service development should include—

- Informing the public of the reasons for developing a policy or service and providing the opportunity to be involved at an early stage in the planning process
- Engaging the public as well as professionals to provide knowledge and expertise in the policy or service area
- Involving the public in a consultation process on the draft policy
- Providing the public with feedback on the outcomes of the consultation exercise and the decisions made
- Evaluating the policy or service development process and the approach to public involvement

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<sup>1</sup> Scottish Executive, 2001

<sup>2</sup> Scottish Executive, 2001

<sup>3</sup> Further advice and guidance on these issues can be accessed from the National Resource Centre for Ethnic Minority Health, the Commission for Racial Equality, the Disability Rights Commission, the Equal Opportunities Commission and a wide range of voluntary and community sector organisations who have considerable experience of engaging with people from excluded groups.

<sup>4</sup> NHS Reform (Scotland) Bill is currently going through the Parliamentary process. It contains a duty of public involvement upon NHS Boards.

- Complying with the requirements of the organisation's Race Equality Scheme and Fair for All and ensuring that the policy or service change takes equality and diversity and equality issues into consideration.

### ***What is public involvement?***

Public involvement can be defined as informing, engaging or consulting with the public on health and community care policy or service developments, including service change which staff are planning to or are currently carrying out. These principles should also be extended to involving and engaging colleagues on whose work these developments will have an impact, for example, in Local Authorities, Health, Education or Housing agencies or in the voluntary sector.

### ***Who are the public in terms of policy or service development?***

In relation to the development of specific policies or services, the 'public' can be defined as any patients, service users, carers or representatives, members of the public, geographical communities, voluntary or charitable organisations and statutory organisations (for example, local authority citizen's panels) which may be affected by the policy or service development being proposed.

Depending on the issue/s concerned, you may wish to involve:

- people living in a particular area or community
- patients or users of a particular service and their representatives or carers
- particular sections of the population, such as people from ethnic minority communities, people with a disability and young people
- the public at large, for example, people affected by a policy or service change that applies across Scotland.

### ***Why do members of the public take part in policy or service development?***

There are a number of reasons why people may want to take part in a development:

- to influence the development of policy or service to provide better care and treatment in a particular area;
- to learn about the way in which Scottish Executive or NHS policies and services are developed;
- to offer personal knowledge and experience to the development process.

When producing materials to encourage members of the public to take part in such developments, it is worth highlighting the benefits to people in taking part in the activity.

## ***What are your responsibilities?***

When responsible for any policy or service development or decision affecting the operation of the service, including service change you need to be aware of your role and responsibilities in relation to involving patients, service users and carers and the public. One of the main responsibilities which you have when starting to develop the policy or service is to inform patients, service users and carers, members of the public and staff of the proposal and the timeframe for planning, developing options and reaching decisions.

### **Consider carrying out the following activities when starting to plan a policy or service development –**



Consider what type of public involvement is required – the public at large, or specific service users and carers? Draw up a list of patient groups, carers groups, communities, voluntary and charitable organisations which may be affected by the proposed development and ask colleagues to help with this. Also consider the colleagues you need to involve.



Carry out an internet search using the theme for the development as key words for the searches. This can help identify similar work elsewhere in Scotland and which groups should be invited to contribute.



Have any other divisions/branches or departments of your organisation carried out public involvement activities in this area previously? Which groups did they work with? Have any NHS Boards or local authorities carried out any work in this topic recently? Did they work with members of the public? If so, who? Would these individuals/groups be willing to work with you in the development of your policy or service?



Consider how the policy or service needs to address those with specific needs and also how this might be supported.

# Informing, Engaging and Consulting the Public in Developing Health and Community Care Policies and Services

## Guide Sheet 2: Planning

### ***Why plan the process of informing, engaging and consulting the public on policy and service development?***

Informing, engaging and consulting patient and public stakeholders effectively in policy and service development should inform choices about the best ways to achieve desired outcomes. Take time to think through who should be involved and be clear about how you will involve them. Also give consideration to colleagues within your own organisation as well as other stakeholders and partner organisations.

As with any planning approach, this will involve several key stages which will help you to achieve a realistic and public 'evidenced' outcome. Planning a realistic timetable and budget for public involvement activities is essential.

