ISD Protocol for

Parliamentary Questions
Version Control

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<th>Version</th>
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Document history

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<td>JJ</td>
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1. **Purpose**

This document gives an overview of the Parliamentary Question (PQ) process, guidance on drafting answers to PQs and details the standard operating procedures for dealing with PQs from the Scottish Government.

2. **Background**

A PQ is a question that is asked by a Member of the Scottish Parliament (MSP). PQs can either be oral or written; oral PQs are asked by MSPs in Parliament during First Minister’s Questions, whereas written PQs are asked and answered via written correspondence. It is the choice of the MSP as to which type of PQ they submit.

The process for handling each type of PQ is the same however the timescales for answering each is different – 5 days for an oral PQ and 10 days for a written PQ (this can be longer during recess). Note that the time available for ISD staff to provide an answer is considerably less.

Both types of PQs are submitted to the Chambers Office by the MSP. Oral PQs are submitted on a Wednesday, one week before they are to be asked in Parliament. Written PQs are submitted daily. Each morning the Chambers Office informs the Parliamentary Clerk of all PQs asked the previous day. The Parliamentary Clerk then assigns each PQ to the relevant department within the Scottish Government. The secretariat within each SG Department (eg. Health Department, Justice Department) receives all relevant PQs and then allocates each to an official. The official is responsible for producing a draft answer. Once complete the draft answer will be passed to Departmental Secretariat prior to being passed to the Minister. For written PQs the Minister will then pass the final answer to the Parliamentary Clerk who will email the answer to the MSP who asked the question. For oral PQs the Minister will provide the answer when asked the question in Parliament.

Answers to all written PQs are published on the Scottish Parliament’s website:

http://www.scottish.parliament.uk/business/pqa/index.htm

3. **Answering a PQ**

It is ultimately the SG’s responsibility how to answer a PQ from an MSP. ISD’s role in the PQ process is to provide, where possible, information to support the answer and advise the SG on the content of the answer based on our knowledge and interpretation of ISD data.

Understanding the question is key to providing the best answer and most appropriate data and information. It is important to recognise that there can be ambiguity and lack of clarity within Parliamentary Questions and therefore checking your understanding is paramount.
ISD’s response to the SG comprises of a “Draft Answer”, incorporating “Background Notes”, and should be written following the template provided in Annex 6. Drafting a response that requires a statistical answer is not always straightforward. There are generally three types of PQs that require a response from ISD. Detailed below are general principles which should be followed when answering a PQ.

3.1 Types of PQs

3.1.1 Specific questions which can be answered directly using ISD data

An example of this type of question would be ‘the number of patients waiting over 12 weeks as at a specific time period’. For this type of question the response will be straightforward, a simple table of numbers will often suffice. However there may still be issues that are important to interpretation and hence will require explanation. Provide enough information in the Draft Answer to cover issues such as data quality (including completeness). This should help the MSP and others understand and interpret the figures better and draw any conclusions from them.

If the data is available on a website a standard reply should be used. For example, “The information is published on ISD’s website under (insert section of website and link).” Where relevant, background notes should be provided.

While it is important to be brief in a Draft Answer and keep length to a minimum, the over-riding concern should be to ensure enough information is supplied, both in form of data and text, to allow the MSP and others to interpret the figures correctly and understand their limitations.

3.1.2 Question needing interpretation

While the question may seem straightforward, it does not specifically map to a single ISD data source or if it does, requires interpretation of how to answer it, often requiring assumptions and statistical calculation or estimation. e.g. How many people in hospital have communication difficulties, how many people suffered malnutrition while in hospital, etc.

This type of question is more difficult to answer and analysts should seek advice from senior managers and medical staff if unsure how best to proceed. The over-riding concern should be to answer the question posed using data that is fit for purpose.

ISD does not always hold data of sufficient quality and provenance to answer these more indirect questions and for each question there will exist a bar below which ISD data is not deemed fit for purpose and, on occasion, is potentially misleading. This may be due to lack of mandatory coding or completeness or data being collected for a specific unrelated purpose. For these types of questions standard phrases such as ‘Data not centrally held’ should be expanded to explain why ISD data sources are not fit for this purpose (since the MSP may be already aware that they are fit for other types of questions).
3.1.3 Policy focussed question where background data is helpful for the SG

Questions that do not specifically ask for statistical information but for which data held by ISD could provide useful background context. The data would be provided to the SG as a Background Note. e.g. How is the SG working with Boards to help them meet their HEAT target for reducing antidepressant prescribing.

3.2 Producing the Draft Answer

Responses should be in plain English. Jargon and confusing terms that would not be understood outside of ISD for example, episodes, discharges, stays, should not be used or should be fully explained. Some terms used by MSPs are not always intended to match the ISD usage, e.g. admissions.

Where there are potential confidentiality issues due to small numbers, always use the ISD statistical disclosure protocol to assess the disclosure risk of a PQ answer that we provide.

