

**Academic Health Science Centre Programme  
STAKEHOLDER GROUP**

13 March 2007

Old Smoking Room, St Mary's Hospital

**Present:**

**Chair:** Julian Nettel (JN), Chief Executive, SMH  
Joanne Anderson (JA), St Mary's PPIF  
Christopher Buckmaster, (CB) Chair, Kensington and Chelsea Health OSC  
Paul Herbage (PH), Director, The Charitable Fund for Charing Cross, Hammersmith  
& Queen Charlotte's & Chelsea Hospitals  
Chander Hingorani (CH), St Mary's PPIF  
Brigitta Lock (BL), Chair, Westminster PCT PPIF  
Jane Miles (JM), Chief Executive, St Mary's Paddington Charitable Trust  
Maria Murray, Communications Manager, SMH  
Don Neame (DN), Programme Communications Lead  
Amjad Taha (AT), Manager, Black and Minority Ethnic Health Forum  
Barrie Taylor, Chair, Health & Social Care Scrutiny Task Force, Westminster OSC  
Emily Wilkinson, Hammersmith Hospitals PPIF

**1. Apologies:**

Simon Crawford, Chief Executive, West London Mental Health Trust  
Nick Samuels, Director of Communications, HHNT  
Stephen Smith, Principal, Faculty of Medicine, Imperial College  
Peter Tobias, Chair, Health & Adult Social Care Committee, H & F OSC  
Representative from Hammersmith and Fulham PCT

**2. Notes of meeting 27<sup>th</sup> Feb 2007**

All actions complete. DN requested that if anyone knew of a GP that could join the group they should contact him.

**3. Matters arising**

JN reported that at the earlier Joint Executive Directors meeting there was a good discussion on issues that need to be addressed including how to ensure coordinated capital investment and appointment of senior staff. However it was also clear that we don't have all the answers and issues such as finance and services will need to be worked upon.

**4. Consultation document**

Members made a number of specific comments e.g. that the end of consultation date needed to be changed from July to June. Overall the group felt that it needed more concrete examples of how change has happened or could happen and more of a local feel – how will it shorten waiting times, make hospitals cleaner, make a difference to people's lives, tackle deprivation etc. Generally, it was felt the document needed a more succinct style - with points made in bullet form wherever possible. The group also wanted the final document to use photos from the hospital archives, not library shots. **ACTION: DN to amend and recirculate.**

**5. PCT Strategic Framework**

Members noted the PCT Strategic Framework and felt it was fairly reflected in the consultation document but some points could be strengthened, in particular relating to public health issues.

## **6. Consultation consultants**

DN reported two companies were shortlisted and interviewed. Verve Communications had been appointed. CH felt they were the best value, with the experience and willingness to do the job well.

## **7. Timeline**

DN distributed copies of the consultation timeline with a list of the communications collateral that needs to be produced over the coming weeks.

## **8. Date of next meeting**

Arranged for 27<sup>th</sup> March at 2pm, St Mary's – but since decided to postpone.