

A meeting of NHS Bromley CCG Governing Body January 2016

ENCLOSURE XX (leave blank)

Communications and Public Engagement Activity Report

SUMMARY:

This report provides an overview of our communications and engagement (C&E) activity in Bromley CCG over the last six months. It provides information and assurance on the following areas:

- Outcome from NHS England on our Statutory Obligations report for 2014/15
- Engagement activity undertaken with the public and patients and how this is influencing the decisions we make.
- Campaigns, publications and media.
- IT systems for communication and engagement
- Planned future public engagement activity.

KEY ISSUES:

The CCG is committed to effective and responsive public and patient engagement. This commitment is reflected from the Governing Body level right through the organisation. The CCG has an internal team who are responsible for coordinating and managing public and patient engagement.

Last summer NHS England assured the CCG for its patient and public involvement work as part of a deep dive assurance process. In September we submitted our Annual Statutory Obligations Report for 2014-15 which was presented to the Governing Body in November. NHS England has informed us this month that their assessment of the delivery of our statutory obligations is consistent with an assurance level for patient and public participation activity of 'overall good with multiple elements of outstanding'.

We continue to actively work with all our key partners in Bromley, in particular with our Bromley CCG Patient Advisory Group members to involve Bromley residents in our work.

Over the last six months we have worked particularly closely with Healthwatch Bromley, who we commissioned to undertake some engagement work for us. The outcomes of that work is included in this report.

COMMITTEE INVOLVEMENT:

The CCG communications and engagement team
Elements of the report have been discussed with the Bromley Communications and Engagement Network

PUBLIC AND USER INVOLVEMENT:

As set out in the paper

IMPACT ASSESSMENT:

Our engagement activity aims to reduce health inequalities by ensuring we are engaging with all population groups including those who are traditionally seldom heard.

RECOMMENDATIONS:

The Governing Body is asked to:-

Note the activity undertaken and the future plans for activity.

ACRONYMS

C&E – Communications and Engagement
PAG – Patient Advisory Group

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Communications and Public Engagement Update Report

Report to the Governing Body - January 2016

1. Introduction

This report provides an update on the main areas of communication and public engagement activity undertaken over the last six months (July to December 2015).

It covers the following areas:

- Outcome from NHS England on our Statutory Obligations report for 2014/15
- Engagement activity undertaken with the public and patients and how this is influencing the decisions we make.
- Campaigns, publications and media.
- IT systems for communication and engagement
- Planned future public engagement activity

2. Statutory Obligations report for 2014/15

Last summer NHS England assured the CCG for its patient and public involvement work as part of its deep dive assurance process. In September we submitted our Annual Statutory Obligations Report for 2014-15 which was presented to the Governing Body in November.

NHS England has informed us this month that their assessment of the delivery of our statutory obligations is consistent with an assurance level for patient and public participation activity of '**overall good with multiple elements of outstanding**'. Although there is no longer a unique component for patient and public engagement within the assurance framework, it will be considered now as part of their future assurance assessment.

The reasons for this assessment were:

- The statutory obligations report demonstrated a detailed awareness of our population and the health conditions that affect them.
- There is a detailed vision of engagement linking to the CCG vision which is supplemented by a governance structure which reflects how the CCG makes public and patient involvement the responsibility of all.

- The report reflected well the patient and public response to future plans and how we will take these into account in areas we wish to develop.
- There was good evidence of engagement and the existence of networks.
- There was a good understanding of feedback received by people we have engaged with and an awareness of areas for improvement.
- It was clear how quality concerns are raised and how providers are held to account through the Clinical Quality Review Groups.
- Self-management examples demonstrated well the measurable improvements.
- A positive Healthwatch statement.

3. Engagement activity

Below is a summary of the key areas of public and patient engagement work we have undertaken, some of which are still in progress, over the last six months and how this work is influencing the decisions we make. The CCG has also now established its online business planning tool which ensures that patient engagement and communications are considered right at the start of any planned service reviews, developments and reprocurments.