Recognise that ISD is not always the best source of data for some more general questions or questions that require more research to answer, e.g. how much does asthma treatment cost the NHS.

ISD analysts should know best about the quality of the data that we are providing. We should not leave those receiving the ISD draft answer, who are less close to the data, to interpret this for themselves. Where advice is sought on data quality from ISD colleagues (for example data completeness, clinical recording accuracy or completeness) then the analyst should seek views from the persons providing the advice on whether the data is fit for purpose – i.e. is it appropriate to release the information into the public domain, or is there a risk that the data is, or could be interpreted as being misleading.

Note that no dataset is likely to be perfect in terms of quality and completeness for all types of question and analysts should resist being over cautious when the data is generally fit for purpose or over emphasise potentially minor data quality issues that will not have a large bearing on the intended use of the data.

The SG will occasionally change the response provided by ISD when preparing the final answer for the MSP or after clearing with the Minister. Often these are checked with ISD beforehand but not always. For some high profile or newsworthy topics analysts should specifically request that they be consulted on any proposed changes to the content or wording of PQ by the SG. This is to advise on any possible changes in the interpretation of the answer prior to release into the public domain.
3.3 Writing Background Notes

Background notes are flagged as “Recommended not for publication – please discuss with ISD before publishing” – see Annex 6 PQ Template.

The presumption is that Background notes provided by ISD are not provided by the SG as part of the formal PQ response. Background notes within ISD’s answer are for additional contextual information provided to the SG for their own internal briefing purposes. Therefore important information that affects the interpretation of the figures should be provided in the Draft Answer and not the Background notes.

When data exists that is not of a quality that is fit for purpose for the Draft Answer then it is generally not advisable to provide it as a Background note either. This is particularly the case if the data is potentially misleading. However on occasion it may be necessary to provide this data in the Background note if it helps the SG get an understanding of the issues and limitations of the data. If this is the case then the analyst should clearly explain the problems with the data in this context and advise the SG why they are not provided as part of the Draft Answer. Providing additional contextual data that, while not answering the question, provides useful background information for briefing is also sometimes necessary and SG will sometimes request this.

4. Standard Operating Procedure

This section details the procedure to be followed by ISD staff in dealing with a PQ from the Scottish Government. The flowchart (see 4.7) summarises the steps detailed in sections 4.1 – 4.6.

The number of Oral PQs and First Minister’s Questions (FMQ) which ISD contribute to are relatively small. These types of PQs are not extracted as part of the daily PQ extraction process (only written PQs are extracted). Therefore ISD will be contacted direct by the SG if assistance is required to answer either oral PQs or FMQs. Where ISD provides a contribution to an answer to the SG for these then the process below from 4.2.3 should be followed.

<table>
<thead>
<tr>
<th>4.1 Initial receipt and allocation of PQ within ISD</th>
<th>Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1.1 Every morning extract all health related written PQs, lodged the previous working day, from the Scottish Parliament website, and create the ‘daily PQ list’. (See Annex 1 for instructions.)</td>
<td>PQ Co-ord.</td>
</tr>
<tr>
<td>If there is any uncertainty about whether or not a PQ is health related it should be included in the daily PQ list.</td>
<td></td>
</tr>
<tr>
<td>If there are no health related PQs lodged this should be recorded and filed as instructed in 4.1.6.</td>
<td></td>
</tr>
</tbody>
</table>
as instructed in 4.1.6.

If there are problems accessing the Scottish Parliament website contact the Parliamentary Clerk (tel: 0131 244 3946) to ask if it is possible to obtain a faxed copy of all PQs lodged the previous day.

<table>
<thead>
<tr>
<th>4.1.2</th>
<th>Contact an authorised Senior Manager to allocate PQs to NSS Divisions or ISD Groups/Programmes. (See Annex 2 for a list of staff authorised to assign PQs).</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>4.1.3</th>
<th>Review the daily PQ list and allocate as instructed below:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Allocate to an ISD team: Write the name of the team beside the PQ. If there is doubt as to whether or not a PQ can be answered by ISD it should be marked ‘for review’ (see below for further information).</td>
<td></td>
</tr>
<tr>
<td>• Mark ‘for review’: For those where there is uncertainty whether or not ISD can answer the PQ mark “for review” and relevant ISD team.</td>
<td></td>
</tr>
<tr>
<td>• For other NSS divisions: Write the name of the division beside the PQ. This can include PQs marked ‘for review’ by another division.</td>
<td></td>
</tr>
<tr>
<td>• Not allocated: Score through.</td>
<td></td>
</tr>
</tbody>
</table>

Sign and date the daily PQ list on completion of allocation and return to the PQ Co-ord as soon as possible.

Additional guidance for those allocating PQs is provided on geNSS.

The PQ Co-ord is responsible for following up the daily PQ List if it has not been returned. The daily PQ List should be followed up within the same day.

