

North and East CCG Patient and public Involvement report



Communications and engagement 18/19

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1) How we involve the patients and the public

Patients are at the heart of everything we do and it's important that they are involved not just in decisions about their care, but also in the decisions that shape the health services delivered locally.

Communicating and engaging with our patients and local people is central to achieving our aims to deliver the health services Greater Nottingham patients' need, within the funding available to us.

During 2018/19, we have enhanced our processes and strengthened our relationships with the local community in order to ensure that we were listening and acting on patient and carer feedback at all stages of the commissioning cycle.

During 2018/19 we have started to work closer than ever before with our partners, in particular our neighbouring CCGs. Our commissioning activity has increasingly been done in partnership with the other CCGs across Greater Nottingham – the area to the South of Nottinghamshire that covers the city, Gedling, Hucknall, Broxtowe and Rushcliffe.

In 2017/18 we launched a joint financial recovery programme with our neighbouring CCGs to address our collective financial challenges. In 2018/19 we aligned more closely, creating a single staffing structure and a Joint Commissioning Committee. Our alignment is referred to as the Greater Nottingham Clinical Commissioning Partnership. This partnership comprises the following organisations:

- NHS Nottingham City CCG
- NHS Nottingham North and East CCG
- NHS Rushcliffe CCG
- NHS Nottingham West CCG.

While the Clinical Commissioning Partnership is not a statutory body, the Joint Commissioning Committee established as part of this partnership has delegated authority from each of its constituent CCG's Governing Bodies for many of the statutory functions of a CCG. This closer alignment of our commissioning activity has meant a closer alignment of our patient and public involvement. Much of the engagement we have done over the last year, and the engagement we will do over the current year and beyond, we will do in partnership across the Greater Nottingham area.



We have an excellent relationship with our local Healthwatch. Healthwatch Nottinghamshire was recently established as a merged organisation comprised of the city and county Healthwatch organisations. In our work as a Clinical Commissioning Partnership in Greater Nottingham and as a partner of the Nottingham and Nottinghamshire ICS we continue to work strategically with Healthwatch, ensuring they are involved in planned for any changes to services. At an operational level we meet regularly with Healthwatch to discuss our commissioning activity and engagement and to ensure that we work in partnership to involve people.

We have good relationships with the Health Overview and Scrutiny arrangements of the City and County Council in Nottingham and Nottinghamshire and have established regular informal meetings to discuss upcoming changes to health services and associated engagement and consultation.

We also strive to engage with hard to reach groups. We work in partnership with HealthWatch, our neighbouring CCGs in Nottinghamshire, community health providers and Nottingham University Hospitals NHS Trust. With these partners, a forum has been established to ensure operational ownership in advancing and mainstreaming equality and to make effective use of resources. The forum has mapped a database of 'seldom heard' groups who are targeted during pieces of engagement work. We also measure all our equalities and diversity data from patient engagement campaigns.

Our local partnerships continue to be a key strength in our engagement. We recognise that we cannot reach every community in our locality without working with others. That is why our approach has retained a real focus on working with local voluntary and community sector (VCS) organisations to help us understand and engage with as wide a range of people as possible.

2) Our processes

Integrating our engagement framework with the wider system

In 2018, we worked hard to ensure our engagement and communications principles and processes were robust enough to face the level of service change we implemented in 18/19 through our Financial Recovery programme.

Nottingham City and Nottinghamshire are also further developing as an Integrated Care System (ICS). This means that all local NHS organisations and Local Authorities will be working together to plan and deliver healthcare for our



populations. ICS's will have more freedom to manage local services and determine how funding should be used.

These developments mean significant changes for how we plan and deliver services. We have recognised that this has implications for the arrangements we have for involving patients and the public. We are currently working with our partners to review the models and frameworks that exist for patient and public engagement across the whole of Nottingham and Nottinghamshire.

