

Walsall Health and Well-being Board April 2013

Walsall Clinical Commissioning Group (CCG) - Update on engagement mechanisms

1 Summary

As we grow into our role as local leaders in the health economy, we recognise the need to build strong relationships with constituent practices, stakeholders, patients, carers, communities and public. Effective communications and engagement are essential to maintain public confidence, protect our reputation, manage expectations and secure popular understanding of, and hopefully support for, major service changes

The CCG has developed a Communications and Involvement strategy and this reflects and supports our commitment to communicating and engaging effectively with the communities we serve as the new local leaders of the NHS.

2 Recommendations

The Health and Wellbeing Board Members are asked to;

- Note the content of the report
- Gain assurance from the strategy and delivery plan that the CCG has mechanisms in place to engage with patients and communities

3 Purpose

To present Health and Wellbeing Board members, with an overview of the CCG's Communications and Involvement Strategy and provide an update against the Communication and Involvement Delivery Plan.

4 Detail

4.1 Strategy Overview

The CCG's Communications and Involvement strategy reflects and supports our commitment to communicating and engaging effectively with the communities we serve as the new local leaders of the NHS.

We are living in a time of real challenge for the NHS and it is important that through the period of transformation and beyond we make sure that we are genuinely a listening organisation. A crucial part of that is offering local people the opportunity to have their say on how their local health services are planned, developed and delivered.

Walsall Clinical Commissioning Group

It is equally, if not more, important that we also do everything we can to encourage and empower them to actively choose more healthy lifestyles.

We already communicate and engage with a wide range of stakeholders through a variety of forums and communications channels, building on the good work done by NHS Walsall. However, in the dynamic and rapidly changing environment in which we are developing, and against a backdrop of significant financial challenge, effective public engagement is more important than ever.

The CCG's Communications and Involvement Strategy will assist us in achieving our objectives by;

- I. Putting patient experience at the heart of what we do, by actively capturing patient feedback and patient stories about the services they have received
- II. Promoting the rights and responsibilities in the NHS Constitution to increase awareness and active use by service users and by our staff
- III. Putting mechanisms in place for the CCG to communicate and engage all stakeholders including strategic partners and diverse groups and communities
- IV. Ensuring arrangements are in place to facilitate appropriate on-going patient and public involvement in CCG decision-making
- V. Creating mechanisms to communicate and engage with constituent practices
- VI. Ensuring systems are in place to convert insights about patient choice in practice consultations into plans and decision-making
- VII. Ensuring the CCG has arrangements for handling concerns and complaints raised with the CCG and actions taken as a result are clearly communicated to the public
- VIII. Communicating a clear vision of the improvements the CCG is seeking to make in the health of the localities, including population health and health inequalities
- IX. Proactively building continuous, meaningful engagement with the public and patients to shape services and improve health:
 - to ensure that everybody who wants to influence the improvement of services feels that they have had an opportunity to engage with us.
 - develop channels so that engagement will be accessible and appropriate for a range of audiences
- X. Raising the profile of the CCG as leader of the Health and Social Care economy
- XI. Promoting Walsall CCG as a local employer of choice.

4.2 Progress against delivery plan

The Communication and Involvement Delivery Plan is attached as Appendix 1 and gives detail of the wider communication and involvement to which the CCG is committed, but listed below are several specific pieces of work that have taken place at community level.

- Walsall CCG has worked closely with its GP members, Patient and Public groups at a locality level using the evidence from the JSNA to formulate its commissioning plans.
- The Engagement Model has been widely consulted on and approved by the Governing Body, this includes regular 'Your Voice' Events and representation at CCG Locality meetings by Patient Representative Groups
- Development Programme in place for Patient Representative Groups
- Commitment from the GP localities that Patients are represented at locality commissioning meetings
- The resource from a successful bid to deliver the C2 approach will provide "pump –priming" to enable the CCG to take the further steps to capitalise on and develop the engagement, already in formative stages, through the work of our partners in Walsall Borough Council. This ownership and contribution from local people would provide the input, ownership and creative solutions needed to generate positive changes to health and in turn impact on aspects of community life that determine them.