<table>
<thead>
<tr>
<th>4.1.4</th>
<th>Inform Divisions or ISD teams as instructed below:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allocated to ISD team: Create an IRS record for each PQ with the Head of Service as the lead role. (See Annex 3 for IRS completion guidance.) Follow guidance below 4.1.5.</td>
<td></td>
</tr>
<tr>
<td>• For Review: Do not create IRS record. Follow guidance below – 4.1.5.</td>
<td></td>
</tr>
<tr>
<td>• Allocated to other NSS Divisions: Email the divisional contact (see Annex 4) and copy the NSS Executive Office (email Nicola Pelosi Adams) the details of the PQ. Request a receipt for this email from the divisional contact. Following this no further action is required.</td>
<td></td>
</tr>
<tr>
<td>• No PQs allocated to any NSS organisation or ISD team: Record this on daily PQ List and progress to 4.1.6.</td>
<td></td>
</tr>
</tbody>
</table>

| 4.1.5 | Email an electronic version of the daily PQ List to the contacts* for each team allocated a PQ and to those teams who have PQs marked ‘for review’. |

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*Please ensure you include the list of contacts in Annex 4.
*(See Annex 4 for the PQ contacts for each team.)*

<table>
<thead>
<tr>
<th>4.1.6</th>
<th>File a copy of the allocated daily PQ List.</th>
<th>PQ Co-ord.</th>
</tr>
</thead>
</table>

### 4.2 Group/Programme Actions

#### 4.2.1 On receipt of the daily PQ list

PQs allocated to your team:

Consider if they are correctly assigned:

- **Not correctly assigned**: contact the PQ Co-ord. immediately so that it can be reassigned or pass this to the appropriate person and inform the PQ Co-ord.
- **Correctly assigned**: allocate to an appropriate team/person to action. Advise on the approach to be taken when answering, any issues you see with the question, or highlight where contributions from other teams are required.

PQs marked ‘for review’ by your team:

- **Answer can be provided**: Inform PQ Co-ord who will create an IRS record. Pass onto to relevant analyst to action.
- **Answer can be provided by another team**: Inform PQ Co-ord who will create an IRS record and pass to relevant team.
- **Answer cannot be provided**: No further action required.

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#### 4.2.2 On receipt of a PQ being passed to you, update the IRS record to reflect who is now responsible for dealing with the PQ. (See Annex 3).

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#### 4.2.3 Contact the SG to check that a response from ISD is required. It is important that this is done immediately on receipt of the PQ as the timescale for answering PQs is normally very short.

If a response is required you should:

- **Clarify the SG understanding of the PQ.**
- **Establish if the PQ can be answered.**
- **Advise if a background note will be provided**: Background notes are used to provide the SG and Minister with additional information not covered in the ISD draft answer.

It is important to note that Background Notes are not for publication. The SG are asked to contact ISD should they wish to include any Background Notes in a published PQ answer. See Section 3.3 for more information on Background Notes.
• **Establish timescales:** where possible a PQ should be answered within the deadline. Remember to build in time for sign off. However if it is not possible to answer the PQ to the deadline inform the SG contact immediately so they can put in a holding answer. A holding answer postpones the answer until a date when the analysis can be produced. Note the deadline given by the SG contact will be before the deadline date on the PQ question sheet and is normally very short.

• **Advise if disproportionate cost is required to answer PQ:** where the resource required to answer a PQ costs more than £600.00 (2.5 days work) this should be raised and discussed with the SG contact.
  - Where the SG agree that due to disproportionate costs the PQ should not be answered, document this in the “history” section of the Cover Sheet and proceed to sign off (see 4.4.4).
  - Where the SG request an answer even though the cost to produce this will be greater than £600.00 document this in the history section of the Cover Sheet and proceed to 4.2.5. In these situations guidance should be sought from an ISD senior manager.

• **Obtain SG contact’s email address**

• **Advise if data is available from other organisations:** Where the information required to answer the PQ is not available from ISD but from another organisation ie. NRS, National Transplant. This should be explained to the SG and documented in the “history” section of the Cover Sheet. A paper copy of the Cover Sheet should be sent to the ISD’s Executive Office for storage. The IRS record should be updated and closed. No further action is required.

If you do not know who in the SG will be allocated the PQ you should contact the relevant Departmental Secretariat to find out:
  - Health Department Secretariat – tel: 0131 244 2440
  - Justice Department Secretariat – tel: 0131 244 2122

**If the SG contact does not wish ISD to provide data:** Where the SG contact has stated that they do not wish data from ISD, usually where ISD could produce summary analysis indirectly related to the PQ, document this in the “history” section of the Cover Sheet and proceed to sign off (see 4.4.4).

**If the SG contact suggests a response that is not consistent with intended ISD response:** discuss with ISD Senior Manager.

<table>
<thead>
<tr>
<th>4.2.4</th>
<th>Produce draft answer for PQ:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Check <a href="http://www.scottish.parliament.uk">Scottish Parliament PQ website</a> to check for any previous responses, consistency in codes/definitions, etc. It should be noted that published answers may not match any draft answer supplied</td>
<td>Analyst</td>
</tr>
</tbody>
</table>
by ISD.

