

BNSSG CCG Governing Body Meeting

Date: Tuesday 7th January 2020

Time: 1.30pm

Location: The Vassall Centre, Gill Avenue, Downend, Bristol, BS16 2QQ

Agenda number: 10.4

Update from Patient and Public Involvement Forum January 2020

Report Author: Deborah El-Sayed

Report Sponsor: Sarah Talbot-Williams

1. Purpose

This report provides the Governing Body with an update on the Patient and Public involvement activities including the notes of the Patient and Public Involvement Forum (PPIF) as a sub-committee of the Governing Body.

The minutes of the PPIF held on 26th November 2019, have now been certified by committee members and are attached in Annex 1. The next PPIF meeting will be held on January 21st 2020.

2. Summary of engagement activities and progress

The focus of our engagement activities reflect our commitments to patients and the public across Bristol, North Somerset and South Gloucestershire:

- To listen with care to the needs and concerns of our citizens
- To ensure our engagement reflects the depth and breadth of our whole population
- To take the insights from our work and use them to improve what we do
- To continuously strive to design our services throughout the commissioning cycle in partnership with the communities we serve

The areas set out below give key highlights for the areas of engagement work in progress:

2.1 Healthy Weston:

- The Insights and Engagement team and PMO teams for Healthy Weston delivered a “Lunch and Learn” session on 4th December 2019, where we shared key learnings from the consultation process.

2.2 BNSSG Mental Health:

- We are continuing to build on the insights and outputs from engagement with service users conducted earlier in the year (e.g. Mental Health Strategy, Mental Health Service User review).
- Specifically we will be supporting with ongoing service reviews, upcoming community mental health pilots, and the Bristol Mental Health learning event.
- Following on from experienced based insight work with people with complex mental health needs conducted in 2019, the Insights and Engagement team have been nominated for a Golden Key ‘Great Practice Award’.

2.3 Citizens’ Insights:

- The Citizens’ Panel wave 4 has now closed with a response rate of 46% (consistent with previous waves). Results have been shared across key system stakeholders, and are available on the Healthier Together website.
- A draft Citizens’ Insights Strategy for 2020/21 has been developed and shared with key stakeholders.
- We will be responding to an opportunity from NHSE/I to bid for additional funds to support further development of our Citizens’ Insights Strategy and the roll-out of more innovative research methods with the Citizens’ Panel.
- The Insights and Engagement team will also be providing mentoring and support to other CCGs and STPs to help them develop and deliver their own regional Citizens’ Panels.



2.4 Community Services Mobilisation:

- We are continuing to working closely with the Project Management team and Sirona to ensure that there is effective communications and engagement with service users, staff and key stakeholders during the mobilisation phase of this project.

2.5 Patient and Public Involvement Policy:

- The PPI policy engagement period finished on 13th December with a total of N=29 responses collated from survey responses, written responses and verbal responses (collated via meetings and one-on-one discussions).
- The working group will meet later in January to review feedback received through the public engagement and make appropriate revisions and changes to the policy. Work on the associated toolkits and resources continues to ensure that the policy can be translated into practical support for individuals planning patient and public involvement activities. The final PPI Policy is scheduled to be reviewed by the BNSSG PPIF in March 2020, and by the Governing Body in April or May 2020.

2.6 Primary Care Strategy:

- The Insights and Engagement team are working on the Primary Care Access Review, with the purpose of the research to understand local needs in regards to access needs and attitudes towards enhanced access to GP appointments.
- The public engagement phase is currently live and is planned to remain open until the end of January 2020. As of the 30th December the online and paper-based survey has received 1,382 responses.
- In early January 2020, we will continue to work with GP practices to promote the campaign and will run a series of workshop sessions to ensure that key insights can be integrated into the final requirements and specification to deliver Improved Access in Primary Care.

2.7 Urgent Care:

- Work is now underway on a test and learn pilot of using insight-led communications as part of our overall Winter Resilience Communications activity for 2019/2020.
- The pilot insight-led communications activity will go live at the end of January 2020 as part of the broader Winter Communications activity.
- Evaluation criteria has been designed, with baseline survey in both 'test' and 'control' areas to understand current attitudes towards urgent care; which will be aligned with key stakeholders to ensure there are agreed action standards to measure the impact of this pilot activity.

