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To: [Brown, John](#); [Brown, John A](#); [zzzzCabinet Secretary for Health and Wellbeing](#); [Connaghan J \(John\)](#); [Crichton, Ian](#); [Curran AD \(Dan\)](#); [Davison, Tim](#); [DG Health & Social Care](#); [Freeman, Jeane](#); [Gregor, Anna](#); [Hammond, Charles](#); [Leitch J \(Jason\)](#); [Macdonald, Sheena](#); [Macpherson MC \(Mairi\)](#); [zzzMinister for Public Health 2](#); [Morris A \(Andrew\)](#); [Newlands, Jamie](#); [Riddell, Sandy](#); [Wallace, Angela](#); [Watson, Sandy](#); [Watters, Elaine](#); [Welsh, Ian](#)
Cc: [Leslie D \(David\)](#)
Subject: 2020 Vision Advisory Board
Date: 17 June 2014 11:08:28
Attachments: [2020 Vision Advisory Board Meeting Summary 190514 \(3\).doc](#)

Colleagues,

Many thanks for those of you who attended and contributed at the recent meeting of the 2020 Vision Advisory Board. A number of important issues were discussed, as highlighted in the attached summary note. I took away two key areas for priority action and suggest that we revisit these at our next meeting.

Firstly, the 2020 Vision Advisory Board emphasised that successful initiatives need to be spread throughout NHSScotland and this process of mainstreaming needs to happen quickly. You may be aware that the NHSScotland QI Hub has established a Spread and Sustainability Steering Group in order to provide strategic focus and leadership to its spread and sustainability workstream. This workstream is focused on understanding the practical challenges currently being faced by NHS Boards when attempting to spread improvements and then testing approaches to support staff to overcome these challenges.

Secondly you highlighted the communications challenge around the need for patients to be active participants in their care, and encouraged to expect high-quality person-centred care. There is already action underway to address this challenge. The Cabinet Secretary announced at the NHSScotland event on 4 June that he has asked Healthcare Improvement Scotland (HIS) and the Scottish Health Council (SHC), in consultation with other stakeholders in the public and voluntary sectors, to develop proposals by the end of the year for a new system of listening to, and promoting, the voice of patients, families and carers. The Patient Opinion website, which was rolled out across NHSScotland in March 2013, provides an independent, citizen-led route through which people can engage in open dialogue with the providers of healthcare services. In May 2014, for the first time since roll out, there were stories posted by patients, families and carers about every territorial and patient-facing NHS Board. Also, the Scottish Government's Quality Communications Group is currently looking at communications and engagement activity in relation to each of the 12 Priority Areas with a particular focus on understanding audiences and the alignment of messaging.

However, on both the issue of spread and sustainability, and encouraging patients and families to be active participants in their care, we recognise there is a considerable distance to travel. I am suggesting that we present an update on progress on both challenges at the group's next meeting in October. In the meantime I would welcome any comments, on either the minutes, or the identified

areas for further discussion, by 27/06/14.

Paul Gray