### ***So what does planning of informing, engaging and consulting the public entail?***

The planning of these activities entails the following:

1. Setting a clear aim and objectives– identify outcomes you intend to achieve.
2. Considering who you are informing, engaging and consulting and why you are doing so. Also how you will address their specific needs, if any, to ensure the information, engagement and consultation process is accessible and that they can fully contribute.
3. Planning a realistic timetable for the activity
4. Setting objectives which are Specific, Measurable, Achievable, Realistic and Timely (SMART) and include a budget and timeframe
5. Agreeing activities that will best support the objectives which you have set
6. Developing the communication and evaluation plans for the activity (see Guide sheets 4 and 5)

The planned engagement process – the length of time, the budget required and the methods to be used – should be proportionate to the scale of the proposed development. It is important to recognise that insufficient planning of public involvement and compressed or changing timescales will limit the ability of the public to take part in the process. This will reduce the effectiveness of the decision-making process and will make it more difficult for you to demonstrate the validity of the final decision. It may also be a breach of the forthcoming legal duty upon NHSScotland to involve the public.

## ***What else needs to be considered when planning to inform, engage and consult the public?***

There are a number of practical issues that need to be considered when planning public involvement and engagement activities. This includes giving consideration to the issues of age, gender, race/ethnicity, religion/ faith, disability and sexual orientation when identifying people to become involved. Planning patient, carer and public involvement in policy or service development, including service change should take place prior to carrying out consultation activities on proposed policy development. Consultation generally involves seeking views on specific proposals through a formal consultation document or process and is the end stage of the public involvement process.

## ***What are the budget implications?***

Informing, engaging and consulting the public will often involve additional costs. By working through established groups and networks where possible, these can be kept to a minimum. Budget planning for these activities is a key component of the planning process.

Practical budget issues are as follows –

- will an external organisation be asked to take forward the public involvement activity? If so, approximately how much will this cost?
- will you pay public representatives travel and subsistence fees to attend events/meetings?
- will other expenses incurred by public representative be refunded, for example, carer costs?
- If involving, for example, a group from an ethnic minority community or people with specific communication needs, you may need to provide translators or signers. Take the time to think about who it is you are involving and what their needs will be and if you are unsure ask.

## ***How will you involve the public in policy or service development?***

There are a number of ways in which you can identify members of the public to take part – the key message is don't reinvent the wheel! A starting point for sourcing public representatives is colleagues in your organisation and patient and carer groups and voluntary organisations that have an interest in the topic being developed. Give special consideration to how you will involve groups who face discrimination and how you will address their specific needs, if any. (See Guide Sheet 3).

# Informing, Engaging and Consulting the Public in Developing Health and Community Care Policies and Services

## Guide Sheet 3: Methods of Informing, Engaging & Consulting

### ***Which methods of informing, engaging and consulting the public should be considered when developing a policy or service?***

When looking at approaches to inform, engage and consult the public in policy and service development including service change, the approach used should be carefully considered and well planned. This will ensure that the right people are involved. Always ask **why** you are using the approach before you start.

### ***So which method should you choose?***

There are many examples of groups being consulted time and time again as well as examples of public participation approaches, which exclude large sections of the public. This underpins the importance of being clear about:

- WHY people are being involved; and
- WHAT is going to happen to the information gathered; before
- Deciding on the HOW – a particular method.

It is also important to use a range of activities so that people have every chance to take part. If the policy or service development is to be progressed over a length of time, why not consider using a range of approaches and activities at different stages?

It is also important to gain the views of as wide a range of stakeholders as possible - especially if a particular group is subject to discrimination based on their age, gender, religious faith/beliefs, sexual orientation, disability or race/ethnicity. These views can be particularly important to developing a truly inclusive policy or service.

Each approach has strengths and weaknesses, depending on where it is being used. To find the 'best' approach you could ask those involved in the development of the policy or service to help you to identify six or seven criteria for the approach, for example -

*"The approach should .....*

1. *hear the views of people who would not attend public meetings*
2. *have people take part in a working group or committee*
3. *hear people who are hard to reach*
4. *identify issues which need to be considered in the development process*
5. *be easily recorded, analysed and fed back to the participants*
6. *support ongoing dialogue with people who have not taken part in this type of work before".*

## Once you have agreed on criteria, what next?

Once the criteria for informing, engaging and consulting the public has been established, you should check the robustness of the approaches to see which meets the criteria and your needs best. Remember the methods or approaches chosen need to avoid discrimination.