In 2018, we implemented an updated and robust Equality, Quality Impact Assessment (EQIA) process across the Greater Nottingham patch. In response to the Financial Recovery Plan, this EQIA process has been invaluable particularly when assessing financial savings schemes for the year 2018/19.

The approach has been to manage communication and public engagement on a scheme-by-scheme basis, with a consistent approach applied each time, starting with a screening process.

The process for determining the scale of communications and engagement work required has been based on the following:

- The **scale** of the change
- The **impact** of the change on patients
- The likely level of controversy

Schemes broadly fall into one of three categories of approach depending on the above factors. These are:

- Informing Communicating the changes to people
- Engaging Targeted engagement with affected people or their representatives
- Consulting Formal consultation with affected groups and the wider public

Commissioners must ensure that arrangements for involvement are fair and proportionate. The Gunning Principles have been applied in assessing the category of involvement. This process has meant that we have a robust engagement approach to our Greater Nottingham financial savings schemes.

Our engagement over the period 2018/19 reflected a number of key priorities.



Financial recovery

Collectively, the Greater Nottingham CCGs had a target for achieving financial significant financial savings in 2018/19. This means that the CCGs are making difficult decisions about what services are commissioned and how they are commissioned. These decisions are underpinned by a financial recovery programme that identifies how savings can be found. As these decisions may impact on the services that patients receive, we have prioritised patient and public engagement to inform these decisions.

Health and care system transformation

Rushcliffe CCG is part of a wider health and care system that includes NHS providers; local authorities and voluntary and community sector organisations. The local health and care system in Nottinghamshire is undergoing large scale change, as are all systems in the country. We have therefore prioritised talking to our population about these changes over 2018/19.

Engaging with seldom heard communities

While we are increasingly commissioning as an aligned Clinical Commissioning Partnership with our neighbouring CCGs and working as part of the broader health and care system across the county, we have continued to prioritise engagement with the seldom heard communities who whilst they may meet in the City of Nottingham, they live across both the city and county of Nottinghamshire.



3) Greater Nottingham Integrated Care System patient and public engagement

Engaging on system transformation

Greater Nottingham Transformation Partnership Events Programme

Background

As a partner of the Greater Nottingham Transformation Partnership we are working with other organisations across Greater Nottingham to transform the way health and care services are provided. This work is about addressing the following challenges:

- Health and wellbeing Life expectancy and healthy life expectancy in parts of the area are low, particularly in the city
- Quality of care We have high mortality rates for people with long-term conditions; people who are frail tend to stay in hospital longer than they need to and we do not identify and treat health conditions early enough
- Affordability We have a significant funding gap that will continue to grow if we don't change how we provide health and social care
- Culture We have not always worked well in delivering change across the whole system, which is needed to address our challenges.

As part of our programme of transformation we have worked with our partners to deliver a programme of engagement over the period of 2017/18 and 2018/19.

Engagement activity

Recognising that people need to be both informed about how health and social care are changing and involved in shaping these changes we have held four public events. This programme has been co-produced with the Greater Nottingham Citizen's Advisory Group (CAG). The CAG is a patient group established to ensure that engagement is carried out to support transformation plans. The CAG co-produced the events programme and took a lead role in running the events themselves, acting as facilitators and Chairs.

Each event involved providing information on how the system was changing and included small group discussions on different elements of health and social care such as self-care and prevention and quality of care. Participants were invited to share their own experiences and to discuss how we can build a health and care system that addresses the current challenges.

Findings



Each event focused on some of the core elements that would be needed in a transformed health and social care system. Some of the key themes from the discussions were:

- While the concept of self-care is broadly supported, there is some scepticism
 that the system has properly defined what this is and people feel that resource
 needs to be provided to support people
- Education is seen as key in prioritising prevention of ill health and most people feel more should be done with children, families and schools
- A sense of a system difficult to navigate comes across regularly in people's experiences of care
- There is a general sense of frustration that information about health and health services is not simple or effective.

What happened next?