2.8 Frailty:

- Public engagement has been undertaken with key groups within the community to align on the Frailty model of care and proposed outcome measures. Groups have been identified based on the Equality Impact Assessment, as well as by using the new PHM dataset to ensure that we are using data effectively to identify those who should be a key focus for engagement.
- Key learnings and insights from the public engagement were delivered to the Frailty Programme Board in December.

2.9 Stroke:

- The Insights and Engagement Team are supporting the Stroke project team to scope and plan out a public engagement strategy for the upcoming Stroke services review.

3. Financial resource implications

The activities highlighted unless otherwise stated are currently delivered either through existing programme budgets or existing directorate budget.

4. Legal implications

No specific legal issues

5. Risk implications

The activities highlighted all share a risk of not representing views effectively and people not being aware of the opportunity to engage. The mitigation for these risks lies in the broad range of channels and evolving responsive nature of the work.

6. Implications for health inequalities

The activities highlighted are designed explicitly to support the CCG aims to reduce health inequalities by understanding the population we serve as deeply as possible. Engagement and insights will help us to shape services that reflect a focus on areas where there are health inequalities. This is in conjunction with other core programmes such as BI, Quality and Patient Experience and the emerging population health developments will help us to make decisions that target the reduction of health inequalities

7. Implications for equalities (Black and Other Minority Ethnic/Disability/Age Issues)

The activities highlighted are designed to support and contribute to the delivery of high quality equalities impact assessments, across all key characteristics.

8. Implications for Public Involvement

The activities highlighted are setting out the public involvement activities in progress the list of priorities is considered by the PPIF with members assuring the approach, direction and providing independent views on whether we are engaging appropriately.

9. Annex 1 – Minutes of PPIF 26th November 2019

Patient and Public Involvement Forum

Minutes of the meeting held on Tuesday 26th November 2019 at 2.30pm in Meeting Room 2, Clevedon Town Council, 44 Old Street, Clevedon, BS21 6BU

Minutes

Core Membership		
Sarah Talbot-Williams (Chair)	Independent Lay Member, Patient and Public Engagement, BNSSG CCG	ST-W
Colin Bradbury	Area Director, North Somerset, BNSSG CCG	CB
Alex Ward-Booth	Head of Insights and Engagement, BNSSG CCG	AW-B
Margaret Slucutt	Chair, Patient and Public Involvement Forum, South Gloucestershire	MS
Monira Chowdhury	Chair, Patient and Public Involvement Forum, Bristol	MC
Sue Stone	Chair, Patient and Public Involvement Forum, North Somerset	SS
Tom Renhard	CEO, Independent Mental Health Network	TR
Vicky Marriott	Area Manager BNSSG, Healthwatch	VM
Marie Davies	Senior Manager, Quality, BNSSG CCG	MD
In Attendance		
Mary Adams	Partnerships and Engagement Manager (North Somerset) BNSSG CCG	MA
Louise Fowler	Partnerships and Engagement Manager (South Gloucestershire) BNSSG CCG	LF
Abi Galley	Administrative Assistant, North Somerset Area Team, BNSSG CCG	AG
Amanda Smith (Note taker)	Executive PA to Director of Transformation, BNSSG CCG	AS
Apologies		
Deborah El-Sayed	Director of Transformation, BNSSG CCG	DE-S
Dave Jarrett	Area Director, South Gloucestershire, BNSSG CCG	DJ
Justine Rawlings	Area Director, Bristol, BNSSG CCG	JR
Michelle Smith	Associate Director of Communications, BNSSG CCG	MS
Ben Carlson-Davies	Insight & Campaigns Manager, BNSSG CCG	BC-D
Sharon Woma	Inclusion Coordinator	SW
Simon Moss	Insight and Engagement Assistant, BNSSG CCG	SM
Lindsay Gee	Head of Locality Planning (South Gloucestershire), BNSSG CCG	LG
Alison Bolam	GP Clinical Commissioning Area Lead (Bristol), BNSSG CCG	AB
Rachael Kenyon	GP Clinical Commissioning Area Lead - North Somerset	RK
Sue Jaques	Commissioning Manager, South Gloucestershire Council	SJ
Alun Davies	Engagement Manager, Bristol Sight Loss Council	AD
Amjid Ali	Bristol Muslim Strategic Leadership Group	AA
Paul Lucock	Voluntary Action North Somerset	PL
Joanne Stokes	Linkage Network	JS