### How To Choose The Approach

Please treat the following table with caution – it is only a guide and serves only to give you some idea of the range of informing, engaging and consultation approaches which you could use in policy or service development. Information on each approach is provided in detail in the *Building Strong Foundations Toolkit, published in May 2002*.

*Key to the approach section of the table below*

1. Useful approach for service users and carers
2. Useful approach for the wider population / public
3. Useful approach for targeting excluded groups
4. Useful if asking community groups to raise issues

**Please note that none of the approaches, listed as examples below, should be used in isolation; a mix of approaches will provide the best policy and service outcomes.**

Approach (in alphabetical order)	1	2	3	4
1. Action planning	✓	✓		
2. Advocacy	✓	✓	✓	✓
3. Art work, photography and creative initiatives	✓		✓	✓
4. Choices	✓	✓		✓
5. Community indicators		✓		
6. Citizen's juries and civic commissions		✓		
7. Citizen's panels, district circles and users' panels	✓	✓		
8. Community profiling /appraisal		✓		
9. Deliberative opinion polls and referenda		✓		
10. E-Consultation	perhaps	✓		✓
11. Focus groups	✓		✓	
12. Future search		✓		✓
13. In-depth interviews	✓		✓	
14. Person-centred planning	✓		✓	✓

Consider the approaches to informing, engaging and consulting patient and public stakeholders as early as possible in order to ensure that involvement throughout the process is and is seen to be effective and appropriate.

Information on the chosen approach should be made available, through a wide variety of methods, to the media and patient and public stakeholders as well as to members of the public in general. NHS staff who may be affected by the proposed change should also be informed. Talk to local authorities, including elected members, members of the public and voluntary organisations in any geographical area affected by the proposed policy or service development and inform, engage and consult them on the development of the proposal from the outset.

This will provide the public with time to consider the impact of the proposed policy or service on their lives and the lives of those they care for. It also provides the opportunity for members of the public who may be interested in working in partnership with the NHS or SEHD to put themselves forward for planning future policy or service developments.

Informing and engaging the public in the process of planning policy and service developments has been shown to lead to greater acceptance of proposals when they are put out for wider consultation. NHS staff affected by the proposed policy or service development should also be invited to be involved to ensure a robust, defensible and well-informed process. Give thought to flexible and imaginative processes for involving patients, carers and the public in planning policy or service developments rather than simply setting up groups with public representation.

# Informing, Engaging and Consulting the Public in Developing Health and Community Care Policies and Services

## **Guide Sheet 4 : Communication and Feedback**

### ***Why is communication and feedback important?***

Communication and feedback are vital for a successful informing, engaging and consulting process as they allow the public to know explicitly what they can expect. Without these two elements your work may not be relevant or appropriate for the people which it aims to support. This can lead to the public being less interested in taking part in policy or service developments in the future as they feel that their views are not being listened to. Providing people with feedback which shows that the views expressed have been considered.

Consider the needs of the group/s you have engaged with for this; how do they want to be communicated with and how will you feedback to them?

### ***What do we mean by communication and feedback in terms of policy and service development?***

Communication, in the context of informing, engaging and consulting the public is providing the public with information on planned health and community care developments.

Feedback is a return of information on how the views which people provide have, or have not, been incorporated into the final decision and reasons for this.

### ***How should you communicate the plan for policy or service development to the public?***

There is no one answer to this question. Every policy or service development will be different as will every person and group which you wish to communicate with. Your communication with the public should be open, honest and transparent. Information included within communication to the public at the start of the process should be clear about your aim and objectives and the options available. Your communications should also draw attention to time, budget or other restrictions which have been placed on you. This will allow the public to gauge their ability to take part as well as showing the reality of the task ahead. Include information on how you intend to communicate with those who have specific needs, for example, people who are deaf.

Please remember that communicating with members of the public, patients, service users and carers can be a very different experience from communicating with your colleagues. The ways in which you communicate may be different: less use of email, more face-to-face contact or letters or telephone conversations. **Please avoid using acronyms and jargon.** As far as possible, use Plain English techniques and explain terms in full.