- Previous ISD draft answers to similar questions should also be checked, to help ensure consistency. Where the draft answer will contain statistics based on methodology changed from previous PQ answers then this should be explained. (Either in the answer itself or in the background note depending on the impact.)

- Where any expertise is required this should be sought immediately e.g. statistical, medical input.

- Senior staff involved should use the comments/history box in the Cover Sheet to document advice and input. This will assist those staff signing off the PQ.

- If you are required to run new analysis or reformat existing data this should be carried out as soon as is possible. Write and run any programs required to produce the information required for the answer. The information you provide should not be the first public release of this data.

- If data is available on a website a standard reply should be used. For example, “The information is published on ISD’s website under (insert section of website and link).” Where relevant, background notes should be provided. Note this type of answer still requires sign off. Go to 4.2.6.

<table>
<thead>
<tr>
<th>4.2.5</th>
<th>ISD’s Statistical Disclosure Control Protocol should be followed for PQ answers.</th>
<th>Analyst</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.2.6</td>
<td>Produce the answer following the template in Annex 6. The following rules should be applied:</td>
<td>Analyst</td>
</tr>
<tr>
<td></td>
<td>• Font should be Arial size 12 for text and tables.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Only Word tables should be included in the answer – see Annex 7 for guidance on converting Excel/SPSS tables into Word.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• All tables should be portrait when included in the answer.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• The left hand column in a table should be left justified, including the heading.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Table rows containing information/figures should be right justified.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Table headings and titles should not be in bold.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Very large tables should not be included in the answer but saved as a separate Excel spreadsheet and a reference to this given in the answer.</td>
<td></td>
</tr>
</tbody>
</table>

| 4.2.7 | Generate a Cover Sheet using Business Objects. If you do not have Business Objects someone else within the group/programme will have responsibility to provide a Cover Sheet. (Instructions on how to produce a Cover Sheet are provided in Annex | Analyst |

Analyst
5.)

| 4.2.8 | Check the draft answer for accuracy, spelling, typing mistakes, etc. and then submit for sign off. | Analyst |

| 4.3 | **Sign off** |  |

| 4.3.1 | Where possible sign off should be sought at least the day before the deadline date to allow enough time for discussion and revision prior to submission. First sign off is undertaken by an Associate Director, Head of Service, Consultant in Public Health Medicine, Chief Pharmacist, Principal Pharmacist (for own work area), Service Manager (for own work area) or Information Consultant (for own work area). Where possible seek first sign off from an appropriate Associate Director, Head of Service, etc. For example if the PQ relates to Health Improvement then, where possible, the Associate Director, Head of Service, Service Manager for Health Improvement should be asked to first sign off the PQ. It should be noted that Principal Pharmacists, Service Managers and Information Consultants can only give first sign-off for draft answers relating to work areas where they have responsibility. See Annex 8 for list of Senior Managers authorised to sign off PQs. Electronic sign off for Cirrus based staff is acceptable – see below. | Analyst |

| 4.3.2 | The person signing off the PQ should review the response. Sign off the PQ by completing the Cover Sheet (electronic sign off acceptable for Cirrus based staff – see below). If further work is required this should be explained to and agreed with the analyst. Analyst should refer back to 4.2.5. | Senior staff signing off PQ |

| 4.3.3 | Following **first sign off**, submit the PQ for final sign off. See Annex 8 for staff authorised to undertake **final sign off**. | Analyst |

| 4.3.4 | For final sign off the draft answer is reviewed and signed off by completing the Cover Sheet (electronic sign off acceptable for Cirrus based staff – see below). If further work is required this should be explained to, and agreed with, the analyst. When the additional work for final sign off is complete there is no requirement for 1st level sign off again. Please note the same person cannot undertake first and final sign off. **Electronic sign off is acceptable for staff based at Cirrus. This should** | Senior staff signing off PQ Analyst/ |

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**Senior staff signing off PQ**

be done via email but should always be accompanied by a phone call to the intended recipient to alert them to this and check their availability for sign off within the time. Do not leave emails indefinitely without this direct contact and if necessary recall and seek an alternative sign off. A copy of the email from the person signing off the PQ, stating the PQ number, should be attached to the cover sheet. The signature section on the cover sheet should state “see attached email”.

### 4.4 Submit Answer to SG and Close PQ

#### 4.4.1 Following sign off, send draft answer via email to the assigned SG contact. Confirmation of receipt of the answer should be requested.

**Analyst**

#### 4.4.2 If sub Scotland analysis has been provided in the draft answer then a copy of this should be sent to the relevant NHS Board(s).

Email 'NSS.isd-HBInfoPreview@nhs.net' mailbox detailing:

- the NHS Board/Boards who are to receive a copy;
- that it is a PQ;
- a copy of the draft answer.

**Note:** If SG indicate that they plan to use Background Note data in the published answer, and if these data contain sub-Scotland analysis, then the analyst should advise NHS Boards as above.