As well as the conversations through the events programme, similar engagement has been carried out across the health and care system in Nottinghamshire. Feedback through this engagement has produced consistent themes that are being incorporated into transformation plans. In particular, a Nottinghamshire-wide Clinical Services Strategy has developed a set of core principles that will drive major service change over the coming years. The CCG, as part of the Nottingham and Nottinghamshire ICS, is contributing to developing this conversation through further engagement on this strategy.

4) Governance and assurance information

We work to empower patients to shape services and the care that they receive and this is supported by robust Patient and Public Involvement Governance structures. Over the last year, we have continued to make significant steps to develop a robust approach to communications and engagement and have worked with our patient representatives and stakeholders to develop relationships and deliver communications and engagement activity which has had an impact on both strategy and public perception.

We aim not only to involve as many patients as possible but also to actively seek out the views of those most affected by service change and those hard to reach communities.

We build our engagement approach around understanding patient experience and listening to patients in the environments where they are most comfortable. Our engagement manager regularly participates at local support and community groups.



We have strong governance arrangements which include patients being involved with all aspects of our commissioning decisions.

Patient and Public Involvement Committee

We have a Patient and Public Involvement Committee, which is accountable to the Governing Body as a Committee with delegated responsibility. This committee provides assurance that commissioning decisions made by the CCG have been informed by robust plans for patient, public and service user involvement. It also ensures that patient choice, equality and diversity and tackling health inequalities is central to decision making.

Feeding into this group are:

The PPI QIPP group

The PPI QIPP Group discusses service changes, changes in prescribing, campaigns and opportunities to deliver savings along with improved care. Agenda items may also include service changes and proposals that are being delivered through Greater Nottingham Transformation Partnership. This group meets bi-monthly on the last Tuesday of the month. Some of the issues and engagement that the Cabinet has overseen in 2018/19 include:

- Development of the Primary Care Networks
- Financial Recovery campaign development
- Accountable Care System engagement
- Gluten Free Prescribing consultation,
- Treatment Centre engagement
- Gynaecology Services survey
- Connected Notts
- CCG Alignment and merger
- ICS Update
- Podiatry engagement

Patient Participation Group Forum (PPG Group)

The PPG Group covers any items that are relevant to our local PPGs. The meeting is managed and chaired by a PPG representative in order to ensure that it is relevant to what is happening in practices. The CCG may be invited to present an item to the group and uses these meetings to gain input from and feedback into the PPGs. This group meets bi-monthly, alternating with the QIPP Group on the last Tuesday of the month.



Some of the engagement that our groups have been involved in shaping are:

- Financial recovery
- Healthwatch hub leads information
- Fit for surgery
- Practice updates
- Carers Federation
- Disabled go, Community Health and Wellbeing
- Nottinghamshire
- Dementia care
- Primary Care Network Development
- Whyburn re-procurement

5) Review of patient and public involvement arrangements in Greater Nottingham

Background

How our organisation works is changing as we work in closer alignment with our partners and with our CCG neighbours. We have established a Joint Committee for the Greater Nottingham Clinical Commissioning Partnership, which has delegated authority to carry out many of the functions of our Governing Body.

Nottingham City and Nottinghamshire are also developing as an Integrated Care System (ICS). This means that all local NHS organisations and Local Authorities will be working together to plan and deliver healthcare for our populations. The ICS will have more freedom to manage local services and determine how funding is used.

The Greater Nottingham Clinical Commissioning Partnership is currently undertaking a review of its formal arrangements for patient and public involvement. Each CCG currently has its own model for engagement, including a patient committee that feeds into its Governing Body. The PPI Committee is Nottingham North and East's patient committee. As the CCGs move to greater integration of their commissioning functions, we have recognised a need to review and re-shape our arrangements for patient and public involvement.

A review of these engagement arrangements was launched in 2018, which is supported by an independent research agency and a steering group comprised of patient representatives from each CCG's patient committee, including the People's Council.