## ***Why should you provide feedback?***

Feedback is important to let people know that their contribution has been valued. Training courses, seminars and conferences usually ask people for their feedback on how the event went. This is equally valid for the policy or service development process. Remember, whilst you may have the right to ask for people's feedback on how they felt the process felt for them, you also have a responsibility to feedback to them that their contribution has been heard, listened to and valued whether it becomes part of policy or service or not. This two-way feedback process should identify areas where changes may be made as a result. Here you need to think about what you will feedback and what are the ways in which you will do this.

## ***How should you provide feedback?***

**Consider carrying out the following activities when communicating and providing feedback to people -**



Plan how you will make contact with people. Will you do this by undertaking a campaign to generate interest or by targeting specific groups? Develop this from the start of the policy or service development. see Guide 1 - Getting Started.



Contact NHS Boards, Local Authorities, Voluntary Organisations and other public bodies such as the Care Commission to ask if they can offer any advice or guidance on contacting groups in their area - perhaps they already know of some.



Ask those taking part in the policy or service development how they would like to be communicated with and also how they feel they should be able to communicate with you – for the purposes of developing this work.



Ask for ongoing feedback from members of the public engaged in your work on their experience.



Ask for suggestions on how feedback should be provided. Should this be by post, telephone, email or other way? This can help to keep people informed and engaged with the process and shows that you value their contribution.



Provide feedback to individuals and groups who have been involved in the consultation period, giving an honest explanation of the reasons why the suggestions made by the individual or group were or were not included in the decision on the policy or service development. It is important to demonstrate that you have considered and are able to answer all significant questions raised during the consultation.



Communicate your decision to members of the public, patients, service users and carers consulted using a variety of communicating methods. The extent of the communication exercise should be proportionate to the scale of the development and should meet the specific needs of different groups.

# **Informing, Engaging and Consulting the Public in Developing Health and Community Care Policies and Services**

## **Guide Sheet 5 : Evaluating Informing, Engaging & Consulting The Public**

### ***Why evaluate informing, engaging and consulting the public in policy or service development?***

For our purposes, we should think of evaluation as an appraisal of how the informing, engaging and consulting activities undertaken worked. We evaluate the performance of staff, teams and projects, why not evaluate how we inform, engage and consult with the public in the development of our policies and services? There are a number of reasons why you should consider evaluating the informing, engaging and consulting activities you undertake:

- to find out what worked well for people and what did not
- to identify how the specific needs of groups were met
- to see how people who face discrimination were informed and engaged and encouraged to participate
- to identify any gaps or weaknesses in the process of informing, engaging and consulting the public
- to provide feedback to those who took part
- to support planning for any future activities

Remember that an evaluation process is not there to criticise you. It is there to support you and the work you are doing to highlight areas, which may need strengthened or developed. Evaluation need not be a lengthy or time-consuming process. It is also there to help you feedback to the public on how their involvement and engagement has influenced and supported you to develop this policy. Please see guide sheet 4 - Communication and Feedback

### ***What aspects should you consider?***

The evaluation process should form part of the initial policy development plan – this will allow for maximum effectiveness and minimum pain in the policy or service development process. Before any evaluation is undertaken consider the following:

- What do you want to evaluate and why?
- How will you evaluate it?
- Who do you want to be involved in the evaluation?
- What will you do with the evaluation once completed?
- How will the evaluation influence the work you are doing?

## ***What form should the evaluation take?***

There are a number of methods which you can support you to evaluate the way in which the public has been informed, engaged and consulted. The method you use will depend on who you involved as well as the time and resources you have available for evaluation. It will also depend on the questions you ask within the evaluation and the responses which can be given.

There are indicators that can provide an insight of the way people feel about the overall process:

- Were people comfortable with the way they were informed, engaged and consulted?
- How did they feel their contribution affected the development of the policy or service?
- Were they happy with the feedback received? If not, why not?

Evaluations do not have to take one form. They can be a combination of various methods which let people contribute in different ways.