If the draft answer consists of a reference to the ISD website which presents previously published information then consideration should be given to sharing the draft answer with NHS Boards (via the above process). In such cases, decisions on whether to alert NHS Boards should be made on a case by case basis.

**Analyst**

#### 4.4.3 Distribute a copy of the draft answer to the contact(s) at the relevant NHS Board(s) (advised by analyst) using a standard template (provided in Annex 4 of the IR Protocol). This should be undertaken as soon as it is received.

Contacts at each NHS Board are held in the contacts group “CE and Communication Leads” within the “Health Board Information Preview” mailbox.

**Admin. Services**

#### 4.4.4 Update the IRS, close the record and complete the Cover Sheet.

**Analyst**
<table>
<thead>
<tr>
<th>Section</th>
<th>Instructions</th>
<th>Responsible Party</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.4.5</td>
<td>Review answer published on PQ website to check if answer provided by ISD was used.</td>
<td>Analyst</td>
</tr>
<tr>
<td>4.5</td>
<td><strong>Admin. Services Storage of PQs</strong></td>
<td></td>
</tr>
<tr>
<td>4.5.1</td>
<td>On receipt of the PQ response check all the necessary paper work is complete. (Cover Sheet with two sign offs and a copy of the PQ answer).</td>
<td>Admin. Services</td>
</tr>
<tr>
<td>4.5.2</td>
<td>The completed PQ paperwork should then be attached to the relevant daily PQ List by Admin. Services staff and stored according to departmental procedures.</td>
<td>Admin. Services</td>
</tr>
<tr>
<td>4.6</td>
<td><strong>PQ Received Directly from SG</strong></td>
<td></td>
</tr>
<tr>
<td>4.6.1</td>
<td>In some instances, a member of ISD staff might receive a PQ directly from the SG. In such cases the analyst should alert the PQ co-ordinator and they will, if required, create an IRS record. The analyst should follow procedures from 4.2.4 to answer the PQ. The PQ co-ordinator will monitor the occurrence of this happening.</td>
<td>Analyst</td>
</tr>
</tbody>
</table>
4.7 PQ Flowchart

Extract PQs and produce daily PQ list

Assign and return to Co-ord

PQ not assigned

PQ assigned to other NSS Division

Emails details to Contacts

End

PQ assigned to ISD

Log on IRS

Emails details to contacts

Assigned PQs

POs to contacts

POs for review

Contact reviews PQs

No further action

Answer to be provided

End

Check correctly assigned

Correctly assigned

Advise Co-ord

Pass to Analyst

Contact SG to discuss

Produce draft answer

Submit for first sign off

Redraft

Signed off

Submit for final sign off

Redraft

Signed off

Email answer to SG

Close IRS record; complete cover sheet; forward to Exec. Office

Check and file

End

Inform Co-ord and pass to Analyst

For sub-Scotland outputs email copy of draft answer to Health Board Information Preview Mailbox

Email NHS Board contacts (copy to analyst)

Key
- PQ
- Co-ordinator
- Group/Prog
- Contact
- Analyst
- Exec. Office
- Assigning Sr. Manager
Annex 1: Instructions for Extracting PQs from Scottish Parliament Website

A list of all PQs lodged the previous working day can be found on the daily Business Bulletin published on the Scottish Parliament’s website as stated below.

1. Access Scottish Parliament daily Business Bulletin using link below:
2. Click on the link to the latest bulletin – should be today’s date.
3. Select ‘Written Answers’ from options in left hand side menu bar.
4. List of all written PQs are displayed along with date lodged.
5. Copy and paste all health related PQs into a Word document.
6. The Word document with the PQs should be headed up ‘Daily PQ list’.

Please note that during recess the Business Bulletin is produced on a weekly basis and therefore cannot be used to identify the PQs on a daily basis. During recess the Question and Answer Search facility should be used. Please see below for guidance.

1. Access Scottish Parliament Question and Answer Search facility using link below:
   http://www.scottish.parliament.uk/parliamentarybusiness/28877.aspx
   Please note that in the Question and Answer Search facility the screen refreshes after each selection.
2. Click on the ‘Show Advanced Search’ link on the right hand side menu bar.
3. Select filter by ‘Date Range’ from options in right hand side menu bar.
4. Enter the date range. To search for the previous working day’s PQs from should be the previous working day and to should be today’s date.
5. Select ‘Written Questions’ on filter on right hand side menu bar.
6. Click ‘Search’.
7. List of all PQs within this date range are displayed. Copy and paste all health related PQs for the previous working day into a Word document.
   When undertaking this task on a Monday copy PQs lodged on Friday, Saturday and Sunday.
8. The Word document with the PQs should be headed up ‘Daily PQ list’.
## Annex 2: List of staff authorised to assign PQs

