

WOLVERHAMPTON CCG

Governing Body
12 September 2017

Agenda item 18

TITLE OF REPORT:	Communication and Participation update
AUTHOR(S) OF REPORT:	Pat Roberts, Lay member for PPI Helen Cook, Communications, Marketing & Engagement Manager
MANAGEMENT LEAD:	Pat Roberts – Lay member for PPI
PURPOSE OF REPORT:	This report updates the Governing Body on the key communications and participation activities in July and August 2017.
ACTION REQUIRED:	<input type="checkbox"/> Decision <input checked="" type="checkbox"/> Assurance
PUBLIC OR PRIVATE:	This report is intended for the public domain
KEY POINTS:	<p>The key points to note from the report are:</p> <p>2.1.1 Annual General Meeting (AGM) 2.1.3 Annual Report Summary 4.1 Sickle Cell and Thalassemia engagement 5.3 Lay member meeting</p>
RECOMMENDATION:	<ul style="list-style-type: none"> • Receive and discuss this report • Note the action being taken
LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES:	
1. Improving the quality and safety of the services we commission	<ul style="list-style-type: none"> • Involves and actively engages patients and the public. Uses the Engagement Cycle. – Commissioning Intentions. • Works in partnership with others.
2. Reducing Health Inequalities in Wolverhampton	<ul style="list-style-type: none"> • Involves and actively engages patients and the public. Uses the Engagement Cycle. – Commissioning Intentions. • Works in partnership with others. • Delivering key mandate requirements and NHS Constitution standards.
3. System effectiveness delivered within our financial envelope	<ul style="list-style-type: none"> • Providing assurance that we are delivering our core purpose of commissioning high quality health and care for our patients that meet the duties of the NHS Constitution, the Mandate to the NHS and the CCG Improvement and Assessment



	Framework.
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1. BACKGROUND AND CURRENT SITUATION

- 1.1. To update the Governing Body on the key activities which have taken place July and August 2017, to provide assurance that the Communication and Participation Strategy of the CCG is being delivered effectively.

2. KEY UPDATES

2.1. Communication

2.1.1 Annual General Meeting (AGM)

We held our AGM on 26 July, with over 90 people in attendance. Attendees were shown a selection of videos about the work of the CCG and heard about finances for the year, the work we do and a look forward into next year.

2.1.2 Press Releases

Press Releases since the last meeting have included; Bank Holiday pharmacy opening, our sponsorship of a Wolf named Bayliss, a young Wolverhampton resident Holly meets Bayliss the wolf, our AGM meeting invite, be prepared with your medicines for the Bank Holiday and our Outstanding rating from NHS England (which made front page of the Express & Star newspaper).

2.1.3 Annual Report Summary

We printed our signed off version of the Annual Report Summary and handed out copies at the AGM. Copies are available from the CCG, or online at <https://wolverhamptonccg.nhs.uk/about-us/annual-report-summary-2016-17>

2.1.3 Rated Outstanding by NHS England

We were delighted to announce we were one of only four CCG's in the county to be awarded an 'outstanding' rating two years in a row by NHS England for 2016/17. Out of 209 CCG's in the country, only four have received this top status in both 2015/16 and 2016/17.

The CCG was recognised for continued strong leadership, working in partnership, high staff satisfaction, innovation and forward thinking. As well as its commitment to patient and public engagement for which the CCG has become a national exemplar.

2.2. Communication & Engagement with members and stakeholders

2.2.1 GP Bulletin

The GP bulletin is a fortnightly bulletin and is sent to GPs, Practice Managers and GP staff across Wolverhampton city.

2.2.2 Practice Nurse Bulletin

The July and August editions of the Practice Nurse Bulletin included the following topics:

July

Releasing Time for Care Showcase Event

Docman EDT Scheduler

Women's Aid resources



New app for safeguarding
The Mental Capacity Act

Aug

Hepatitis B vaccination update
Pharmacy First for patients aged 16 years and older
Changes to data protection laws
Items which should not be routinely prescribed in primary care consultation
Ruby Wax to be keynote speaker at HeadStart conference
WIN training sessions

2.2.3 Practice Managers Forum

The PM Forum planned sessions covered the following topics:

- Specialty Registrar in Public Health – How the new NHS Health Checks work – Roll out to Practices
- Jon Moore, ICT Project Manager and Roz Geary - ICE as the new Pathology and Radiology e-requesting system – Demonstration and roll out August and September

3. CLINICAL VIEW

GP members are key to the success of the CCG and their involvement in the decision-making process, engagement framework and the commissioning cycle is paramount to clinically-led commissioning. GP leads for the new models of care have been meeting with their network PPG Chairs to allow information on the new models, and provide an opportunity for the Chairs to ask questions. All the new groupings have decided to meet on a regular quarterly basis.

