



Public Engagement Strategy

2013-2015

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Our engagement commitment

We are committed to responsive, open and transparent engagement and putting the views of patients at the heart of everything we do. Through involving and engaging the public we will be better able to commission high quality services that meet the health needs of our local population. Effective engagement will not only help us improve health outcomes, it will also help us to make the best use of public money.

We know that effective engagement is not always easy; it can be challenging and not everyone will agree on difficult choices that need to be made. However, engaging well will ensure that service change options and financial implications are clearly communicated and community views are sought, acknowledged, valued and responded to in the decision making process.

Our public engagement charter sets out our engagement commitment.

1. Introduction

NHS Lewisham Clinical Commissioning Group (CCG) is responsible for improving health and ensuring the best care is available for our local population. To achieve this we need to work with patients, carers, and local people, voluntary and community groups, Healthwatch Lewisham and other partners.

The publication of the Francis Report in 2013 into the failings at NHS Mid Staffordshire Hospital clearly illustrates the importance of listening to the experiences of patients and their families and how failings could have been avoided if views had been listened to and then acted upon. It shows how critical it is to act quickly if concerns are raised consistently around poor patient experience and outcomes.

Our CCG constitution sets out our commitment to public and patient engagement;

“In the planning, development and consideration of proposals for changes and decisions affecting the operation of commissioning arrangements.”

This strategy sets out how we plan to deliver this commitment and help achieve a proactive culture of engagement within the CCG in order to deliver the Government’s principle of “no decision about me, without me”.

In order to embed engagement activity in the work of the CCG we;

- Have established a Public Engagement Group, chaired by our Governing Body lay representative for public and patient engagement. The Group meets bi-monthly and membership includes our Clinical Director lead for public engagement, representatives from the local authority, health provider organisations, Healthwatch Lewisham and other partner organisations. This group reports to the Strategy & Development Committee and will be responsible for overseeing and providing assurances that the CCGs delivers on its programme.
- Will establish a range of ways in which local people can get involved in influencing and informing local health services.
- Will engage with patients via Healthwatch, the voluntary sector and Lewisham Council networks and through other approaches such as social media and online feedback.
- Will develop a public engagement report summarising our engagement and public and patient feedback, ensuring that it reaches our Governing Body.
- Will feed data collected from engagement into the For Learning and Action Group (FLAG), which oversees clinical quality and patient outcomes.
- Will develop a process with frontline GP practice staff and our commissioned services to ensure that patient feedback reaches the CCG and informs commissioning decisions.

Strong and effective public engagement will help us to achieve our vision for better health and best care. It will enable us to make real and sustainable improvements in the health and wellbeing of people in Lewisham by listening to and involving our local communities in our commissioning plans and developing and improving health services.

The Health and Social Care Act 2012 sets out a new vision for the health service in England. This includes;

- Setting up a Health and Wellbeing board in every local authority.
- The establishment of clinical commissioning groups.
- Changes to the way public health services are delivered.
- Increased patient and public engagement through independent HealthWatch groups.

The NHS Outcomes Framework of 2012 concentrates on five key outcomes to be achieved. These are:

- Helping people to recover from episodes of ill health or following injury
- Ensuring people have a positive experience of care
- Treating and caring for people in a safe environment and protecting them from avoidable harm
- Preventing people from dying prematurely
- Enhancing the quality of life for people with long term conditions

These outcomes can only be achieved by working together with patients, the public, carers and all of those involved in the planning, commissioning and delivery of healthcare.

2. Our vision: better health, best care, best value for Lewisham people

Our vision for the people of Lewisham is to ensure that in partnership with them we commission high quality services that meet their health needs and which will help improve health outcomes.

Our values;

- **Work in partnership** with other stakeholders and organisations.
- **Be responsive** so that the views of the public are reflected in key decisions.
- **Demonstrate integrity and honesty** by having open and transparent engagement.
- **Take responsibility** by providing leadership in the local health economy.

This approach will help us to deliver our strategic aims for Lewisham, to:

- Enable Lewisham residents to live healthy lives, support them to make healthy choices and reduce health inequalities.
- Support those with long term conditions to have greater choice in managing their conditions.
- Ensure the most frail and vulnerable in our communities get the care they need.

3. Delivering effective engagement

3.1 Best practice

In order to deliver effective engagement to meet our organisational objectives and create a culture of involvement which runs through everything we do, we will improve the way we engage and involve local people and organisations in our work.

