

## A meeting of NHS Bromley CCG Governing Body July 2016

**ENCLOSURE XX (leave blank)**

### **Communications and Public Engagement Activity Report**

#### **SUMMARY:**

This report provides an overview of our communications and public engagement (C&E) activity in Bromley CCG over the last six months (January 2016 to end of June 2016). It provides information on the following areas:

- Our engagement activity.
- Partnership working
- Campaigns, publications and media.
- IT systems for communication and engagement.
- Planned future public engagement activity.

It also forms part of our reporting on how we are meeting our statutory requirements for participation. Our annual statutory obligations engagement report will be published in October 2016 which will provide comprehensive information and evidence on how we have met these duties.

#### **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. We have a patient advisory group (PAG), with a growing membership, who are closely involved in much of our work and we are grateful for our members who give up their time voluntarily to advise and provide an essential patient perspective on our plans. We also work closely with key partners in Bromley such as Healthwatch and Community Links Bromley.

We have a statutory duty to engage patients and the public on our commissioning activity.

Some of the headlines from this report include:

- Patient workshops and a survey have been undertaken to help inform development of the Integrated Care Network model
- There has been patient involvement in recent procurements including neurology and the cardiology diagnostic tool.
- The introduction of Browse-aloud to the CCG website is improving access to information on the site by providing it in different languages, reading it aloud and different background colours to aid people with visual impairments.
- Our winter pharmacy campaign which ran up to the end of March has received some good feedback. It will also feature in the new Department of Health identity policy.
- Bromley had the highest number of respondents in south east London to the evaluation of the winter Health Help Now App which has met all the objectives it set out to achieve.
- Our twitter followers have increased by over 400 in the last six months and we have increased the amount of social media interaction on our campaign work and other messaging. This is having many positive impacts including more people coming forward to join the PAG.

**COMMITTEE INVOLVEMENT:**

Elements have been discussed at the Clinical Executive, the Integrated Governance Committee, the OHSEL Communications and Engagement Workstream meeting and 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, the outcomes and the future plans for activity.

**ACRONYMS**

C&E – Communications and Engagement  
 PAG – Patient Advisory Group  
 OHSEL – Our Healthier South East London

CLB – Community Links Bromley  
ICN – Integrated Care Network  
AF – Atrial Fibrillation  
IT – Information Technology  
MSLC – Maternity Services Liaison Committee  
DPP – Diabetes Prevention Plan  
SEL – South east London

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# **Communications and Public Engagement Activity Report**

## **Report to the Governing Body - July 2016**

### **1. Introduction**

This report provides an update on the main areas of communication and public engagement activity undertaken over the last six months (January to June 2016). It is produced in a format which enables us to both report back on progress, the outcomes of our engagement and provide assurance in relation to our statutory engagement duties.

It covers the following areas:

- Engagement activity
- Partnership working
- Campaigns, publications and media.
- IT systems for communication and engagement
- Planned future public engagement activity

### **2. Engagement activity**

#### **2.1 How we plan our public engagement activity**

We have robust governance processes in place which ensure that our engagement activity is embedded across the CCG and the commissioning cycle. Prior to embarking on any engagement, the CCG develops bespoke communication and engagement plans to support the relevant programme area. These plans are part of our routine business using our online business planning tool. By producing these plans right at the start of any project, it enables us to ensure the right level of engagement is planned, arranged and undertaken at each stage of the process.

Part of our approach to inform our communication and engagement planning is to consider and use any existing sources of intelligence, engagement outcomes and other insight to inform our work. This can include information from surveys, other programmes of work, friends and family test, engagement undertaken by our partners (such as Healthwatch) and other patient experience or quality data from our providers. These can be rich sources of intelligence and data which can contribute to the overall picture of services.

