

<b>Title of Meeting:</b>	<b>Governing Body</b>	<b>Agenda Item: 5.5</b>									
<b>Date of Meeting:</b>	<b>4 October 2018</b>	<table border="1"> <tr> <th align="left" colspan="2">Session (Tick)</th> </tr> <tr> <td><b>Public</b></td> <td align="center">X</td> </tr> <tr> <td><b>Private</b></td> <td></td> </tr> <tr> <td><b>Workshop</b></td> <td></td> </tr> </table>		Session (Tick)		<b>Public</b>	X	<b>Private</b>		<b>Workshop</b>	
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<b>Public</b>	X										
<b>Private</b>											
<b>Workshop</b>											
<b>Paper Title:</b>	<b>Communications and Engagement Update and Work Plan</b>										
<b>Responsible Governing Body Member Lead</b> Joanne Crewe, Director for Quality and Governance Executive Nurse		<b>Report Author and Job Title</b> Rachael Durrett, Communications and Engagement Officer									
<b>Purpose (this paper if for)</b>	<b>Decision</b>	<b>Discussion</b>	<b>Assurance</b>								
			X								
<b>Has the report (or variation of it) been presented to another Committee / Meeting? If yes, state the Committee / Meeting: No</b>											
<p><b>Executive Summary</b></p> <p>The CCG has a number of statutory and regulatory requirements to engage with the public and patients, particularly in the development of services. In addition, sound and sustained engagement and communications helps produce better outcomes, facilitates our relationships across the stakeholder landscape, and is an inherent part of our public service responsibilities.</p> <p>On 23 July 2018 the CCG Senior Management Team (SMT) discussed and agreed the CCG's communications and engagement priorities for the 2018/19 business year.</p> <p>This paper sets out our communications and engagement priorities for 2018/19 which take into account the previous SMT discussion and identified work priorities.</p> <p>The paper will also provide Governing Body with an update of the CCG's communications and engagement activity over the last 6 months..</p>											
<p><b>Recommendations</b></p> <p>The Governing Body is asked to:</p> <ul style="list-style-type: none"> <li>• Discuss and note the CCG's 2018/19 communication and engagement priorities.</li> <li>• Receive for assurance the report of recent CCG communication and engagement activity and ongoing patient and public engagement in line with the CCGs strategic priorities, objectives and statutory responsibilities to engage with the local population.</li> </ul>											
<p><b>Monitoring</b></p> <p>We report on our communications and engagement activity bi-annually to CCG Quality and Governance Committee. The Patient and Public Engagement and Involvement Steering Group also monitor delivery of our engagement responsibilities.</p>											
<b>CCGs Strategic Objectives supported by this paper</b>											
	<b>CCG Strategic Objective</b>	<b>X</b>									
<b>1</b>	Quality, Safety and Continuous Improvement	<b>X</b>									
<b>2</b>	Better Value Healthcare	<b>X</b>									
<b>3</b>	Well Governed and Adaptable Organisation	<b>X</b>									
<b>4</b>	Health and Wellbeing	<b>X</b>									
<b>5</b>	Active and Meaningful Engagement	<b>X</b>									

**CCG Values underpinned in this paper**

CCG Values		X
1	Respect and Dignity	X
2	Commitment to Quality of Care	X
3	Compassion	X
4	Improving Lives	X
5	Working Together for Patients	X
6	Everyone Counts	X

**Does this paper provide evidence of assurance against the Governing Body Assurance Framework?**

YES	X	NO	
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**If yes, please indicate which principle risk and outline**

Principle Risk No	Principle Risk Outline
5-1	Relationships and the expectations of a range of stakeholders and partners or NHS regulators will impact on the CCG's ability to work effectively or engage to maintain a sustainable health economy for local people.

<b>Any statutory / regulatory / legal / NHS Constitution implications</b>	Health and Social Care Act 2012 Equality Act 2010 NHS Constitution CCG Communications and Engagement Strategy Patient and public participation in commissioning health and care: statutory guidance for CCGs and NHS England dated April 2017
<b>Management of Conflicts of Interest</b>	No conflicts of interest have been identified prior to the meeting.
<b>Communication / Public and Patient Engagement</b>	The Patient and Public Involvement Steering Group is responsible for ensuring the Governing Body considers information gathered from stakeholders (including patient views) when making decisions about the commissioning of services.
<b>Financial / resource implications</b>	Related costs sit within the allocated budget.
<b>Outcome of Impact Assessments completed (e.g. Quality IA or Equality)</b>	This paper is based on previous activity and therefore an EIA is not appropriate. Individual EIA screening processes are carried out for specific pieces of work.