There are many benefits from good public engagement which include the following:

- Information gathered from patient experiences will help to improve local health services.

- We can make better commissioning decisions when staff have a clear understanding of patients' experiences of local health services. We support experience-led design.
- Patients who are well-informed about services and involved in decision making will be better able to manage their own health and happier with the quality of the services that they are receiving.
- Communities will be empowered, their skills fully recognised and deployed, with leaders of patient groups and community partners all helping to lead change.
- Improved relationships will help us to avoid challenges and enable us to work together to support change across the community.

Our engagement activity needs to be done in an organised and systematic way which demonstrates how the involvement and views of local people have had an impact on the decisions we make. We need to work with local partners to ensure we have in place effective techniques which will enable us to gather feedback about our commissioned services and respond to that feedback. We shall be able to demonstrate how listening has led to change in planning and delivery.

3.2 Voice of the people

Lewisham CCG will build on its extensive knowledge of local communities, from the experience of practices and clinical staff across the borough, and on the foundations of the work already done by our partners. We will use this knowledge and information to develop further our communication and engagement strategies so that we continually improve our capacity to listen and respond.

Figure 1 summarises the dynamics of these groups that represent the voice of the patient and some of the contexts in which it will be heard and acted upon.

Figure 1



3.3 Commissioning cycle

As a commissioning organisation responsible for planning, monitoring and buying the health services our local residents need, it is essential that we proactively engage with them in a systematic way to help inform our commissioning decisions.

Deciding what services are needed to meet local health needs and reviewing what is currently provided through to contracting for new services and monitoring service quality is all part of an annual cycle known as the **Commissioning Cycle**. This is a continuous process so our engagement must run throughout it and inform it at every step.

4. Our public engagement charter

NHS Lewisham CCG will:

1. Listen to people and ensure in every way possible that public views are heard and acted upon.
2. Involve the public early in developing our strategic plans and how we plan to deliver improvements in local services. .
3. Involve the public early in our decision making about how we commission new services, and redesign them.
4. Demonstrate what impact the public has had on the decisions we make.
5. Always feedback to people who have worked with us.
6. Use the information provided to ensure that we improve the quality of our services, support equality and identify inequalities in access to healthcare.
7. Be honest about when we are engaging, when we are consulting and when we are providing information.
8. Support the involvement of patients in decisions about their care.
9. Make sure that everyone who works with us will recognise and promote the value of involving the public.
10. Make sure that all the organisations that we commission services from have effective public engagement and systems in place to gather patient experience data.
11. Work closely with Healthwatch Lewisham, the independent organisation responsible for representing the views of local residents.
12. Meet all our legal and statutory duties in regard to effective engagement.
13. Ensure that all our feedback documents and responses collected from our work with the public complies with the Data Protection Act and our Information Governance policies.

5. Our 6 step plan to public engagement

1. Create a dialogue with all our communities

- Use knowledge of the local population through mapping and Equality Impact Assessments (EIA) to identify less-heard groups or communities in order to promote engagement.
- Use knowledge of the local population through mapping and EIAs to identify key stakeholder groups in order to create opportunities for dialogue and partnership working.
- Encourage and support both geographical and communities of interest to be part of health planning.
- Engage in a variety of open and creative ways, seeking out and listening to disadvantaged groups. Targeted engagement will be delivered to ensure the inclusion of the nine protected characteristic groups set out in the *Equality Act 2010. Additional effort will also be made to attract participation from 'health inclusion' groups, as defined by the *Social Care Task Force 2010.
- Support GP practices in engagement at practice level, widening participation.
- With all our partners across the Local Strategic Partnership and the Health & Wellbeing Board to ensure we are consistent in our approach to engaging with the wider population and that we share resources to ensure economies of scale.
- Use feedback to monitor quality, support equality and identify inequalities in access to healthcare.

2. Support involvement in commissioned services and programmes

- Make engagement part of all programmes
- Use feedback to inform how we plan and commission services.
- Submit twice yearly reports to the Governing Body on responsiveness
- Ensure that reports through the CCG Governance Structure on service change proposals/business cases demonstrate what engagement has taken place, what further plans are in place, and the impact this has had on commissioning plans.