Nationally, six principles for engaging people and communities have been recently developed which aim to provide practical support to services as they build new relationships with people and communities. This is to support the delivery of the five year forward view particularly through local sustainability and transformation plans and vanguard sites. Although we are not a vanguard site, we are committed to the six principles which are very much at the heart of our patient engagement. For example, in developing our Integrated Care Networks we have identified the need to support carers better, work closer with the voluntary sector and provide person centred care which has also come through our local engagement work and evaluation plans for the new system. The six principles are:

- Care and support is person centred: personalised, coordinated, and empowering
- Services are created in partnership with citizens and communities
- Focus is on equality and narrowing inequalities
- Carers are identified, supported and involved
- Voluntary, community and social enterprise and housing sectors are involved as key partners and enablers
- Volunteering and social action are recognised as key enablers

Below is a summary of the key areas of public and patient engagement work we have undertaken, some of which is still in progress, over the last six months and how it is influencing the decisions we make. Our stakeholder bulletin, which is distributed 4 times a year and published on our website, provides information on our engagement activity together with the outcomes using a ‘you said, we did’ approach. It is also one of the ways in which we feedback to those who have been involved.

**2.1.1 Engagement work completed**

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p><b>Development of Integrated Care Networks (ICN)</b></p> <p>In January and May 2016 we held patient events (focus group and workshop) to help inform the development of our models of care for the ICNs. At the workshop in May representatives from Healthwatch and the voluntary sector also attended.</p> <p><u>Patient focus group (January)</u></p>	<p>Feedback from these patient engagement activities has been used to inform the development of the integrated model of care. Outcomes from other engagement (such as the Our Healthier south east London case for change/issues paper) have also been used to inform this model.</p> <p><u>Patient focus group (January)</u></p>

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p>A patient focus group was held in January 2016 with seven members of the CCG Patient Advisory Group (PAG) who have or care for people with long term or complex health issues. The purpose of that session was to gather their experiences and use these to inform the model of care and pathway development.</p>	<p>Outcomes from this focus group were fed into the development of the models. Examples of how this information was used include:</p> <p><b>You said:</b> Not enough preventative care.</p> <p><b>We did:</b> The new care model emphasises proactive care, identifying high-risk patients and holistically assessing them to identify issues and goals.</p> <p><b>You said:</b> The basics need to be covered to avoid more complex problems later on.</p> <p><b>We did:</b> A new proactive care pathway will identify the patients who are most at risk and work to avoid or slow deterioration in their health.</p> <p><b>You said:</b> There is sometimes poor communication between different services caring for patients with lots of health and social care needs.</p> <p><b>We did:</b> In the ICNs there will be new staff in place that will be responsible for coordinating the care of people with complex health issues and ensuring that all the services they need are working together to meet their needs.</p> <p><b>You said:</b> I don't want to keep bothering my GP with minor issues but I have to as I don't know who else can help me.</p> <p><b>We did:</b> We are planning to set up a</p>

Activities	Planned Outcomes/ Progress
<p><u>Patient workshop</u></p> <p>In May, we held a patient workshop with members of our PAG, Healthwatch and Community Links Bromley (CLB). The purpose of the workshop was:</p> <ul style="list-style-type: none"> <li>• To explain how their experiences and previous feedback had been used to inform the models of care.</li> <li>• Share and describe the proposed care pathways that will operate within the ICN.</li> <li>• Gather views on those pathways to help inform the final model.</li> <li>• Share outcomes of a patient survey undertaken to gather wider views to inform the ICN development.</li> <li>• Get their views on patient statements which will be used as one of the ways to evaluate the ICNs.</li> </ul> <p><u>Patient Survey</u></p> <p>In May we launched a patient survey to gather views on people’s experiences of care and to test some of the suggested approaches for the new models of care. We shared some of the initial outcomes from the survey at our Patient workshop in May. We received 129 responses to the survey.</p>	<p>single point of access that patients can call to get signposted to the right service, or get information about their care.</p> <p><u>Patient workshop</u></p> <p>The outcomes of the patient workshop have been considered by the ICN transformation team and feedback on the care pathways is being reviewed to modify the models. We are also discussing the outcomes of the patient evaluation statements with the Health Innovation Network who are working with the CCG on the evaluation of the ICN. A ‘you said, we did’ report is being developed for those who participated.</p> <p><u>Patient Survey</u></p> <p>Outcomes from the survey have been considered by the programme team and fed into the process. These are also helping to inform other areas of work including the community health services procurement. Themes that emerged related to :</p> <ul style="list-style-type: none"> <li>• Improved access</li> <li>• Waiting times</li> <li>• Communication and information</li> </ul>