Engagement activity

A brief was produced for the review and informed and shaped by the steering group. This brief provided a guide for the independent research carried out. This research involved interviewing key stakeholders and patient representatives across the Greater Nottingham area as well as comparing existing models for engagement within the CCGs and national practice.

A report summarising the findings of the review was produced and presented to the steering group, who are shaping the CCG's response in terms of what arrangements will be established.

Findings

The review has identified the following key points:

- The Joint Commissioning Committee, where most decisions on commissioning activity are made, does not have a formal mechanism for feeding in patient and public voice
- The direction of travel for the Nottingham and Nottinghamshire ICS will be to have one single CCG by April 2020
- While engagement needs to be considered at all levels of the future ICS, the steering group identified its priorities as providing a way to feed patient and public voice into the Joint Commissioning Committee and working with others to design a wider framework for engagement across the whole health and social care system
- Good practice was identified within Greater Nottingham. There is a model established in Mid Nottinghamshire, the other area of Nottinghamshire covered by the ICS, that can be replicated. This would provide a good bridging step to support the Joint Committee until a single CCG was established in April 2020.

What happened next?

The steering group are currently working to establish a Greater Nottingham patient committee that can support the Joint Commissioning Committee until the CCGs across Nottinghamshire formally merge in April 2020. A wider forum event is planned to get input from a broader range of patient representatives and stakeholders on how this group should be formed.



6) Some examples of our 2017/18 engagement activity and the impact of participation Prescribing of gluten free foods

In 2017 a national consultation was held on whether gluten free foods should be available on prescription for people with coeliac disease. The outcome of this consultation was guidance for commissioners that gluten-free prescribing should be restricted to bread and mixes only.



The guidance also advised that commissioners should carry out local consultation to establish the appropriate approach for their own populations.

Across Nottinghamshire as a whole a range of changes had been implemented that had resulted in three different sets of restrictions across the county.

In line with the national guidance, and in recognition of the differences in prescribing approaches locally, the Greater Nottingham CCGs launched a joint consultation exercise in 2018. A six-week consultation was run to gain feedback on the following options:

- Limit prescribing for all patients in Greater Nottingham to four units of long life bread and flour each month
- Stop all gluten-free prescribing, except for children
- Stop all gluten-free prescribing

People were also invited to make alternative proposals.

Engagement activity

We undertook the following activity throughout the consultation:

- A full Equality and Quality Impact Assessment (EQIA) was developed to identify the potential impact of each of the options within the consultation
- A consultation document and other materials were developed
- The consultation approach was approved by the local Health Scrutiny Committees
- Feedback was invited directly from local patient groups, Councillors and MPs
- A series of drop-in events were held to enable options to be explained and discussed
- A survey was available online, through the drop-in events and for completion by telephone.



The impact assessment identified potential impacts relating to deprivation and ability to pay for gluten-free food. As the city has higher levels of deprivation than other areas of Greater Nottingham, four drop-in events were organised in deprived areas of the city.

We also worked with Coeliac UK to ensure that patients with coeliac disease were directly targeted.

A total of 466 responses were received during the consultation. This included:

- 462 direct responses to the survey
- 1 MP enquiry
- A letter from Coeliac UK
- A letter from clinicians representing the Department of Dietetics and Nutrition at Nottingham University Hospitals NHS Trust
- A letter from the British Specialist Nutrition Association Ltd.

Findings

Some of the key concerns articulated in the feedback to the consultation were around access to and affordability of gluten free foods. There was an understandable difference in levels of support for restricting gluten free prescribing between those with colic's disease and the wider population.

What happened next?

Following the consultation, gluten free prescribing was stopped. However, we have committed to review this decision in 12 months' time.

MSK engagement

Background

Musculoskeletal (MSK) services provide assessment and management of problems affecting the bones, muscles and joints such as knee pain, back pain etc.