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**Communications and Engagement Officer**  
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# Communications and Engagement Update and Work Plan

## 1. Introduction

Harrogate and Rural District CCG (HaRD CCG) has a clear legal duty to engage with patients and the public under the Health and Social Care Act (2012) and there is clear statutory guidance with which we must comply.<sup>1</sup> In addition, successful engagement delivers better outcomes for the people we serve.

The CCG's current communications and engagement strategy is being reviewed and updated to reflect the statutory guidance,<sup>1</sup> the CCG's strategic priorities and operational plan. Whilst there is some evidence of good practice there is more that we could do to ensure that expertise and resource is directed to the right activities, that we are taking a strategic approach and that there is a clear link between statutory requirements, objectives, delivery and outcomes. We also have a committed and shared aspiration to work more effectively as a health care system with our partners and the public.

This paper:

- Provides an update on recent communications and engagement activity.
- Sets out our communications and engagement priorities for the next 12 months.

## 2. Communications and engagement activities April-September 2018

### 2.1 Public and patient engagement

- 2.1.1 Patient Partners: We continue to meet at least quarterly with our Patient Partners to discuss current issues and seek input, advocacy and constructive challenge on our communications and engagement activities. In addition our active members have aligned themselves in small groups to our key work streams for the 2018/19 business year to provide support and capacity to involve and engage with our public. In addition to our plenary meetings we have done focused work with interested partners in the areas of mental health, medicine waste, demand management, extended access and integrated care.
- 2.1.2 Patient and Public Involvement (PPI) Steering Group: We have had one meeting with the PPI Steering Group and received their endorsement of our approach to addressing gaps we identified in our self-assessment of our delivery against the NHSE guidance to CCGs on Public and Patient Engagement.<sup>2</sup>
- 2.1.3 HaRD NET: We have refreshed HaRD NET. This group was established in 2012/13 when the CCG came into existence and provides an opportunity for people with an interest in healthcare in Harrogate and Rural District to remain connected to what we do. We have cleansed our database of members, consistent with GDPR requirements, and now have 125 interested members. We will use this group as a 'virtual network' of interested individuals to promote campaigns and engagement opportunities.
- 2.1.4 Additional direct engagement:
- Extended Access to Primary Care – In April this year we ran a survey of patients and primary care providers. Commissioning colleagues are developing a report on the findings which we will publish on our website.
  - Mental Health Summit – we supported a county-wide Mental Health Summit which took place on 30 May. This summit brought together people with an interest in

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<sup>1</sup> <https://www.england.nhs.uk/publication/patient-and-public-participation-in-commissioning-health-and-care-statutory-guidance-for-ccgs-and-nhs-england/>.

<sup>2</sup> <https://www.england.nhs.uk/publication/patient-and-public-participation-in-commissioning-health-and-care-statutory-guidance-for-ccgs-and-nhs-england/>.

mental health services including service users and their carers, advocates, service providers and policy makers to invigorate the discussion on future improvement for mental health services across the health and care landscape.

- Adult autism and adult attention deficit disorder – in partnership with Scarborough and Ryedale CCG and North Yorkshire County Council (NYCC) we delivered an engagement event to support development of a new adult autism and attention deficit disorder diagnostic service on 21 August.
- Nidderdale Show – colleagues attended the Nidderdale Show on 24 September to promote CCG work on medicine waste, self-care and winter preparedness as well as discuss local healthcare issues with members of the public.
- Flu clinics – Dedicated resource has been brought into the medicine management team on a short term basis to support the medicine waste campaign which is part of the CCG approved medicine management invest to save business case. This has enabled focused outreach on medicine waste, sensible use of NHS resources and complimentary work on self-care. As part of this work there is a programme in place to attend flu clinics and patient partner groups in GPs across HaRD to promote behaviour change.

## 2.2 Campaign work

2.2.1 Mental health service transformation: there has been significant work to support the redesign of mental health services for adults and older people. This has included a digital and paper survey that was distributed widely electronically and also directly to individuals at Tees, Esk and Wear Valley NHS Trust (TEWV) facilities in the district as well as Springboard the day service centre of the Harrogate Homeless Project. We received nearly 140 responses to the survey.