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Director:</strong></td>
<td>Susan Burney, Director</td>
</tr>
<tr>
<td><strong>Medical Director:</strong></td>
<td>Hester Ward, Medical Director</td>
</tr>
</tbody>
</table>
| **Associate Directors:**      | Fiona Murphy, National Information and Intelligence  
|                               | Lorna Jackson, Strategy and Business Development |
| **Heads of Service:**         | Roger Black, National Information and Intelligence  
|                               | Duncan Buchanan, National Information and Intelligence  
|                               | Gordon Fleming, Business Support          
|                               | Scott Heald, Data Management              
|                               | Stephen Pavis, Business Development       
|                               | Fiona Russell, Bespoke Specialist Services |
| **Consultants in Public Health Medicine:** | David Brewster  
|                               | Penny Bridger                             
|                               | Jim Chalmers                              
|                               | David Conway                              
|                               | Colin Fischbacher                         
|                               | Lesley Graham                             
|                               | Janet Murray                              
|                               | Rachel Wood                               |
| **Chief Pharmacist:**         | Marion Bennie, Chief Pharmacist           |

Parliamentary questions are initially logged in IRS by a member of Customer Relations. The information required in each field and who is responsible for entering this is detailed below. The following identifies values:

- That will be pre-entered by the PQ co-ordinator (normal text)
- That will require the analyst to review, input or amend (bold text)
- That will be monitored & reported on by the PQ co-ordinator (italics)

**Summary Screen**

- **Request type**: information Request (Non ISD)
- **Date Received**: As - PQ Daily List
- **Deadline Date**: As - PQ Daily List - *Review and update as appropriate*
- **PQ No**: As - PQ Daily List
- **Brief Description**: As per question on PQ Daily List
- **Confidential**: No
- **Estimated Time**: Default value of 1 - *Review and update as appropriate*
- **SE Contact**: Enter contact name
- **Name of Customer**: i.e. MSP/MP
- **Organisation Group**: Government
- **Organisation**: SEHD
- **Chargeable**: No

**Customer Screen**

- **Address (line 1)/(line 2)**
- **Customer Telephone**
- **Customer Fax**
- **Customer Email**
  - At least one of these will be entered

**Time Log Screen**

- **Staff Name**: The Head of Group or Programme will be assigned as lead role
  - Amend; *Assigned person to lead role & add assistant(s)*
- **History Field**: Further relevant details e.g. file location

**Summary Screen - Completion Details**

- **Completion Date**: Input; Completion date as soon as paperwork is signed off.
  - *This field will be monitored by CR – any completion dates not entered within 24hrs of the deadline date will be reported.*

- **PQ Answered**
  - Answered fully or almost fully
  - Answered in part (partial or background information supplied)
  - Answer not available (use where no information is available to answer the question and no background information is supplied)
## Annex 4: PQ Contacts within ISD Teams and NSS Divisions

<table>
<thead>
<tr>
<th>Contacts – for action</th>
<th>Head of Service - copy for info</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>National Information &amp; Intelligence</strong></td>
<td></td>
</tr>
<tr>
<td>Population Health</td>
<td>Susan Frame</td>
</tr>
<tr>
<td></td>
<td>Andrew Deas</td>
</tr>
<tr>
<td></td>
<td>Judith Tait</td>
</tr>
<tr>
<td></td>
<td>Celina Davis</td>
</tr>
<tr>
<td>Health Improvement</td>
<td>Diane Stockton</td>
</tr>
<tr>
<td></td>
<td>Cheryl Denny</td>
</tr>
<tr>
<td></td>
<td>Stephen Goold</td>
</tr>
<tr>
<td></td>
<td>Linsey Galbraith</td>
</tr>
<tr>
<td></td>
<td>Ian Grant</td>
</tr>
<tr>
<td></td>
<td>Joanne Anderson</td>
</tr>
<tr>
<td></td>
<td>Chris Black</td>
</tr>
<tr>
<td>Quality Indicators</td>
<td>Alan Finlayson</td>
</tr>
<tr>
<td></td>
<td>Kirsty Anderson</td>
</tr>
<tr>
<td></td>
<td>John Connor</td>
</tr>
<tr>
<td></td>
<td>Richard Dobbie</td>
</tr>
<tr>
<td>Prescribing &amp; Resources</td>
<td>Adam Redpath</td>
</tr>
<tr>
<td></td>
<td>David Baird</td>
</tr>
<tr>
<td></td>
<td>Nicola Fleming</td>
</tr>
<tr>
<td></td>
<td>Emma McNair</td>
</tr>
<tr>
<td></td>
<td>Tracey Cromwell</td>
</tr>
<tr>
<td>H&amp;SC Service Pathways</td>
<td>Anthea Springbett</td>
</tr>
<tr>
<td></td>
<td>Richard Hunter</td>
</tr>
<tr>
<td></td>
<td>Kathryn Neill</td>
</tr>
<tr>
<td></td>
<td>Lisa Reedie</td>
</tr>
<tr>
<td></td>
<td>Mark Sanderson</td>
</tr>
<tr>
<td>Service Access</td>
<td>Fiona MacKenzie</td>
</tr>
<tr>
<td></td>
<td>Susan Jensen</td>
</tr>
<tr>
<td></td>
<td>Judith Stark</td>
</tr>
<tr>
<td></td>
<td>Elaine Parry</td>
</tr>
<tr>
<td></td>
<td>Jamie Pearson</td>
</tr>
<tr>
<td>Healthcare Audits</td>
<td>Diana Beard</td>
</tr>
<tr>
<td></td>
<td>Lee Barnsdale</td>
</tr>
<tr>
<td></td>
<td>Jane Campbell</td>
</tr>
<tr>
<td></td>
<td>Linda Cullen</td>
</tr>
<tr>
<td></td>
<td>Hazel Dodds</td>
</tr>
<tr>
<td></td>
<td>Kathleen Duncan</td>
</tr>
<tr>
<td></td>
<td>Angela Khan</td>
</tr>
<tr>
<td></td>
<td>Anita Pritchard</td>
</tr>
<tr>
<td></td>
<td>Kirsty Ward</td>
</tr>
<tr>
<td></td>
<td>Susan Stratton</td>
</tr>
<tr>
<td>Statistics Support</td>
<td>Philip Johnston</td>
</tr>
<tr>
<td></td>
<td>Brian Reid</td>
</tr>
</tbody>
</table>
| Data Management | Peter Martin  
|                | Eddie Adie  
|                | Claire Harper  
|                | Themina Mohammed  
|                | Bill Boyd  
| Data Support & Quality | Susan Coull  
|                | Chris Jones  
| Data Advice | Susan Coull  
|                | Janice Watson  
| Database Management 1 | Lee Davies  
|                | Margaret Mason  
| Cancer Registration | Lee Davies  
|                | Bruce Beadle  
| Database Management 2 | Elaine Strange  
|                | Angela Prentice  
|                | Steven Williamson  
| Datamarts | Elaine Strange  
|                | Ian Baillie  
| Business Support | Kathy Clarke  
| Business Support | IT  
|                | Dorothy Donnelly  
| Finance | Gordon Fleming  
| Strategy & Business Development | Fiona Russell  
| Consultancy | Fiona Russell  
| Bespoke Services | Joan Forrest  
| SG Placements | Richmond Davies  
| Clinical Trials | Julie Uttridge  
| Planning & Commissioning | Stephen Pavis  
| Business Development | Michael Sibley  