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
	<ul style="list-style-type: none"> <li>• Proactive care</li> <li>• Co-ordinated care</li> <li>• Clinical expertise</li> <li>• Resources</li> </ul>
<p><b>Primary Care Access Hubs</b></p> <p>Over the winter, the CCG commissioned the Bromley GP Alliance to provide extended primary care appointments and opening times for patients. This pilot service was provided from two primary care access hubs, one at Beckenham Beacon and the other at the Poverest Medical Centre in Orpington.</p> <p>An evaluation took place in May to inform future commissioning of the service. This has included patient experience feedback. The CCG commissioned Healthwatch to deliver face to face interviews with patients attending the hubs. Due to the nature of the service and the way that patients access it, the CCG recognised that there were limited opportunities to get detailed service user feedback. Therefore targeting patients opportunistically after hub appointments was the best way to do this.</p> <p>The aim was to capture:</p> <ul style="list-style-type: none"> <li>• How users access the service</li> <li>• Their experience of using the service</li> <li>• Where improvements could be made.</li> </ul>	<p>Outcomes of the survey are being used to help inform the plans for commissioning hub services on a permanent basis</p> <p>130 patients were questioned over a period of two weeks. 51 of these were from the Beckenham Beacon Hub and 79 from Poverest Medical Centre. There was a positive response to the survey with the vast majority of people (95%) saying they were happy or extremely happy with the service they had received. The survey revealed that the service is well thought of and patients like the option of having a hub service available.</p> <p>Three main areas for improvement were:</p> <ul style="list-style-type: none"> <li>• Make more appointment slots available.</li> <li>• Provide a wider range of appointment times</li> <li>• Increase awareness of the service.</li> </ul>
<p><b>Phlebotomy</b></p> <p>Following the comprehensive engagement undertaken last year on the current phlebotomy services, the outcomes have been reviewed by clinicians and managers in the CCG who have agreed that the blood taking services need to be improved and there needs to be better local</p>	<p>The CCG has:</p> <ul style="list-style-type: none"> <li>• Developed a new service specification for blood taking services, which has been shaped by what people told us such as: <ul style="list-style-type: none"> <li>○ <i>Waiting times are too long</i></li> <li>○ <i>Ticketing system and urgent</i></li> </ul> </li> </ul>



<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p>access for all Bromley residents.</p>	<p><i>patient process needs improvement</i></p> <ul style="list-style-type: none"> <li>○ <i>More services that offer walk in and booked appointments.</i></li> <li>○ <i>Clinics available after 5pm</i></li> <li>○ <i>Better provision for children</i></li> </ul> <ul style="list-style-type: none"> <li>● Developed a business case that will provide options on the very best way to deliver these services.</li> </ul> <p>We need to ensure we get the provision right so that it meets the needs highlighted in the survey. We need to ensure we get the provision right so that it meets the needs highlighted in the survey and, with this in mind we are still in the process of scoping how an improved service is best delivered cost-effectively.</p> <p>There will be further patient engagement via the CCG PAG on the redesign and procurement stages of the service development. We provided feedback to those who were involved through our website and Healthwatch.</p>
<p><b>Bromley Heart Support Group</b></p> <p>We reported in January that a new Patient Cardiac Support Group had been established. Now known as the Heart Support Group – it continues to meet. The CCG is supporting the group to get accreditation by the British Heart Foundation so that users can be supported to facilitate and manage the group directly.</p> <p>The group was established in response to both a clinical need and feedback from our PAG, who</p>	<p>A recent evaluation of the group showed that:</p> <p>100% of the 40 attendees have found it helpful with 96% saying extremely helpful or very helpful.</p> <p>Attendees told us that ‘the opportunity to put questions to experts is priceless’ and that ‘The two consultants speaking were first class.’</p>

