

**WOLVERHAMPTON CCG**

**Governing Body**  
**10 October 2017**

**Agenda item 20**

<b>TITLE OF REPORT:</b>	<b>Communication and Participation update</b>
<b>AUTHOR(s) OF REPORT:</b>	Pat Roberts, Lay member for PPI Helen Cook, Communications, Marketing & Engagement Manager
<b>MANAGEMENT LEAD:</b>	Pat Roberts – Lay member for PPI
<b>PURPOSE OF REPORT:</b>	This report updates the Governing Body on the key communications and participation activities in September 2017.
<b>ACTION REQUIRED:</b>	<input type="checkbox"/> <b>Decision</b> <input checked="" type="checkbox"/> <b>Assurance</b>
<b>PUBLIC OR PRIVATE:</b>	This report is intended for the <b>public</b> domain
<b>KEY POINTS:</b>	<p>The key points to note from the report are:</p> <p>2.1.1 <b>Minor Eye Conditions Service (MECS) launch</b>                  2.1.3 <b>Winter Campaign starts - Flu</b>                  2.1.4 <b>Shortlisted for HSJ award “CCG of the Year”</b></p>
<b>RECOMMENDATION:</b>	<ul style="list-style-type: none"> <li>• <b>Receive</b> and <b>discuss</b> this report</li> <li>• <b>Note</b> the action being taken</li> </ul>
<b>LINK TO BOARD ASSURANCE FRAMEWORK AIMS &amp; OBJECTIVES:</b>	
1. Improving the quality and safety of the services we commission	<ul style="list-style-type: none"> <li>• Involves and actively engages patients and the public. Uses the Engagement Cycle. – Commissioning Intentions.</li> <li>• Works in partnership with others.</li> </ul>
2. Reducing Health Inequalities in Wolverhampton	<ul style="list-style-type: none"> <li>• Involves and actively engages patients and the public. Uses the Engagement Cycle. – Commissioning Intentions.</li> <li>• Works in partnership with others.</li> <li>• Delivering key mandate requirements and NHS Constitution standards.</li> </ul>
3. System effectiveness delivered within our financial	<ul style="list-style-type: none"> <li>• Providing assurance that we are delivering our core purpose of commissioning high quality health and care for our patients</li> </ul>



envelope	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 September 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 Minor Eye Conditions Service (MECS) launch

A new campaign started in September to launch the new MECS service offering people the chance to see their optician for eye conditions, which they may previously have gone to hospital for. The MECS service replaces the PEARS service which has operated in Wolverhampton since 2014. Full details on <https://wolverhamptonccg.nhs.uk/your-health-services/eye-care-service-mecs>

#### 2.1.2 Press Releases

Press releases since the last meeting have included: Flu season set to begin; World Alzheimer's Month – Remember me; WCCG shortlisted for HSJ award; New service brings eye care into focus; AGM success; Have a slice of cake for Macmillan and Red Bag Scheme.

#### 2.1.3 Winter Campaign - Flu

The winter campaign has started with a focus on flu jabs. All public who are identified as being in an "at risk" group are invited to take up their flu jab at their GP surgery or with at their local pharmacy. The first focus is on older people and carers, who are more at-risk of catching flu and suffering complications and are urged to get their vaccination early to prevent illness.

#### 2.1.4 Shortlisted for HSJ award "CCG of the Year"

We are delighted to have been shortlisted by the 2017 HSJ awards. Our Executive Team will present to the judges in early October, and the winners of the award will be announced at the November awards event.

### 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 September edition of the Practice Nurse Bulletin included the following topics:

Sign up to the new CCG intranet  
WDVF training opportunity  
Support the journey of cancer patients in community setting



Roaring to #End FGM  
Invitation to attend Best Practice Nursing  
Staff and patient guidance to keep GP online services available.

### 2.2.3 Practice Managers Forum

The PM Forum planned sessions covered the following topics in September:

- Diabetes prevention
- Sound Doctor
- Domestic Violence Template Intro
- Base 25 introduction into the new Rapport Counselling service
- Bowel Screening promotion
- Care Navigating introduction

### 2.2.4 Joint Engagement Assurance Group (JEAG)

The JEAG group met on 5 September to share communication and engagement activity and ideas for their represented organisations/groups.

## 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 Patient Groups

#### PPG Chairs and Citizen Forum Group

This group met during September and were informed on the MSK Connect Service, Briefing on Virtual PPG groups and were updated on Primary Care and in particular the 'Care Navigator system'.

The member's also fed back on issues they are experiencing at their Practices. For example: a lack of support for the PPG from the Practice's, they are still trying to combat this and were interested in the Mjog. system for DNA and also as a vehicle for gaining interest in virtual PPG groups.



**5. LAY MEMBER MEETINGS – attended:**

**5.1 Lay Member meetings and news**

The lay member met with RWT engagement lead and Healthwatch lead to exchange views and issues. Healthwatch is seeking to conduct a visit and report on A&E in the near future, and RWT is still recruiting to their new patient council.

A new Patient committee member has been recruited to the Quality and Safety Committee.

**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 September 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	<b>CF/PPG chairs</b>	
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	
<b>Signed off by Report Owner (Must be completed)</b>	<b>Pat Roberts</b>	<b>26 September 2017</b>