Geraldine Summers	Planning & Development Manager, Bristol City Council	GS
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	Item	Action owner
01	<p>Welcome</p> <p>S.T-W welcomed all attendees to the meeting and introductions were made.</p> <p><u>Apologies</u></p> <p>All formal apologies are noted in the table above and it was recognised that the meeting was quorate.</p> <p><u>Declarations of Interest</u></p> <p>A matrix of all Declarations of Interest will be circulated once the Membership for the group has been updated.</p> <p>The following new Declarations of Interests were noted:</p> <ul style="list-style-type: none"> • ST-W – Vice-Chair - Together for Short Lives • TR – Trustee - Upper Horfield Community Trust <p>All previous declarations of interest have been duly noted and details are outlined within the minutes for each meeting.</p>	
02	<p>Minutes of Previous Meeting</p> <p>The minutes of the meeting held on Wednesday 23rd October 2019 were reviewed and the following amendments noted:</p> <p><i>Page 8, North Somerset PPIF Feedback – should read “Sue Stone (Voluntary Action North Somerset) was welcomed as the new Chair and Healthwatch volunteer</i></p> <p>Following this update, the minutes were agreed as a true and correct record.</p> <p><u>Update to Actions</u></p> <p>The updated Action Log was reviewed. An updated copy is attached for information.</p> <p><u>Key Decisions Taken Outside of the PPI Forum</u></p> <p>No key decisions outside of the PPI Forum have been taken on this occasion.</p>	Attached
03	<p>Area Reports</p>	

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	<p>It was recognised that as this PPIF met two months running this autumn, the area PPIFs hadn't had a meeting in between the two meetings so there wasn't an update from each.</p> <p>Healthwatch BNSSG</p> <p><u>Introductions to new arrangements</u></p> <p>ST-W welcomed Vicky Marriott, Healthwatch's Area Manager who provided the following update to members about the new Healthwatch structure:</p> <ul style="list-style-type: none"> • Mission – by offering all people of BNSSG a strong voice, Healthwatch will improve the quality of local health and social care • Values: inclusive, transparent, non-judgemental, independent, having integrity, co-production, following the Nolan principles, continual improvement • Healthwatch is a statutory body gathering patient feedback for Health & Social Care improvement • Purpose: to ensure all adults, and young people have a say in shaping better health and social care services and also carry 8 statutory functions which enable people to get involved and monitor standards, have their experiences heard and passed on to providers and to have these experiences inform reports & recommendations on how services can be improved • Staffing – An Area Lead for both North Somerset and South Gloucestershire are commencing in role next week. 2 Area Lead posts are also being recruited to currently – closing date is 9th December 2019 • Ways of Working - locally focussed in three areas and in the process of creating work plans for 2020. Healthwatch has a strong group of volunteers and a Board of 8 trustees. • The aim for projects is to put co-production at the centre of the work. Two examples were highlighted as follows: <ul style="list-style-type: none"> ○ recent pilot for online GP appointment app in North Somerset, which was successful so it is hoped that this can now be expanded to the other two local areas. ○ In 2018, mental health in North Somerset was set as a key theme MH understanding access to support for mental health in schools and colleges. From feedback received, a report was submitted to stakeholders and concerns about shortfalls in services have been escalated to the Health and Wellbeing Board. <p>Healthwatch can be followed on Twitter and Facebook and details of webpages are listed below:</p> <p>www.healthwatchbristol.co.uk Phone: 07944 369180</p>	