A single MSK model across Greater Nottingham was proposed for patient consideration, with the following benefits identified:

- Integration across pathways/specialties leading to improved clinical outcomes, improved patient experience, and reduced duplication
- Alignment of provision across the ICS footprint
- Reduced clinical variation across providers
- Reduced contract management burden within CCG
- Opportunity to consider a capitated budget payment mechanism



A proposed model was developed Greater Nottingham clinical leads for MSK with managerial support from the Greater Nottingham planned care team. The model takes into consideration:

- The clinical benefits delivered by integrating associated specialties into a single model
- Learning from the delivery of MSK services locally
- Integration with other Greater Nottingham initiatives and strategies e.g. F12,
 Health Improvement in the Surgical Pathway, Referral Support Service –
 which support the delivery of consistent, evidence based care
- Implementation of the key interventions identified within the NHS England document -Transforming musculoskeletal and orthopaedic elective care services.

To get patient feedback, the Greater Nottingham CCGs launched a joint fourweek engagement exercise in 2018.

Engagement activity

There was a lot of provider and commissioner patient feedback about the service, which formed the basis of the engagement plan but we needed to talk to our patients about the changes proposed.

We undertook the following activity throughout the consultation:

- A full Equality and Quality Impact Assessment (EQIA) was developed to identify the potential impact of the changes
- A survey and other materials were developed
- The engagement approach was approved by the CCG's patient group and local Health Scrutiny Committees
- The survey was distributed electronically through links in the community, including self-care groups, Healthwatch and patient groups. The survey was also shared face to face with members of the public and patients.
- Feedback was invited directly from local patient groups, Councillors and MPs
- The face to face engagement took place at the clinics in the surgeries and after gym sessions with MSK service users. Providers of existing MSK services also promoted the survey with patients. The survey was shared with all practices to enable both direct service users and members of the public to share their feedback, including carers, and those of working age and with disabilities.
- The survey was promoted through the distribution of CCG networks and links with patients and members of the public. Please see details below:



- PPG groups (Patient Participation Groups, across Greater Nottingham CCGs)
- PPI Committee members (across Greater Nottingham CCGs)
- Practices (across Greater Nottingham CCGs)
- Websites (across Greater Nottingham CCGs)
- Links in the community (across Greater Nottingham CCGs)
- Health Forum members (Rushcliffe and NNE CCGs)
- Practice Managers (across Greater Nottingham CCGs)
- Practice /Staff News bulletins (across Greater Nottingham CCGs)
- Healthwatch (across Greater Nottingham CCGs)
- Council members (City and County)

The engagement report is available on the Nottingham West website.

How the Feedback will be used

A total of 207 responses were received. The feedback will be shared with PPI Committee members/groups and to commissioning colleagues. The themes from the responses will provide the intelligence needed to inform and support future planning and transformational plans of how the MSK service may be delivered and look in the future.

Gynaecology services

Background

In August 2018, the Greater Nottingham Clinical Commissioning Partnership commissioned Healthwatch Nottingham and Healthwatch Nottinghamshire to prepare the Community Gynaecology Service Survey and to analyse the results. The aim of this survey was to seek feedback from existing patients and potential future patients of community gynaecology services. This included questions on location, time of clinics and follow up appointments.

The information collected will be used to inform the service specification to procure the Community Gynaecology Service.

In 2016/17 the Community Gynaecology Service saw 1138 patients.

The engagement approach

A survey was created to get the views of women who had used the gynaecology services. The aim of this survey was to find out where this service should be based, clinic days and times and preferences for follow up care.

The Greater Nottingham Clinical Commissioning Partnership distributed the survey electronically and physically at Bramcote Surgery, Nottingham Treatment Centre – Circle and Nottingham City Hospital between 23 August and 12 September and 25 September and 15 October 2018.

The survey was also available online and promoted via web and social media and via CCG bulletins.