*Please bear in mind that this should concentrate on the process of informing, engaging and consulting people and not evaluating the policy or service development that they were looking at.*

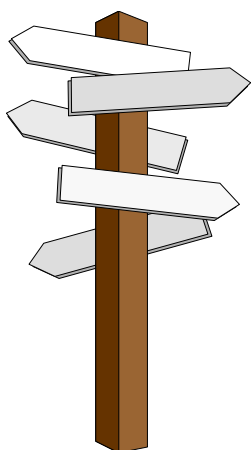
## ***Who should be included in the evaluation?***

In order to be open, honest and fair with people, you should evaluate the process for anyone who took part in the development of the policy or service and not just the public. Ideally, you should ask someone who has an understanding of the policy or service development but is independent and has no vested interest in it to carry out the evaluation. This will provide external scrutiny of the process. This could be a member of the public, an independent organisation or individual or someone from elsewhere in your organisation. However, evaluating the process yourself can be a good learning exercise. When planning to carry out such an evaluation yourself, ask colleagues to provide an unbiased view of what the evaluation process should look like.

# Involving and Engaging the Public in Developing Health and Community Care Policies and Services

## Guidance for the Scottish Executive Health Department and NHS Scotland

### Signposting to resources which may help



This sheet gives you some helpful pointers of where you can find further information to support you when involving and engaging the public when developing policy. The information ranges from web links to hard copies of resources that are available. You may find it useful to use more than one of these resources.

This list is not exhaustive but will provide information on broad themes, which you can tailor to suit your own needs.

#### **Commission for Racial Equality**

Their website can be found at [www.cre.gov.uk](http://www.cre.gov.uk)

CRE Scotland  
The Tun  
12 Jackson's Entry  
off Holyrood Road  
Edinburgh EH8 8PJ

Telephone: 0131 524 2000

#### **Involve (formerly Consumers in NHS Research)**

Their website can be found at [www.invo.org.uk](http://www.invo.org.uk)

Involve (formerly Consumers in NHS Research)  
Wessex House  
Upper Market Street  
Eastleigh  
Hampshire SO50 9FD

Telephone: 023 8065 1088

**Disability Rights Commission**

You can find their website at [www.drc-gb.org](http://www.drc-gb.org)

DRC  
Riverside House  
502 Gorgie Road  
Edinburgh EH11 3AF

Telephone: 08457 622 633 (DRC Helpline)

**Equal Opportunities Commission**

Their website is available at [www.eoc.org.uk](http://www.eoc.org.uk)

EOC  
St Stephens House  
279 Bath Street  
Glasgow G2 4JL

Telephone: 0141 245 1831

**Healthcare Chaplaincy Training and Development Unit for Scotland**

This unit deals with issues on healthcare chaplaincy and spiritual care. You can find out more by visiting [www.chaplains.co.uk](http://www.chaplains.co.uk)

Rev Chris Levison  
Healthcare Chaplaincy Training & Development Officer for Scotland  
Queens Park House  
Victoria Infirmary  
Langside Road  
Glasgow G42 9TT

Telephone: 0141 201 5392

**Lesbian, Gay, Bisexual and Transgender Health Scotland**

This website is currently under construction [www.lgbthealthscotland.org.uk](http://www.lgbthealthscotland.org.uk)

INCLUSION Project  
Working for Lesbian, Gay, Bisexual and Transgender Health  
11 Dixon Street  
Glasgow G1 4AL

Telephone: 0141 204 0746

**Men's Health Forum Scotland**

The Men's Health Forum Scotland is looking at how services can be developed and made accessible for men in Scotland. Their website forms part of the UK's Men's Health Forum website which can be found at [www.menshealthforum.org.uk](http://www.menshealthforum.org.uk)

MHFS

Dalian House  
350 St Vincent Street  
Glasgow G3 8YY

**National Resource Centre for Ethnic Minority Health**

You can find their website listed as one of the Special Projects on the Public Health Institute for Scotland's website [www.phis.org.uk](http://www.phis.org.uk)

Maureen Dunn  
Clifton House  
Clifton Place  
Glasgow G3 7LS

Telephone: 0141 300 1043

**Plain English Campaign**

The campaign's website can be found at [www.plainenglish.co.uk](http://www.plainenglish.co.uk)

Plain English Campaign  
PO Box 3  
New Mills  
High Peak SK22 4QP

Telephone: 01663 744 409

**Royal National Institute for the Blind**

You can find their website at [www.rnib.org.uk](http://www.rnib.org.uk). They are also running a *See It Right* campaign that may be of particular interest.