Activities	Planned Outcomes/ Progress
<p>Commissioning Intentions and organisational priorities – During the late summer, the CCG developed plans and priorities for the next three to five years. Seven priority areas were identified. These were based on local health needs and what people had already told us about the health care they needed.</p> <p>We wanted to check we had understood what people had already told us and to ask if there was anything else we should consider in our plans.</p> <p>We produced easy to read public summaries for each priority area and tested these with local people and other stakeholders. This was done through a survey which was promoted through our networks, website and social media. We also used our Annual General Meeting to gather views.</p>	<p>There was agreement with the priority areas. All the suggestions we received were considered by programme clinical and managerial leads. Many have been incorporated into our priority areas and others will be considered further alongside any future engagement we do as our plans develop. Comments included:</p> <ul style="list-style-type: none"> • Provide more care locally. • More collaboration with community, voluntary and social sector organisations. • Consider the needs of vulnerable adults in end of life care. • Work with the hospital to keep dementia patients out of acute medical care. • Standardising care in GP practices. • Utilise local resources to promote healthy living.

Activities	Planned Outcomes/ Progress
<p>Mental Health - During the summer we commissioned Healthwatch Bromley to gather views about some of our mental health services – namely what works and what needs to be improved.</p> <p>This was an extensive piece of work. We worked closely with Healthwatch to ensure that views were sought from current users of these services as well as the wider population. Some of our PAG members also participated. Views were collected through a survey and focus groups. The survey was widely promoted through networks, websites and newsletters several times during the engagement process providing lots of opportunities for people to get involved.</p>	<p>A comprehensive report was provided by Healthwatch on the outcomes of the engagement process. This included feedback that there is some confusion about what is currently available, especially for those who are new to the services and around language and jargon. There is also a need for shorter waiting times and more flexibility for appointment times.</p> <p>These outcomes are informing our review of the IAPT (Improving Access to Psychological Therapies) and the Mental Health Employment service to ensure these services are designed and delivered to meet the needs of patients. We are also committed to having clear language about what the services involve as these are developed.</p>
<p>Phlebotomy – During October and November last year, we have engaged with patients to get their views on the current blood taking services. Patients have told us that waiting times for blood taking services were too long so we wanted to understand how our residents currently access these services and if they are meeting their needs.</p> <p>Healthwatch Bromley was commissioned to help us with this work. A detailed survey, tested with patients, was produced and over 300 people responded. Several focus groups were held, as well as a PAG meeting and patients in clinic waiting rooms were spoken to. There was also engagement with the current service providers and GP practices.</p>	<p>Outcomes of the engagement activity are being used to inform our review and future provision of phlebotomy services. The work found that people value convenience highly and that the service must be quick, efficient and local. People felt that the domiciliary blood taking service was working well and phlebotomists are valued as friendly and helpful.</p>

Activities	Planned Outcomes/ Progress
<p>Our Healthier South East London (OHSEL) – Members of our PAG continue to be involved in some of the clinical leadership groups for the priority areas in the programme.</p> <p>Over the last six months we have continued to engage and inform local people (including commissioning Bromley Healthwatch to engage with seldom heard groups) to get their views on the OHSEL Issues Paper.</p> <p>We also worked through the Bromley Communications and Engagement Network to gather their support to promote the work and gather views, published information in the local newspaper, spoke to people in the Bromley shopping centre and held a deliberative event in July.</p>	<p>Patient voice and experience is at the heart of the conversations about meeting the challenges in local health services. Bromley patient views are heard alongside other boroughs in south east London and are influencing the plans to ensure the Bromley patient perspective is included.</p> <p>By commissioning Healthwatch to work with seldom heard groups we ensured that the views of people in these groups such as young people, some BME communities, mental health users and people with hearing impairment were able to give their views on the plans. These views have been fed into the OHSEL project team</p>
<p>Cardiac patient support group – This support group has been facilitated by the CCG and supported by King’s and other cardiac providers of care. It was established in response to both a clinical need and feedback from our PAG who told us that people with heart problems need an opportunity to share experiences and get information on their condition.</p>	<p>People recently diagnosed with cardiology problems can join the group to give them the opportunity to share their experiences with other service users and to gain additional information on living with heart disease. The first meeting takes place in January 2016.</p>
<p>Audiology – We are reviewing our current audiology service to ensure we are providing a comprehensive patient-centred direct access adult hearing service for age related hearing loss. The aim is to improve access and service provision and empower patients to be able to make decisions about their audiology care.</p> <p>We held a patient focus group which included patient representatives, GPs, representatives from Deaf Access and other officers to gather their views on what is needed.</p>	<p>We listened and incorporated valuable comments, suggestions and improvement ideas into a revised service specification. This included:</p> <ul style="list-style-type: none"> • General support for being able to access audiology services on the high street with a choice of location and appointments. • Strengthening of hearing aids. • Patients empowered to make appropriate decisions about their care • Compulsory deaf awareness training