Recommendations

The majority of women surveyed would prefer to be seen at the clinics which they already attend. It was also identified that there is a preference to attend appointments during the week (Monday - Friday) in the morning. 73.1% would like a one day service where screening, diagnosis and treatment are completed on the same day. Almost the same amount of women 71% would like all additional procedures booked without the need for another appointment.

Finally face to face follow up appointments booked by the service were the preference for respondents.

- Maintain clinics at existing locations and gather additional responses from Stapleford, Keyworth and Eastwood to verify if these service users prefer these locations.
- Endeavour to have a one day service where women receive screening, diagnostic procedure and treatment all on the same day. Perhaps with women given prior information on length of these appointments.
- Community Gynaecology service should be made available to women
 Monday to Friday preferably morning appointments. Please note this reflected
 a small sample size. A bigger sample may indicate a different result. However
 this survey highlights the lack of demand for a weekend service.
- Provide face to face follow up appointments rather than by telephone.
- Although QMC is currently not a location for the Greater Nottingham Gynaecology service it appears some women would prefer this location.

7) Events

We have an annual campaign and events programme which includes attendance at events like the Arnold Carnival,

gham Deaf Society's

Gedling Show, Hucknall Summer Fair, Healthwatch, Nottingham Deaf Society's Health Event and also attend PPG events, youth councils and school events.

We also hosted out Annual Public meeting at the Nottingham Trent University Conference Centre with the other three CCGs in the Greater Nottingham Clinical Commissioning Partnership which looked back at our year, presented our Annual Accounts and looked at plans for the future.



The engagement team also regularly attends local community meetings and presents on NHS news and engagement at groups like the Hucknall Partnership Group, locality PPG groups, Hucknall Carers, Renew 34 and more.

At these events, we have received feedback about a wide range of issues from primary care access to gynaecology, from gluten free to the development of the ICS. We have also supported the Accountable Care System events as outlined in the Greater Nottingham section.

We are always looking at new ways we can communicate and engage with local people in ways that avoid them having to come to us. One of the areas, we have invested sometime into is social media and we have an active NNE Facebook page as well as the NHS South Notts Facebook account we manage with our colleagues at Nottingham West, Nottingham City and Rushcliffe CCGs.

8) How we reach diverse, potentially excluded and disadvantaged groups

We work in partnership with neighbouring CCGs in south Nottinghamshire including NHS Rushcliffe CCG and NHS Nottingham West, and Nottingham University Hospitals NHS Trust and a forum has been established to ensure operational ownership in advancing and mainstreaming equality and to make effective use of resources. The forum has mapped a database of 'seldom heard' groups who are targeted during pieces of engagement work.

As mentioned earlier, we also try and talk to people where they are or prefer to be so we go out into our communities to reach people via community and self help groups.

The CCG regularly promote engagement opportunities and formal consultation being undertaken via our website, facebook page, through our member database and partner organisations, feedback following the consultation and engagement activity is again promoted through these channels which would include how patient/public views have been considered and decisions made



What we have learned from talking to our population

Over the last year, and on behalf of the Greater Nottingham CCGs, Nottingham City has developed a programme to engage seldom heard communities. The work with new and emerging communities from Eastern Europe and Africa has provided some key insights into issues that exist for specific communities. This has told us that some issues, for example two-way cultural understanding between different communities and primary care, are common among those who we do not traditionally engage with. It has also told us that some issues are quite specific to certain communities.

How to get involved

- Sign up for regular electronic bulletins from the CCG by visiting our website at http://www.nottinghamnortheastccg.nhs.uk and going to the 'Join our Health Forum' page, or call 0115 883 1838. This forum is used to promote vacancies for patient involvement on task and finish groups when services are being looked at for planning, decommissioning or changes being made.
- Contact your GP practice for further details of their patient participation group.

Keep up to date

- Go to www.nottinghamnortheastccg.nhs.uk
- Find us on Facebook: /NHSNNE
- Look out for our news articles in Contacts magazine, which goes to all residents in Gedling Borough