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p>told us that people with heart problems need an opportunity to share experiences and get information on their condition.</p>	
<p><b>Children’s services</b></p> <p>Work has been ongoing with Bromley Parent Voice to develop the right information, provided on local websites, about support for children and young people with specific needs in Bromley. This is known as the ‘local offer’.</p>	<p>The views of those involved influenced the final content which is now available on the CCG and local authority websites. By involving Bromley Parent Voice in this process, we are confident that the information is clear, accessible and will now be promoted to those people who need to know what is available.</p>
<p><b>Neurology</b></p> <p>There will now be two separate neuro rehab pathways – one is stroke specific and the other a pilot service for non-stroke patients. For stroke rehab, patient and voluntary sector representatives have been directly involved in the procurement for the specialist stroke rehab service.</p> <p>The decision to separate stroke and non-stroke rehab services was endorsed by three Neuro societies (representing the views and concerns of patients with long-term neuro conditions) who were also involved from an early stage in shaping the scoping brief for the non-stroke neuro rehab work. This enabled patient views and specialist society input to directly inform the joint pilot proposal that was approved at the CCG’s Governing Body.</p>	<p>Procurement for stroke rehab has been completed and the provider for the new stroke specific pathway has been agreed. PAG and voluntary sector representatives were involved in the procurement of the service which has been endorsed by the CCG’s Governing Body.</p> <p>By separating into stroke and non-stroke specific pathways, the CCG aims to achieve improved outcomes for patients including improved:</p> <ul style="list-style-type: none"> <li>• Access to services</li> <li>• Quality of life</li> <li>• Experience and satisfaction with the services.</li> <li>• Functional ability or for those with rapidly progressing conditions, improved, rapid and more coordinated response to provide care and support, including specialist emotional support for the person and their family as their needs and circumstances change.</li> </ul>

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p><b>Neurology</b></p> <p>Patient and voluntary sector representatives have been involved in the development of the specification and procurement for the community neuro services (stroke specific) pathway.</p> <p>There will now be two separate neurology pathways – one is stroke specific and a pilot service for non-stroke patients. This decision was endorsed by three Neuro societies who were also involved in shaping the scoping brief for this work.</p>	<p>Procurement has been completed and the provider for the new stroke specific pathway has been agreed. PAG and voluntary sector representatives were involved in the development of the specification and procurement of the service which has been endorsed by the CCG's Governing Body.</p> <p>By separating into stroke and non-stroke specific pathways, the CCG aims to achieve improved outcomes for patients including improved:</p> <ul style="list-style-type: none"> <li>• Access to services</li> <li>• Quality of life</li> <li>• Experience and satisfaction with the services.</li> <li>• Functional ability.</li> </ul>
<p><b>Cardiology</b></p> <p>Four members of our PAG are involved in the specification development and procurement of cardiology monitoring and diagnostics provision.</p> <p>The project involves shifting ECG, 24 hour ECG and 24 hour BPM (Blood Pressure Monitoring) from hospital to primary care.</p> <p>The procurement has almost come to an end and the new arrangements will be communicated.</p>	<p>The new service will:</p> <ul style="list-style-type: none"> <li>• Enable more GPs to manage their patient in primary care rather than send them to hospital.</li> <li>• Provide an expert diagnostic reporting service.</li> <li>• Implement new models of cardiology diagnostics by increasing capacity, improving access by delivering ECG and BPM investigations within primary care.</li> <li>• Provide more convenience and better outcomes for patients.</li> </ul>
<p><b>Audiology</b></p> <p>Patient representatives and Deaf Access were</p>	<p>There has been a patient representative on the procurement panel. The revised service will be launched in July 2016 and</p>