2.2.2 Medicine waste and self-care: as already mentioned, dedicated resource has been made available to support the medicine waste and self-care campaigns. We have developed a comprehensive campaign strategy which is targeted to help us achieve our organisational cost reduction ambitions through encouraging behavior change, promoting self-care and reduced prescribing of medicines for common ailments which are available over the counter.

2.2.3 Winter issues: NHSE has developed a new winter campaign which launched on 1 October. Building on the success of the 'stay well this winter' brand of the last few years the new campaign hinges around 'help us help you'. Our local activities will be designed to mirror the national campaign and we will also work collectively with our local partners, including NYCC, Harrogate and District NHS Foundation Trust (HDFT), Harrogate Borough Council and Harrogate and Rippon Community and Volunteer Services (H&RCVS) to ensure alignment across our activities on winter issues.

## 2.3 Media and press

2.3.1 Proactive media: Proactive media during the last six months has included:

- A media release welcoming the funding allocation for perinatal mental health in May, which receive positive pick up regionally.
- An interview with Amanda Bloor and Colin Martin (Chief Executive, TEWV) on the North Yorkshire Mental Health and Learning Disability Strategic Partnership for



HSJ journal which led to an article.

- An article in Clinical Pharmacist about the safer prescribing work done in partnership between the medicine management team and Yorkshire & Humber Academic Health Science Network Improvement Academy.

2.3.2 Reactive media: We have received on average four media enquiries a month. There has been no clear theme to these, although there has been some active campaigning by Diabetes UK on the adoption of flash glucose monitoring technology.

#### 2.4 Internal audit – stakeholder engagement

An internal audit of our stakeholder engagement function took place this summer. We have not yet received the results of this audit which will be reported to Governing Body's audit committee and its recommendations monitored through the CCG's SMT meetings regularly.

#### 2.5 Staff survey

The annual staff survey will take place from 8 October through 30 November and results are expected early in 2019. We will update Governing Body on the results of the survey once they have been received.

### 3. **Identified communications and engagement priorities for the next 12 months**

3.1 SMT discussed communications and engagement priorities in July 2018. In that discussion they:

- Endorsed the proposal that the CCG develop a new Patient Involvement and Engagement Strategy to replace the existing Communications and Engagement Strategy 16/17. The new strategy will be fully aligned to guidance issued in April 2017<sup>3</sup> and will be developed in partnership with the HaRD Patient and Public Engagement and Involvement Steering Group. *This work will take place this business year.*
- Identified the priority projects for communications and engagement resource support:
  - Mental health services for adults and older people transformation. *This work has started and is ongoing.*
  - Integrated care: this includes 'Your community, your care' integrated community care work and urgent care. *This work has started and is ongoing.*
  - Medicine Waste. *This work has started and is ongoing.*
  - Winter communications (consistent with the national plan). *This work is in the planning stage and will be starting imminently (we are still waiting for materials to be issued from the national campaign).*
  - Self-care. *This work has started and is ongoing.*
- Acknowledged a number of work streams which need some communications and engagement input. These change over time but currently include the aligned incentives contract, Yorkshire Ambulance Service non-urgent patient transport service refresh and future provision of hyper acute stroke services for HaRD patients. These projects which need short term communications and engagement support will be captured in business as usual.

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<sup>3</sup> <https://www.england.nhs.uk/publication/patient-and-public-participation-in-commissioning-health-and-care-statutory-guidance-for-ccgs-and-nhs-england/>.

- Agreed that the website has inherent limitations but any significant changes will be considered again in early 2019.
- Endorsed integration of communications and engagement templates into the project management process. *This work will happen this calendar year.*
- Agreed that we should make better use of communications and engagement evaluation at a corporate level through the implementation of a dashboard and better discipline about analysing and publishing the results of public and patient engagement where this is appropriate. *This work will happen this calendar year.*
- Requested a coherent public facing CCG ‘narrative’ which sets out our story. This is something we would be able to deploy in various ways e.g. our website, any reports, in presentations etc. *This work will happen this calendar year.*

#### **4. Recommendations**

Governing Body is asked to:

- Receive and note the recent CCG communications and engagement activities.
- Be assured that the CCG is meeting its statutory and regulatory requirements.
- Note the CCG engagement priorities for 2018/19.