4. PATIENT AND PUBLIC VIEWS

Patient, carers, committee members and stakeholders are all involved in the engagement framework, the commissioning cycle, committees and consultation work of the CCG.

Reports following consultations and public engagement are made available online on the CCG website. 'You said – we did' information is also available online following the outcome of the annual Commissioning Intentions events and decision by the Governing Body.

4.1 Sickle Cell and Thalassaemia engagement

A five week engagement (14/07/17 – 21/08/17) has taken place to gather public and patient views on local health services for Sickle Cell and Thalassaemia. An online survey, attendance at local community groups, stakeholder meetings and outpatient appointment departments has been used to gather views. Results will be available later on this year.

4.2 Patient Groups

The Patient Participation Group/Citizen Forum meeting was held on 20 July. Members shared issues and heard about Medicines Management, viewed the Twirl video and heard about patient choice.

4.3 The CCG AGM also brought forward patients who expressed interest in working with the CCG



- 4.4 The event bus was a success and resulted in meeting 300 members of the public, the final report will come to the Governing Body later this year.

5. LAY MEMBER MEETINGS – Attended:

- 5.1 Healthwatch AGM, local providers and the CCG informed the large audience on what future health services will look like and what local problems exist.
- 5.2 NHSE West Midlands Patient and Public Involvement Group and gave a presentation on how Wolverhampton CCG have embedded PPI into the culture of the CCG
- 5.3 A meeting for Healthwatch representatives, RWT and BCPFT engagement leads in August. The group were informed that one of the new domains from NHSE for PPI is for the CCG to ensure that providers are engaging and involving patients and to take action if they are not. The group were also made aware that RWT is closing its' patient Forum and recruiting 30 patient representatives to a Patient Council starting in October 2017. BCPFT have yet to start local patient groups.
- 5.4 A very well attended Macmillan event on Health and wellbeing arranged by Macmillan and Lesley Fellows of the CCG, a second event is planned for October.
- 5.5 All meetings arranged with the PPG chairs and their new model of care lead to ensure they were fully conversant with the future arrangements and how they may be involved, They agreed to meet in this way on a quarterly basis.

6. KEY RISKS AND MITIGATIONS

N/A

7. IMPACT ASSESSMENT

- 7.1. **Financial and Resource Implications** - None known
- 7.2. **Quality and Safety Implications** - Any patient stories (soft intelligence) received are passed onto Quality & Safety team for use in improvements to quality of services.
- 7.3. **Equality Implications** - Any engagement or consultations undertaken have all equality and inclusion issues considered fully.
- 7.4. **Legal and Policy Implications** - N/A
- 7.5. **Other Implications** - N/A

Name: Pat Roberts
Job Title: Lay member for PPI
Date: 26 August 2017



ATTACHED: none

RELEVANT BACKGROUND PAPERS

NHS Act 2006 (Section 242) – consultation and engagement

NHS Five Year Forward View – Engaging Local people

NHS Constitution 2016 – patients’ rights to be involved

NHS Five year Forward View (Including national/CCG policies and frameworks)

NHS The General Practice Forward View (GP Forward View), April 2016

NHS Patient and Public Participation in Commissioning health and social care.2017. PG Ref 06663



REPORT SIGN-OFF CHECKLIST

This section must be completed before the report is submitted to the Admin team. If any of these steps are not applicable please indicate, do not leave blank.

	Details/ Name	Date
Clinical View		
Public/ Patient View	CF/PPG chairs Sickle Cell and Thalassemia	July / August
Finance Implications discussed with Finance Team	n/a	
Quality Implications discussed with Quality and Risk Team	n/a	
Equality Implications discussed with CSU Equality and Inclusion Service	n/a	
Information Governance implications discussed with IG Support Officer	n/a	
Legal/ Policy implications discussed with Corporate Operations Manager	n/a	
Other Implications (Medicines management, estates, HR, IM&T etc.)	n/a	
Any relevant data requirements discussed with CSU Business Intelligence	n/a	
Signed off by Report Owner (Must be completed)	Pat Roberts	26 August 2017