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p>involved in a review of our current audiology service. This has led to the procurement of new providers.</p>	<p>patients will have the choice of four different providers. Comments from patients were incorporated into the new service specification for the service. An audiology forum with patient representation is being set up. One of the areas they will consider is localising patient information once the services are established.</p>
<p><b>Maternity</b></p> <p><u>Whose Shoes</u> The CCG commissioned a ‘Whose Shoes’ event at the Princess Royal University Hospital in January. This is a co-production tool used to help people work together to improve lives. Fifty people attended including local women (service users), midwives, maternity support workers, doctors, commissioners, receptionists, porters and health visitors. The purpose was to capture information about current maternity experiences and what could be improved. The Bromley Maternity Services Liaison Committee was instrumental in delivering the event and collecting the pledges made by those who attended.</p> <p><u>Service Specification</u> The CCG has agreed with the MSLC a new service specification to support the delivery of our maternity commissioning intentions.</p>	<p><u>Whose Shoes</u> Outcomes of the day included the collection of pledges, from every individual who attended, who committed to do something differently. These included:</p> <ul style="list-style-type: none"> <li>• I will try to make every birth special</li> <li>• I will make sure that every woman feels she had the attention and care she hoped for.</li> <li>• I will always ask how the new father is as well as the new mother.</li> </ul> <p>The MSLC will be taking forward delivery of these pledges as part of its ongoing work plan.</p> <p><u>Service Specification</u> This will include further engagement with women from seldom heard communities or poorer communities who are more at risk of low weight babies and health problems.</p>
<p><b>Diabetes</b></p>	<p>The programme supports people to get back towards a healthier weight and to</p>

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p>Bromley CCG and Local Authority (Public Health) teamed up with other south London boroughs to implement the first wave of a new Type 2 Diabetes Prevention Plan. This has been established following a successful pilot in which 130 Bromley patients attended a one-year lifestyle prevention plan called Healthier You. The programme will be rolled out nationally across the next four years and is a joint commitment from NHS England, Public Health England and Diabetes UK.</p> <p>Under the scheme, people found to be at high risk of diabetes by their GP or at their NHS Health Check will be offered the option of joining the DPP. This will involve attendance at a minimum of 13 sessions over a period of at least nine months.</p>	<p>become more active, to help prevent the development of diabetes.</p> <p>The local pilot proved to be extremely popular with participants – “The programme was a mixture of re-education and support about food and exercise... I feel so much better, 20 times better... when you get good support it really helps and not being pre-diabetic anymore is such a great feeling.’</p>

### **2.1.2 Engagement work ongoing**

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p><b>Development of Integrated Care Networks (ICN)</b></p> <p>A frailty workshop was undertaken with clinical leads, providers and other stakeholders in May. The purpose was to inform the frailty pathway development. Two patient representatives attended.</p>	<p>Members of our PAG attended and provided insight into their experiences. The next step is to set up a frailty pathway patient focus group (with members of our PAG) which will work to support delivery of this pathway.</p>
<p><b>Community Health Services Procurement</b></p> <p>A comprehensive communications and engagement plan has been developed to ensure the CCG undertakes an appropriate level of engagement on the re-procurement of community health services.</p> <p>A survey on experiences of community health</p>	<p>The ICN survey which received 129 responses (see ICN section) also included questions relating to community health services. The outcomes are being considered as part of the procurement programme.</p> <p>Healthwatch is providing a ‘critical friend’ role in ensuring our engagement</p>

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p>services is being promoted through local services and partnerships in order to target people who use these services to find out their views and experiences.</p> <p>The CCG is also commissioning additional specialist support to provide more capacity and expertise in reaching seldom heard and harder to engage groups (for both children and adults) to gather views on their use of community health services and develop/test service models.</p>	<p>approach is robust and comprehensive.</p> <p>A full engagement programme on the different community health services will be taking place over the summer months. The outcomes will inform the service models and procurement.</p>
<p><b>Ophthalmology</b></p> <p>A project to redesign the current eye care pathway is currently underway. The purpose is to have more eye care provided in primary and community care settings.</p> <p>A survey of people in Bromley using these services was undertaken, with 460 people responding. The outcomes of the survey will be used to inform the business case for the eye care pathway business case.</p>	<p>The aim of the redesign of this service is to provide patients with:</p> <ul style="list-style-type: none"> <li>• Better access to care</li> <li>• Services closer to home</li> <li>• Reduced waiting times</li> <li>• Seamless care</li> <li>• Being able to make informed choices about their eye care.</li> </ul> <p>The survey closed on 30 June 2016. Headlines included:</p> <ul style="list-style-type: none"> <li>• 59.94% of respondents who have had eye care in hospital would be happy to receive treatment in a community setting, while just 16.57% said no.</li> <li>• 86.74% rated eye care services in Bromley as either satisfactory, good, or very good</li> </ul>
<p><b>Our Healthier South East London (OHSEL)</b> – Members of our PAG continue to be involved in some of the clinical leadership groups for the</p>	<p>Patient voice and experience is at the heart of the conversations about meeting the challenges in local health services.</p>

