

# Chair's Report

Report to: Board

**Date:** 19 June 2019

**Report by:** Paul Edie, Chair

**Report No:** B-15-2018

Agenda Item: 7

#### PURPOSE OF REPORT

This report provides an update on key developments since the update provided to the Board on 28 March 2019.

#### RECOMMENDATIONS

That the Board:

1. Notes the information contained in this report.

Version: 1.0	Status: Final	Date: 12/06/2019	
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## **Consultation Log**

Version	Consultation		Manager	Bri	ef Des	cription of Ch	nanges	Date
	Senior Manag	ement						
	Legal Services	S						
	Corporate and Customer Ser Directorate							
	Committee Consultation (where approp	oriate)						
	Partnership Fo Consultation (where approp							
Equality	Impost Accord	mont						
Equality	Impact Assess	sment						
Confirm that Involvement and Equalities Team have been informed				YES		NO	X	
EIA Carried Out				YES		NO	x	
appendix	ease attach the and briefly outl mplications of t	ine the equ		d				
If no, you are confirming that this report has been		-	Name:	Paul Edie				
classified as an operational report and not a new policy or change to an existing policy (guidance, practice or procedure)			Positio	n: Chair				
Authorised by Director Name:				Date: 1	0 June 2019			

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#### 1.0 INTRODUCTION

This report outlines some of my activities since our last Board meeting on 28 March 2019.

#### 2.0 4TH INTERNATIONAL REGULATORS' MEETING – BMJ/IHI INTERNATIONAL FORUM IN GLASGOW - 27 MARCH 2019.

I was delighted to attend the event held at the SECC which formed a satellite meeting to the main IBI/BMJ Forum, which was Chaired by Professor Ian Leistikow who is based in the Netherlands.

The Care Inspectorate was ably represented and were showcasing much of the work we do in scrutiny and improvement as well as speaking about the new National Care Standards.

#### 3.0 HEALTHCARE IMPROVEMENT SCOTLAND (HIS) DEVELOPMENT SESSION - 15 MAY 2019

The HIS Development session featured a detailed presentation from the Scottish Human Rights Commission on tackling inequalities by taking a human rights-based approach.

The Care Inspectorate were liberally referenced as an exemplar of this approach through the development of the new National Care Standards though at the meeting, I felt compelled to point out that these were developed in partnership with HIS and involving many stakeholders.

#### 4.0 SCOTTISH CARE HOMECARE CONFERENCE GLASGOW - 17 MAY 2019

The conference was opened by the Cabinet Secretary for Health and Wellbeing, Jean Freeman who talked about the importance of care at home to the wellbeing of older people. The event was closed by Peter MacLeod our Chief Executive who spoke of his vision for care going forward over the next few years and about how we can better use data from the scrutiny of our services to inform scrutiny of strategic inspections.

#### 5.0 NHS CHAIRS MEETING WITH THE CABINET SECRETARY - 20 MAY 2019

This was the regular bi-monthly meeting with Ministers to discuss issues that surround the NHS and of course the progress of Health and Social Care Integration.

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#### 6.0 INDUCTION SESSION FOR NEW BOARD MEMBERS 23 MAY 2019

I was delighted to take part in this session with our two new Board members. Ensuring each member of the Board is properly inducted and given as much support and training as possible is something I feel very strongly about.

#### 7.0 STRATEGIC SCRUTINY GROUP 28 MAY 2019

The Strategic Scrutiny Group brings together various stakeholders who carry out scrutiny of our public services.

Among the issues touched on were the Terms of Reference of the Group, the draft work program of the Community Planning Improvement Board and the Community Empowerment Bill.

#### 8.0 QUALITY CONVERSATIONS on 31 MAY 2019 IN STIRLING AND 4 JUNE 2019 IN EDINBURGH

These are discussions that we hold with various groups from the various care sectors where we sound out opinions on issues at an early stage.

These have proved very successful over the last five years or so but we took the decision to review the meetings and concluded: that the scope of participants needed to be widened to include representatives from local government; and that rather than have separate conversations for different services classifications it would be better to hold more general gatherings.

These have proved again to be very successful with excellent contributions from all sides.

What really struck me was how much the various services had in common, not just their strong caring ethos but also the issues they were facing regarding staffing and funding.

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