3. Engage the public in setting organisational strategy and priorities

- Maintain continuous dialogue with the public to ensure that the local population is increasingly aware of the financial challenges and opportunities facing the NHS, to encourage their participation in making sound decisions for improving local healthcare services.
- Encourage Lewisham residents to participate in decisions about improving local healthcare services and develop innovative ideas that may provide new solutions to existing challenges.
- Maintain continuous dialogue with the public to ensure that the local population is aware of service developments and how it can influence healthcare. We expect to have formal and informal routes to ensure that a wide range of people and groups influence the CCGs strategic priorities.

4. Acting upon what patients say

- Develop our vision and appoint a board lead/clinical champion, and recognise individual involvement in the CCG strategy and other relevant documents.
- Begin developing proposals to enable shared decision-making in primary, secondary and community care.
- Reflect individual patient involvement in commissioning intentions.
- Promote supportive commissioning; we will engage the third sector to provide self-management support.
- Consider how patient feedback at a practice level could be used to inform commissioning.
- Promote the spread of information to support healthy choices.
- Use the community development approach to build on the strengths of communities and enable them to shape their environments.
- Ensure the introduction of NHS Guidance 'Transforming Participation' enables individual patient voices to be clinically heard, and used to develop individual care plans

in 2014/15

5. Provide assurance and public accountability

- Develop clear structures for engagement in the CCG, including annual engagement plans and priorities.
- Identify resources for a variety of engagement methods, including new mechanisms and social media.
- Embed patient and public engagement and patient experience in provider contracts, ensuring that data captured is utilised in commissioning services.
- Ensure that the influence of the public, including patients can be demonstrated at all key levels within the CCG governance structure.
- Support the role of the lay member with lead responsibility for patient and public engagement.
- Collect and use feedback from a variety of sources to act as an 'RAG' alert for services where there are causes for concern.

6. Monitoring and evaluation

We will evaluate our engagement activity in a number of ways:

- Monitor delivery against targets in our annual action plans.
- Maintain and develop the CCG priorities that form part of the 'Plan on a Page' to reflect the public engagement of our work strands and highlight any gaps.
- Monitor against targets built into programmes.
- Ensure that our Public Engagement Group includes members of the public, and representatives from the third sector and from other organisations, who will be able to challenge the CCG as 'critical friends'.
- Develop a Public Reference Group (such as a Patient Council or Patient Network) to work alongside the Public Engagement Group and galvanise the CCG into keeping patient and public involvement at its heart.
- Develop mechanisms that capture the effectiveness of our public engagement activities.

6. Getting involved

You can help us to improve health in Lewisham by:

- Giving us your views on local health services in Lewisham. What has your experience been? What has gone well and what could be improved?
- Making your views known through NHS Choices (www.nhs.uk/Pages/HomePage.aspx), Patient Opinion (www.patientopinion.org.uk) and I Want Great Care (www.iwantgreatcare.org).
- Giving us some of your time. You can do this either through your GP's patient participation group, joining one of our groups, participating in our meetings and events or by reading some of our materials and giving your views. Time banks (www.rgtb.org.uk) and other local voluntary groups (www.valewisham.info) are also open to you.
- Joining our Patient Council or our public involvement database.
- Telling Healthwatch Lewisham about your experiences of local services. Healthwatch is independent and is there to ensure that local people's views are heard in order to improve local services. We meet regularly with Healthwatch to hear the views that they have received from local people.
- Follow us on twitter @nhslewishamccg to keep up to date with our plans.
- Comment via our website at www.lewishamccg.nhs.uk
- Email us on lewccg.enquiry@nhs.net
- Call us on 020 3049 3204.
- If you are part of a local community group and would like us to visit you to find out about your views on local services, please let us know on 020 3049 3204.

*Equality Act 2010 - The Equality Act 2010 features a public sector Equality Duty (PSED), which includes a general duty that requires public bodies, including NHS organisations, to pay due regard to the need to eliminate discrimination, harassment and victimisation for people with nine protected characteristics; advance equality of opportunity; and foster good relations, when setting out their policies and carrying out their functions.

**Inclusion health groups include people who are homeless, people who are long-term unemployed and people living in poverty. The Health and Social Care Act 2012 requires NHS organisations to take into account the duty to reduce inequalities between patients with respect to their ability to access health services, and to further reduce inequalities between patients with respect to the outcomes achieved for them by the provision of health services. In following this duty, NHS organisations can focus on “Inclusion Health” groups as defined in the publication from the Social Care Task Force and Department of Health “Inclusion health: evidence pack”, March 2010).