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p>priority areas in the programme.</p> <p>One of the key areas of focus at the moment is the work on elective orthopaedic care. We have patient representatives on the Planned Care reference group who are informing and influencing this work. If it is decided that we will need to consult on the proposals, we will work closely with our partners, in particular Healthwatch, to reach those groups more likely to be directly impacted by the proposals (as informed by the equality impact assessment) and who are traditionally harder to engage with such as the physically disabled, young carers, BME and gypsy traveller communities.</p>	<p>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>Information on the orthopaedic centres proposal has been sent to members of the Bromley Communications and Engagement Network which includes Healthwatch, third sector, local authority and providers. The information is being shared more widely so more people in Bromley will be aware of the plans and then engage further with us if we go through a consultation process. There are regular updates on the proposals at the Governing Body meetings held in public, including a public briefing session held at the May meeting.</p>
<p><b>Atrial Fibrillation (AF)</b></p> <p>The CCG will be introducing a number of initiatives to help identify patients with undiagnosed AF.</p> <p>One of our PAG members has supported the working group for this programme and provided a case study which called for increased detection of AF to be a priority for the CCG.</p>	<p>Information leaflets for patients will be developed (tested with our PAG members) to encourage more testing for AF.</p> <p>The aim is to</p> <ul style="list-style-type: none"> <li>• Improve outcomes for patients with undiagnosed AF</li> <li>• Ensure all providers have the right information to deliver this work.</li> <li>• Promote the initiative throughout Bromley to encourage take up of patients.</li> </ul>
<p><b>Integrated Shared Care Record</b></p> <p>Patients have told us that they want more coordinated and joined up care. The CCG is developing the process for integrated shared</p>	<p>A GP educational event about the plans was held in May which included representatives from our PAG. A further meeting was arranged in June with one of our PAG members to respond to</p>

<b>Activities</b>	<b>Planned Outcomes/ Progress</b>
<p>care records to enable patient information to be shared across different parts of the health and social care system. This will be a key enabler for the successful implementation of the integrated care networks.</p>	<p>questions before we embark on the development of specifications and the procurement process.</p> <p>Representatives from our PAG will be closely involved in the development of this programme of work which will also include ensuring there is clear and accessible information for the public on the shared care record, including information on how to opt out.</p>
<p><b>Mental health</b></p> <p>Following an engagement programme on mental health services last year (specifically on IAPT – Improving Access to Psychological Therapies and Mental Health Employment Services), a comprehensive report on outcomes was provided by Healthwatch. We commissioned Healthwatch to do this work. This is informing our review of these services. A focus group will be held in July with members of our PAG and other voluntary sector representatives to discuss and shape the service specification. Two of our PAG members will be involved in the procurement process which will take place in 2017.</p>	<p>Services will be designed and delivered to meet the needs of patients based on outcomes of the engagement process and patient involvement in the development of the specification and procurement.</p>

### **3. Partnership Working**

We engage and involve the public and other stakeholders in our work through a variety of ways. This is critical as it enables us to make decisions which are underpinned by a clear understanding of public views, concerns and aspirations. Knowing what people think about existing health services in Bromley is also vital to helping us improve patient experience in the future.