Yvette Sheward
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Appendix 1

Communications and Involvement Delivery Plan

Reference	Action	CCG Lead	Deadline	Progress/ Evidence	Desired outcome
1.0 Reputation of CCG					
1.1	Profile/awareness raising events	AG/YS	On-going	Five Your Voice events have been held across the Borough	Enables CCG to share vision, strategy and commissioning intentions with the public
1.2 (see also 8.4)	Public Board Meetings	AG/YS	Commenced June 2012	Governing Body has met in Public since June 2012 Papers on CCG Website	Transparency around CCG decisions
2.0 From Engagement to Relationship					
2.1	Development Programme for Patient Representative Groups(PRGs)	AR/SR	To be completed by September 2013	First cohort completed Feedback very positive second cohort currently taking place	Provides PRG members with skills and knowledge to represent their groups at Locality meetings
2.2	PRG representation at locality meetings	AR/YS/BP	Commence post April 2013	Process agreed by Governing Body and shared and discussed at Your Voice events	Process agreed PRG Reps attending locality meetings and taking part in locality decisions
2.3	Three Lay members selected to CCG Governing Body	AG/SA	To be in post by April 2013	Three lay members appointed to the Governing Body	Three lay member roles to lead on; <ul style="list-style-type: none"> • Patient Experience and

Reference	Action	CCG Lead	Deadline	Progress/ Evidence	Desired outcome
					Quality <ul style="list-style-type: none"> • Service Transformation and redesign • Governance
2.4	Apply for Community Development Support Offer from NHS Midlands and East, Service Transformation Team C2 Connecting Communities	AG/YS	February 2013	Bid accepted and approved Awaiting agreement of funds	A strong desire to impact on health inequalities via community empowerment and belief that residents have the capacity to lead improvement, supported by service providers.
2.5					
a)	Map out existing mechanisms & structures for engagement	YS/SR/AS	January 2013	Mechanisms mapped	Existing mechanisms reviewed & mapped
b)	CCG to agree framework for engagement	YS/AS	December 2012	Framework in place	Engagement and Representation of Patient & Public/Communities
c)	Establish a task and finish group including public and vol.orgs (to include PRG reps and Healthwatch) to oversee development of engagement strategy Task & finish group to determine options for engagement	YS/AS	June 2013	Stakeholder database in progress. Third sector mapping is currently taking place	Stakeholder Engagement Strategy in place
d)	Develop opportunities for engagement through all aspects of the commissioning cycle	PG/AS	March 2013	First session taken place	Patients & Public have input into the Commissioning Cycle
e)	Develop mechanisms for providing information and therefore input on	YS/AS	June 2013	Included as part of the Commissioning Plan	Informed Patient & Public Committees

Reference	Action	CCG Lead	Deadline	Progress/ Evidence	Desired outcome
	commissioning/decommissioning intentions				
f)	Identify board lead for engagement & produce delivery plan	AG/YS/AS	March 2013	Complete	Lay member appointed Clinical lead identified Delivery plan in place
3.0 Communication with Staff					
3.1	Formal consultation with PCT staff function mapped to CCG	SA/YS	Consultation ran from June 2012 to July 2102	Consultation concluded Recruitment process completed	All staff in post Communication and engagement with potential CCG staff
3.2	Recruitment process following formal consultation	AG/SA/YS	All posts recruited to by March 2013	All staff are in post	CCG staffed appropriately
3.3 (see also 5.2)	GP Bulletin - weekly/monthly CCG News e-newsletter to be sent to constituent practices and CCG staff with key messages from the CCG chair	AG/AS	Commence October 2012	News Letter in place from Clinical Chair Quarterly newsletter is in place for CCG staff & member practices	Member Practices and staff updated on a regular basis
3.4	CCG Staff regular Organisation Development Events	YS/AS	Commence February 2013	The first event has taken place, to be organised 6-monthly	An organisation fit for purpose
3.5	Revisit Staff Council	YS/AG	April 2013	First meeting is being held April 2013	Staff reps will have a regular meeting with Senior manager & clinical chair. Two way communication between Governing Body and Staff

Reference	Action	CCG Lead	Deadline	Progress/ Evidence	Desired outcome
3.6 (see also 5.3)	Intranet Design and scope for corporate intranet to include news and views of staff and constituent practices	YS/AS	Commence December 2012 Ongoing updates	Still under development Regularly updated	Intranet is regularly updated with information, news and views of CCG staff & members
4.0 Communicating with Partners					
4.1	Quarterly Board to Board with main healthcare providers	SA/AG	Commence April 2013	Meetings arranged with Walsall Healthcare NHS Trust	Ensures open and regular dialogue between the CCG & provider, each are updated on key areas of work
4.2	Regular meetings between Clinical Chair /AO and LA Exec and provider CEO /Chair	SA/AG	Commence September 2012	In place	Ensures that CCG is kept abreast of any LA and Healthcare Provider/Commissioning issues Promotion of open and honest culture Two way dialogue
4.3	Joint Clinical Forum with both main healthcare providers	AG/PG	Commence August 2012	Meetings organised between CCG and Secondary care and Mental Health Clinicians	Opportunity to discuss service transformation clinician to clinician
4.4	CCG Governing Body members of Health and Wellbeing Board	AG	May 2012	Clinical Chair and the Four GP Locality leads are members of the Health & Well Being Board	CCG working closely with HWB to commission services for the people of Walsall Enhanced reputation as leaders