Activities	Planned Outcomes/ Progress
<p>Neurology – We are undertaking a review and redesign of our specialist neuro-rehabilitation services in order to provide more capacity and ensure we are meeting the needs of all patients requiring neurology rehabilitation services.</p> <p>Two of our PAG members and representatives from voluntary sector organisations which support people with long term neurological conditions, will be working closely with the CCG’s Neurology working group. They will be involved in the review of service specifications and any procurement process or service improvement initiatives which may be required.</p>	<p>for all staff delivering the NHS service.</p> <p>The patient voice is embedded into the process by having patient representatives as part of the review of the specification and any procurement or service improvement initiatives required.</p> <p>The planned benefits for patients resulting from the approach will include:</p> <ul style="list-style-type: none"> • Improved access to services • Improved patient flow and capacity • Greater independence for patients • Improved quality of life • Improved patient and carer experience and satisfaction. • More patients able to leave hospital sooner with the right community support in place. • Better patient outcomes and improved functional ability.
<p>Children’s services – A workshop was held with Bromley Parent Voice to get views on the information currently provided on local websites about some support for children and young people with specific needs in Bromley.</p>	<p>We are currently reviewing the feedback we received to improve the information provided. Another workshop will be held to test out the improvements.</p>
<p>Carers Strategy – Members of our PAG were part of a stakeholder event to review the carers’ strategy for Bromley. This is a joint initiative between the local authority and the CCG.</p>	<p>To ensure that the patient/carers voice is incorporated into the plans and vision for a new carers’ strategy for Bromley.</p>

We have also developed a new policy for providing travel and carer expenses to be paid to members of the public and patients who are involved in our work.

4. Campaigns, publications and media

4.1 Campaigns

Campaigns are run throughout the year, often to coincide with national campaigns, seasonal campaigns and awareness weeks. Our focus is on those campaigns that meet the demographic and health needs of Bromley residents. We promote these campaigns through our website, social media, in publications, through our partners and also in a regular news column we have in the Bromley News shopper. The aim is to provide people with information about how they can improve their health, take better care of themselves and supporting self-care. Over the last six months our awareness campaigns have included:

- Stop smoking
- Cancer screening
- Sexual health
- Breastfeeding
- Encouraging children to exercise
- Self-care week
- Anti-biotic awareness

We have also widely promoted winter health campaigns. This includes:

- Promoting the national **stay well this winter campaign** which includes encouraging people to get their flu jab. Local partners also supported these messages including the local authority and Healthwatch.
- **Bromley pharmacy campaign.** The aim of the campaign was to encourage people to use their pharmacist when they start to feel unwell in order to make good use of these services and relieve the pressure elsewhere in the system if people become more seriously unwell. Messages were related to the national stay well with winter campaign. Raj Matharu, the Chief Officer of the Bromley, Greenwich and Bexley Local Pharmaceutical Committee kindly agreed to be the face of our campaign and we have produced flyers, adverts and arranged bus and bus shelter advertising across the borough. We also, with the support of the local authority, distributed 24,000 flyers to primary school children through their schools.

The campaign is focused on people over 65, those with long term conditions and people with young families. Public Health England were pleased with how we had linked this to the national campaign both in terms of messages and branding and are keen to hear how it is received.