Over the last six months we have sought views and experiences in the following ways:



- Through our PAG.
- Working closely with Healthwatch Bromley and CLB (which also helps us to gather views from those communities who are harder to reach).
- As part of the OHSEL programme (Clinical Leadership Groups, Planned Care stakeholder reference group, SEL stakeholder reference group etc)
- Public question and answer sessions at each of our Governing Body meetings.
- Maternity Services Liaison Committee (which has a lay chair and lay members).
- Through data collected from our providers. This is presented to the CCG's Quality Assurance Subcommittee.
- Review of complaints from providers.
- Through the Bromley Communications and Engagement network which is chaired by Healthwatch and includes the local authority, third sector and local providers.

We continue to work with our partners and local groups – some more closely depending what we are engaging on. We also hold our local providers to account for how they are involving patients in their own governance, decision-making and quality improvement activities. We do this through our Quality Review Sub Committee which analyses outcomes from provider services in relation to complaints and patient experience.

In addition, we have developed proposals for how we will support GP practices with their practice participation groups. This will enable us to widen our engagement across Bromley and build up networks to help inform developments at practice, integrated care network and borough level.

## **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. The aim is to provide people with information about how they can improve their health, take better care of themselves and support self-care. 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 column we have in the Bromley News shopper (see below).



## **Bromley CCG are supporting Mental Health Awareness Week 2016**

This year's Mental Health Awareness Week is focused on relationships.

Good relationships help us live longer and happier lives with fewer physical and mental health problems. These are the supportive connections we share with friends, family and our community - investing in these relationships is critical to our health and wellbeing.



Dr Atul Arora, Local GP and Clinical Lead for mental health at Bromley Clinical Commissioning Group (CCG), said: "If you're having mental health problems, you're not alone. One in four of us will have problems with our mental health at some time in our lives.

"It can be tempting to check your phone, Facebook messages or even work emails when with family and friends. Try to be present in the moment and there for your loved ones, our relationships matter and can affect our mental health.

Over the last six months our awareness campaigns have included:

- Cancer screening
- Mental health awareness
- Diabetes
- National Heart Month
- Alcohol awareness
- Respiratory self-care (breathe easy)

### **4.1.1 Bromley pharmacy campaign**

The aim of this campaign was to encourage people to use their pharmacist when they start to feel unwell. It ran until the end of March 2016. Local material was adapted from national messaging on the stay well this winter campaign. We received some good feedback from members of the public who saw the campaign on buses and bus shelters. The campaign will be featured in the new Department of Health branding guidelines as a good example of how national messages and images have been adapted for local use.

#### **4.1.2 Health Help Now App Campaign**

The Health Help Now Application was introduced over the winter to give people information on where they needed to go to get the right medical treatment for their condition. This was a south east London wide campaign. It was promoted from December 2015 to the end of March 2016 through a range of channels including newspaper advertising and outdoor media. The campaign has been evaluated and has met all its campaign objectives. In addition:

Of 820 people surveyed through an online survey in south east London, Bromley had the highest return rate, with 171 people feeding back their results:

- Around one third of survey respondents have visited the HHN website since coming into contact with the campaign materials.
- 77% of survey respondents who have not visited the HHN website or app agreed that they would use the service in the future.
- There were 11,004 individual visits to the HHN website, of which 14.43% were repeat visits
- There were 1,149 app downloads, and 3,941 app visits

#### **Summary**

- The campaign delivered on all three campaign objectives, increasing the visibility of the HHN web app and achieving a strong level of website and app interaction from key target audience groups.
- Posters and social media were identified by survey respondents as the most seen communication channels, followed by Out Of Home advertising (public phone boxes).
- Survey respondents were broadly positive towards the campaign materials – key descriptive words were ‘relevant to me’, ‘eye-catching’, ‘informative’, ‘easy-to-understand’, ‘clear message’ and ‘useful’.
- Survey respondents also demonstrated that they had a clear understanding of the main purpose of HHN.
- Survey respondents who recognise the campaign materials are most likely to say that they will think more carefully in the future about where the right place to get care is as a result.

#### **4.2 Publications**

#### **4.2.1 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.

The bulletin is just one of a number of ways in which we ‘close the loop’ when we seek the views of patients and the public. We use it to feedback outcomes from our engagement using a ‘you said’, ‘we did’ approach. We also post feedback on our website, in particular for surveys and feedback directly to PAG members and other individuals who have been directly involved in our work such as procurements, workshops and service redesigns.