NSS
Headquarters  
Central Legal Office  
Counter Fraud Services  
Health Facilities Scotland  
Health Protection Scotland  
National Information Systems Group  
National Procurement  
National Services Division  
Practitioner Services Division  
Scottish Health Service Centre  
Scottish National Blood Transfusion Service  
Jan Lyell, Nicola Pelosi Adams, John MacEachen  
Ranald MacDonald, Norma Shippin  
Maggie Worsfold  
Paul Kingsmore  
Johanna Reilly, Louise Kelly  
Andy Robertson, Alec Bolton  
Colin Sinclair, Melinda Keir  
Deirdre Evans, Ruth Meechan, Carol Colquhoun  
David Knowles, Michelle McCreary  
Margaret Wallace, Fiona Kennedy  
Lynne Kidd, Sue Hutchison, Margaret Dunleary

PQ_Protocol_Version1.4  
Released 30th May 2012
Annex 5: Instructions for Producing Cover Sheet in Business Objects

Business Objects Web-intelligence is used to produce the Cover Sheet for all information Requests including Parliamentary Questions.

To produce the Cover Sheet you will need access to Business Objects Web-intelligence and also have been assigned access to the IRS universe. If you do not have access to Business Objects someone else within your team should.

Instructions for producing a cover sheet are available on geNSS at:

http://genss.nss.scot.nhs.uk/pls/portal/url/ITEM/9EB072853A626328E04400212814D70C

Released 30th May 2012
Annex 6: Format for PQ Answers

<table>
<thead>
<tr>
<th>Information Services</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Gyle Square</td>
<td></td>
</tr>
<tr>
<td>1 South Gyle Crescent</td>
<td></td>
</tr>
<tr>
<td>Edinburgh</td>
<td></td>
</tr>
<tr>
<td>EH12 9EB</td>
<td></td>
</tr>
<tr>
<td>Telephone 0141 275 6000</td>
<td></td>
</tr>
<tr>
<td>Fax 0141 275 7511</td>
<td></td>
</tr>
<tr>
<td><a href="http://www.isdscotland.org">www.isdscotland.org</a></td>
<td></td>
</tr>
</tbody>
</table>

[ Insert Name & Address of contact at Scottish Government ]

<table>
<thead>
<tr>
<th>Date</th>
<th>today’s date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your Ref</td>
<td>PQ number</td>
</tr>
<tr>
<td>Our Ref</td>
<td>ISD/ISDgroup/IRS number</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Enquiries to</th>
<th>insert name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Line</td>
<td>0131 275 XXXX</td>
</tr>
<tr>
<td>Email</td>
<td>................</td>
</tr>
</tbody>
</table>

Insert PQ Number date lodged insert date (from Daily PQ List): MSP asking question (insert constituency)

Answer required to be with SG by insert ISD’s deadline date.