- **Health Help Now app** – this is a mobile and digital app which is designed to help people understand where they should go for medical treatment, especially when this is needed in a hurry or late at night or the weekend. This was launched in December and outdoor media advertising is arranged for January.

A wide scale medicines waste campaign was also undertaken last year together with Lewisham, Southwark and Lambeth. The campaign targets the over 60s as they are more likely to be on long term medication (although there is no clear link to medication wastage in this group).

269 people were interviewed as part of the evaluation of the campaign across the four boroughs. 62% were female and 38% male. 32% are on long term medication, 37% on repeat prescription and 31% on both. 71% have an illness or disability that limits their daily activities/work they can do and 16% have recently been admitted to hospital.

Outcomes showed that:

- Those most likely to waste medicines were heart disease and skin condition sufferers, those aged 40 to 59 and people who have recently stayed in hospital.
- Patients struggle most with taking medicines at the correct times and intervals.
- In Bromley the highest proportion of people will now be more likely to consider the cost to the NHS.
- Nearly a fifth who responded said they were experiencing concerning side effects to their medication, around two thirds of those with concerns regarding their medication have spoken to their GP/ pharmacist about these issues.

- Many chose not to speak to their doctor or pharmacist as they fear that they will be wasting their time.
- 14% of patients who took part in the survey could spontaneously recall seeing some form of advertising whilst 25% could recall seeing at least one of the campaign ads.
- Campaign messages and advertising visuals were liked although they could be drowned out by other medical campaign materials.
- Adverts have been effective in encouraging patients to be more likely to consider speaking to their GP/Pharmacist if they have problems with their medication in the future.

Recommendations on the outcome of the campaign are being considered and taken forward by the CCG's Medicines Management team.

4.2 Stakeholder Bulletin

We produce a quarterly stakeholder bulletin which informs key stakeholders and patient representatives about the work we are doing and the outcomes of our engagement work. This is emailed to patient group members and a range of stakeholders including Bromley MPs, key councillors, voluntary sector groups, Healthwatch and other partners. It is also posted on our website to reach a wider audience.

4.3 Media

Our aim is to ensure that the CCG and its activities are fairly and accurately represented by the media. This involves producing press releases, being prepared for any media interest and monitoring media activity that impacts on or which is of interest to the CCG. We have developed handling lines for a range of issues relating to provision of local services, although the CCG is not usually asked to comment directly. We have also developed a media policy which sets out how to work effectively with the media.

4.4 Freedom of Information

The Freedom of Information (FOI) Act gives the right to all individuals to request access to information held by the CCG. From 1 April to 30 September 2015 there were 154 requests (higher than last year which was 135 for the same period). Key themes include requests about services we commission, corporate information, finance and prescribing information.

5. IT systems for communication and engagement

We are continually improving the way we communicate and engage with the public which involves the development of IT based systems.

We have transferred our website over to a new content management system and are currently reviewing the content to ensure it is comprehensive and provide clear and accessible information on our organisation and local services. This new content will be refreshed and launched by April 2016.

We use twitter to promote our activities and opportunities to engage with local people and other stakeholders. As of 7 January, we have 2,635 followers (an increase of over 500 in the last six months) and we follow 199 people and organisations.

We have a staff intranet and membership practice zone which provides an accessible online resource for general practice staff with news, guidelines, procedures, and referral forms etc.

6. Planned future engagement activity

Future activity planned with patients and the public (in addition to the ongoing work identified in section 3) includes:

- Involvement in the development of integrated care networks to support the delivery of our out of hospital strategy.
- The establishment of a stakeholder reference group for the OHSEL programme which will look at planned care services. The aim of the group is to enable a broad range of voices to be directly involved in shaping the options appraisal process for planned care across south east London. It will be complemented by publishing key documents and outcomes online to enable others to also contribute.
- Review of new primary care based cardiology services such as 24 hour ECG monitoring.
- Review of podiatry services provided in the community.
- Development and implementation of an appropriate level of communication and engagement to support the re-procurement of community services.

7. Recommendation

The Governing Body is asked to note the activity undertaken and planned.