#### **4.2.2 Annual Report**

Our annual report and accounts for 2015/16 were published at the beginning of June and will be presented at the Annual General Meeting (AGM) which will take place on Monday 26 September 2016. The report includes information on the CCG’s engagement activity and outcomes that took place during that reporting year. A public summary of the annual report will be produced for the AGM.

### **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.

The Freedom of Information (FOI) Act gives the right to all individuals to request access to information held by the CCG. In line with many other CCGs, a proportion of our FOIs are made by journalists. Over the last year (2015/16) there have been a total of 284 FOI requests compared with 256 for the previous year. Key themes include requests about services we commission, corporate information, finance and prescribing information.

## **5. IT systems for communication and engagement**

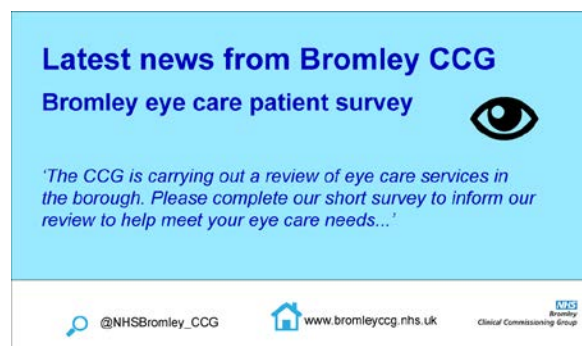
One of the ways we continue to improve how we communicate and engage with the public is through our information technology (IT) systems.

## 5.1 Social Media

Over the last six months, we have increased our social media activity in order to widen the reach and visibility of our work. We use Twitter to promote our activities and opportunities to engage with local people and other stakeholders. As of 4 July 2016, we have 3,046 followers (an increase of over 400 in the last six months) and we follow 209 people and organisations.

Since 1 January 2016, our posts on Twitter have amassed 133,400 impressions. An impression is every time a user or organisation has been exposed to our content on their Twitter feed. This has been achieved by localising content, lifting key messages from our initiatives to gather more interest and joining in with twitter conversations through the use of #hashtags. We also work closely with partner organisations that support our social media activity by retweeting our information which helps it to reach a much wider audience.

We know that messages in images work well on Twitter, and so we have introduced a suite of infographics that we publish, which helps drive interaction with tweets. We have seen recently the impact of this approach. For example by using Twitter to promote our surveys we have seen higher response rates. Our recent eye care survey for example received over 460 responses which is a high given this was an online survey only.



We have also been using social media in order to recruit more PAG members and attract young people to join. Over the last six months a further 18 new members have signed up and we now have 77 registered PAG members.

## 5.2 Website

In May, we introduced Browse-aloud to our website. Browse-aloud is webscreen reader software that is available on every page. It adds speech, reading and translation functions which aim to improve access and participation for people with Dyslexia, low literacy levels,

English as a second language and those with mild visual impairments. Online content can also be read aloud in multiple languages. Since we introduced this software we have:

- Received 2,038 speech requests (how many times someone has asked the system to 'read' the website to them).
- 1,268 Toolbar loads which is how many times people have clicked on the toolbar to change the colour of the screen or the language.

We also post all our campaign information on the website and use web banners to draw attention to this content and encourage people to 'click' onto those pages.



## 6. Planned future engagement activity

Future activity planned with patients and the public (in addition to the ongoing work identified in section 2.1.2) includes:

- The co-production work on transforming emotional wellbeing and CAMHS services. This will involve a new approach to working with children, young people, schools and providers to transform the way these services are provided.
- Testing our plans and commissioning intentions with the public in September. This will include sharing a summary of what has been achieved over the last year, what we have planned for next year and checking we haven't missed anything important.
- Supporting the engagement on the SEL Transforming Care Partnership for people with learning disabilities and autism.
- Further work is being undertaken to review the outcomes of new services we have commissioned over the last few years which patients have influenced. Ensuring

regular patient feedback on satisfaction and outcomes will be considered as part of all new contracts.

## **7. Recommendation**

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