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					of the health economy
4.5	CCG attendance/representation at key committees	AG/SA	October 2012	CCG Governing Body represented at majority of key committees	Two way dialogue Opportunity to gather insight Ability to manage expectation Ability to resolve issues around patient safety and quality
5.0 Engagement with GPs					
5.1	Consultative Assembly	AG/YS	Commence November 2012	Principles agreed and included in Constitution	Member Practices have the opportunity to be consulted and respond to commissioning decisions
5.2 (also 3.3)	GP Bulletin - weekly/monthly CCG News e-newsletter to be sent to constituent practices and aligned staff with key messages from the CCG chair	AG/AS	Commence October 2012	News Letter in place from Clinical Chair	Member Practices and staff updated on a regular basis
5.3 (also 3.6)	Intranet Design and scope for corporate intranet to include news and views of staff and constituent practices	YS/AS	Commence December 2012 Ongoing updates	Still under development Regularly updated	Intranet is regularly updated with information, news and views of CCG staff & members
6.0 Measuring and Responding to Patient Experience					
Walsall CCG has developed a separate Patient Experience strategy and supporting implementation plan which will be complementary to, and supported by this Communications and Engagement action plan.					
7.0 Equality, Diversity and Inclusion					
Walsall CCG has developed a separate Equality and Diversity strategy and supporting action plan which will be complementary to, and supported by this					

Reference	Action	CCG Lead	Deadline	Progress/ Evidence	Desired outcome
Communications and Engagement action plan.					
8.0 External Communications					
8.1	CCG Website Web address to be identified and ordered Agree a specification for public website Online social networking such as Facebook/Twitter Website to be mobile/smartphone accessible	YS/AS	September 2012	www.walsallccg.nhs.uk live April 2012	Well informed population Enhanced reputation as leader of the health economy Improved confidence in WCCGG from local people
8.2	Media relations: Media training for Governing Body members Release regular proactive media releases Create and manage media cutting service Compile media monitoring report for CCG Governing Body Respond to local media enquiries, ensuring openness and transparency in responses Consider/ advise on media handling of important decisions Identify spokesperson/people for CCG Develop media contact list to include national media On Call Comms Support, if required by CCG Media management of the Health and Wellbeing Board	AG/SA/AS	April 2013 Ongoing	Governing Body members received media training Media cutting service in place Comms team available for media enquires	Communications team will take a proactive stance with media relations and successfully engage with local journalists to promote positive health and wellbeing stories and to ensure correct, balanced and fair reporting of issues. Communications officers at Walsall Council and Walsall CCG work closely together to pro-actively promote the partnership work of both organisations Health and Wellbeing Board and the voluntary sector.

Reference	Action	CCG Lead	Deadline	Progress/ Evidence	Desired outcome
8.3	<p>Branding:</p> <p>Logo to be developed and approved by NHS ID team</p> <p>Govenrign Body signed up to appropriate use of NHS Guidelines</p> <p>Visual brand to be developed to fit with NHS ID</p> <p>Letterheads to be developed</p> <p>Signage guidelines to be developed</p> <p>All staff to use template signatures on emails</p> <p>Stock images to be commissioned and filed</p> <p>Suitable signage at CCG HQ</p>	AG/YS/AS	April 2013	<p>NHS logo and supporting images secured from DH</p> <p>Consultation with staff and Governing body re Branding now agreed .Further visual identity developed for CCG</p>	<p>Managed reputation Enhanced reputation as leader of the health economy</p> <p>Consistency of messages</p> <p>Our identity is important. It affects how people think and feel about the NHS.</p> <p>Our identity is largely shaped by what we do – treating illness and promoting health. But our communications also play an important part in defining who we are.</p> <p>Across all media and materials, our communications need to express and support our NHS values and principles. At a time of change within the NHS, our communications are essential to helping the public and patients navigate a more diverse healthcare system. Through our communications, we also need</p>

Reference	Action	CCG Lead	Deadline	Progress/ Evidence	Desired outcome
					to reassure people that NHS standards are being maintained.
8.4 (see also 1.2)	<p>Board meetings held in public</p> <p>Ensure clinical representation at every CCG public meeting</p> <p>Advertise board meeting dates</p> <p>Prepare media lines ahead of Board meeting (Proactive & Reactive)</p> <p>Escort media to Board meetings</p> <p>Provide Chairman's 'Good News' stories for board</p> <p>Ensure board papers are suitable for public consumption</p>	AG/YS	Commenced June 2012	Board papers available on Internet	Transparency around CCG decisions
8.5	Annual Report & Annual General Meeting	Ag/SA/AS	September 2013	First Annual Report will need to be produced once statutory status is achieved for Walsall CCG, including an AGM held in public	Annual report and Annual General meeting