Question

Insert copy of the question.

Draft Answer

Insert draft answer and any table(s).

Table 1. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

<table>
<thead>
<tr>
<th>XXXXXXXXXX</th>
<th>XXXXXXX</th>
</tr>
</thead>
<tbody>
<tr>
<td>XXXXXXXXX</td>
<td>XXXXXX</td>
</tr>
</tbody>
</table>

Source: ISD Scotland
Ref: Insert IRS number

Background notes – Recommended not for publication- please discuss with ISD before publishing.

1. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX.
2. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX.
Annex 7: Instructions for Converting Excel/SPSS tables into Word

These procedures should be followed for converting small tables from Excel and SPSS into Word. If you wish to include a large table as part of the PQ answer this should attached as an Excel spreadsheet – see the last bullet point in 4.2.7 for guidance.

Procedure for SPSS:

1. Produce the output in SPSS as normal and select the table (or whatever) in the output file.
2. Click the File drop down menu click Export. Make sure the output file type is HTML and click OK.
4. Open the OUTPUT.htm file (internet explorer or other suitable application), Click Edit, Select all and click Copy.
4. Open Word and click Paste

Procedure for Excel:

1. Select the region you wish to output.
2. Click the File drop down menu then Save as Web Page.
4. Make sure the Selection radio button is checked (this will be the region you have highlighted) and click Save.
4. Open the page.htm file (internet explorer or other suitable application), click Edit, Select all and click Copy.
5. Open Word and click Paste.
Annex 8: Senior Managers Authorised to Sign Off PQs

FIRST SIGN OFF:

Note that Service Managers, Information Consultants and the Principal Pharmacist Technical Specialists are only allowed to sign off PQs for work areas where they have responsibility for outputs.

**Associate Directors:**
- Fiona Murphy, National Information and Intelligence
- Lorna Jackson, Strategy and Business Development

**Heads of Service:**
- Roger Black, National Information and Intelligence
- Duncan Buchanan, National Information and Intelligence
- Gordon Fleming, Business Support
- Scott Heald, Data Management
- Stephen Pavis, Business Development
- Fiona Russell, Bespoke Specialist Services

**Consultants in Public Health Medicine:**
- David Brewster
- Penny Bridger
- Jim Chalmers
- David Conway
- Colin Fischbacher
- Janet Murray
- Rachel Wood

**Chief Pharmacist:**
- Marion Bennie

**Data Management (Service Managers):**
- Susan Coull, Data Support & Quality and Data Advice
- Lee Davies, Cancer Registration & Database Management 1
- Peter Martin, Data Modernisation
- Elaine Strange, Datamarts & Database Management 2

**National Information & Intelligence (Service Managers):**
- Susan Frame, Population Health
- Diane Stockton, Health Improvement
- Alan Finlayson, Quality Indicators
- Adam Redpath, Prescribing & Resources
- Anthea Springbett, H&SC Service Pathways
- Fiona Mackenzie, Service Access
- Diana Beard, Healthcare Audits
- Philip Johnston, Statistics Support

**Strategy & Business Development (Service Managers):**
- Joan Forrest, Service Manager, Bespoke Specialist Services
- Richmond Davies, Service Manager, SG Placements
- Julie Uttridge, Trials Service Manager
- Michael Sibley, Service Manager, Business Development

**Strategy & Business Development (Information Consultants):**
- Jen Bishop, Consultancy Service
- Jackie Caldwell, Consultancy Service
- Fiona Campbell, Consultancy Service
- Mike Muirhead, Consultancy Service
- Steven Young, Consultancy Service
- Stephen Kendrick, Planning and Commissioning
- Alastair Philp, Planning and Commissioning
- Katherine Sharpe, Planning and Commissioning
- Katrina Bird, Business Development
- Sandra Robb, Business Development

**Principal Pharmacist Technical Specialist:**
- Iain Bishop, Principal Pharmacist Technical Specialist
- Don Page, Principal Pharmacist Technical Specialist
FINAL SIGN OFF:

Note that the first and final sign offs must be undertaken by different people. Also if a Service Manager or Information Consultant has undertaken 1st level sign off, the final sign off must be undertaken by someone from a different team.

Director: Susan Burney, Director
Medical Director: Hester Ward, Medical Director
Associate Directors: Fiona Murphy, National Information and Intelligence
Lorna Jackson, Strategy and Business Development
Heads of Service: Roger Black, National Information and Intelligence
Duncan Buchanan, National Information and Intelligence
Gordon Fleming, Business Support
Scott Heald, Data Management
Stephen Pavis, Business Development
Fiona Russell, Bespoke Specialist Services
Consultants in Public Health Medicine: David Brewster
Penny Bridger
Jim Chalmers
David Conway
Colin Fischbacher
Janet Murray
Rachel Wood
Chief Pharmacist: Marion Bennie, Chief Pharmacist