RNIB Scotland  
Dunedin House  
25 Ravelston Terrace  
Edinburgh EH4 3TP

Telephone: 0131 311 8500

**Royal National Institute for the Deaf**

The Royal National Institute for the Deafs' website can be found at [www.rnid.org.uk](http://www.rnid.org.uk)

RNID Scotland  
Floor 3  
Crowngate Business Centre  
Brook Street  
Glasgow G40 3AP

Telephone: 0141 554 0053 / Textphone: 0141 550 5750

**Scottish Consumer Council**

Their website can be found the Internet at [www.scotconsumer.org.uk](http://www.scotconsumer.org.uk)

Scottish Consumer Council  
Royal Exchange House  
100 Queen Street  
Glasgow G1 3DN

Telephone: 0141 226 5261

**Scottish Health On the Web (SHOW)**

You can view their website at [www.show.scot.nhs.uk](http://www.show.scot.nhs.uk)

**Scottish Human Services Trust**

You can find their website at [www.shstrust.org.uk](http://www.shstrust.org.uk)

SHS Trust  
1a Washington Court  
Washington Lane  
Edinburgh EH11 2HA

Telephone: 0131 538 7717

**Volunteer Development Scotland**

Their website is available at [www.vds.org.uk](http://www.vds.org.uk)

Volunteer Development Scotland  
Stirling Enterprise Park  
Stirling FK7 7RP

Telephone: 01786 479 593

**Voluntary Health Scotland**

You can visit their website at [www.vhscotland.org.uk](http://www.vhscotland.org.uk)

Voluntary Health Scotland  
11 Waterloo Place  
Edinburgh EH1 3BG

Telephone: 0131 557 6845

## **SEHD Staff should also consult:**

### **Scottish Executive Good Practice Guidance on Consultation**

Further information <http://intranet/content/corporate/guidance/se/gpg/gpg-00.asp>

### **Scottish Executive Policy Gateway**

Further information <http://intranet/content/corporate/guidance/policygateway/>

### **Building Strong Foundations Toolkit**

This toolkit is provided in three individual, yet complimentary, parts. The first looks at the background to why we should involve people and how to prepare for it; the second looks at 36 approaches to involving people; whilst the third is a literature review. Copies of the toolkit are available from the Involving People Team, Health Planning & Quality Division by calling 0131 244 3028 or on the Patient Focus and Public Involvement website which can be found at [www.involvingpeople.org.uk](http://www.involvingpeople.org.uk)

### **Equality Strategy: Working together for equality**

This document was produced in 2000 and embodies the vision of a just and inclusive Scotland where everyone has the opportunity to fulfil their potential. Copies of the Equality Strategy and summary are available from the Equality Unit of the Scottish Executive.

### **Fair For All**

Published in December 2001, Fair For All highlighted the need for the NHS in Scotland to address the particular needs of those from ethnic minority communities. Visit [www.scotland.gov.uk/library3/society/ffar-00.asp](http://www.scotland.gov.uk/library3/society/ffar-00.asp) to download this document.

### **Good Practice Guidance - consultation with equalities groups**

The Scottish Executive published this document in 2002. It looks at preparing a consultation and how a consultation should be carried out; from providing enough time to respond to reviewing the process. This document is available from the Equality Unit of the Scottish Executive - 0131 244 0123

### **Partnership for Care: Scotland's Health White Paper**

Published in March 2003 this builds on *Our National Health: a plan for action a plan for change*<sup>1</sup>. It develops certain key issues from its predecessor and, in particular, sees patients and national standards as key drivers of change in the health service and frontline staff as leaders of the change process.

### **Patient Focus and Public Involvement**

Published in December 2001, Patient Focus and Public Involvement highlighted the need for the NHS in Scotland to begin to change its culture to become more patient focused and begin to involve people in the change to deliver a better health care service. Visit [www.scotland.gov.uk/library3/health/pfpi-00.asp](http://www.scotland.gov.uk/library3/health/pfpi-00.asp) to download this document.

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<sup>1</sup> Scottish Executive, 2001