	Item	Action owner
	<p>Email: contact@healthwatchbristol.co.uk</p> <p>www.healthwatchsouthglos.co.uk Phone: 07944 373235 Email: contact@healthwatchsouthglos.co.uk</p> <p>www.healthwatchnorthsomerset.co.uk Phone: 01275 851400 Email: contact@healthwatchnorthsomerset.co.uk</p> <p>Following questions, VM confirmed that Healthwatch are working collaboratively where possible, but it is recognised that there are limited resources currently.</p> <p>Partnership with commissioners and Local Authority colleagues is essential.</p> <p>We have a base for the Healthwatch Bristol, Healthwatch North Somerset and Healthwatch South Gloucestershire at our HQ in Nailsea, North Somerset. Volunteers from all three areas are supported with face-to-face supervision, and as one team are invited to peer support sessions called Connect meetings twice a year. They are also offered meetings in the area they live twice a year.</p> <p>Currently Healthwatch are running at 70% resource so are in the process of recruiting to a full team. A further update will be provided in the new year on progression</p> <p>It was suggested that Healthwatch have a presence at the local PPIF meetings and are also added to individual area distribution lists.</p> <p>It was requested that all PPIF members receive a copy of each Healthwatch newsletter.</p> <p>AW-B advised that due to the reduced resources we will need to take a “less is more” approach and Healthwatch will not necessarily be able to attend all meetings, but will work in a more targeted way. We will also need to look at opportunities to work in partnership with the Healthwatch team (as per recent examples on PPI Policy and Access Review projects). Finally, we will also need to work closely with Local Authority commissioners of the Healthwatch contract to ensure we are properly aligned.</p>	
04	<p>Clinical Effectiveness</p> <p><u>Involvement in Commissioning Policies</u></p> <p>Adwoa Webber, Head of Clinical Effectiveness and Kate Tamlin, Policy Development Manager attended the meeting to discuss how the commissioning</p>	

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	<p>policy development team can ensure inclusive and effective PPI when reviewing commissioning policies and the role that the PPIF can play.</p> <p>AW briefed the group on the work of the Policy Development Team and advised that there are currently over 100 commissioning policies. All are updated on a rolling basis (normally every 3 years) and in January 2019 a new process for review was introduced to make this more transparent in order that Commissioning Executive can make more informed decisions.</p> <p>It was noted that all policies are available on Verto, which is an internal project management system in the CCG.</p> <p>AW asked the group for feedback and ideas about how the team can ensure inclusive and effective patient and public involvement in the review and development of commissioning policies. The following was noted:</p> <ul style="list-style-type: none"> • Target what kind of involvement is required and from whom, to ensure the right voices are contributing • Identify opportunities for co-production – rather than being presented with something to comment on, review each policy in detail and ensure that we are challenging ourselves for where there may be aspects where more collaborative involvement can take place • Patient information leaflets – PPI involvement has to be proportionate – use a “feedback loop” – i.e. what has been done to-date and what was the outcome. • Reflect that some policies will not affect large amounts of people, but that they may still be highly impactful for those who are affected • Regular engagement newsletter for PPIF and wider population would be useful, as people do not always know when information is on a particular website or may not have access • Consider developing a readers panel to obtain feedback • Common process to ensure good level of scrutiny internal and external and which pushes boundaries. AW-B suggested the policy approach as part of our new Joint Impact Assessment Panel within the CCG. 	
05	<p>Frailty</p> <p>LF provided the group with a summary in relation to the frailty engagement and advised that over the last month meetings have taken place (see summary circulated to members for further details on which groups of people).</p> <p>A report will be submitted to the Frailty Programme Board in December.</p> <p>The Equality Impact Assessment Tracker has also been circulated to members, which outlines the engagement planning and any further consultations required. Our use of the new Population Health Management dataset has been able to</p>	

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	<p>identify specific ethnic groups to target with our engagement, but also identified where we need to work hard to develop better and sustainable relationships with specific BAME groups (such as Afro-Caribbean groups, Somali communities and so on). Frailty could be an opportunity to build these trustful relationships to benefit other programmes of work.</p> <p>The group acknowledged that as part of the Healthy Weston programme, the population in North Somerset had been consulted about frailty, including community groups.</p> <p>It was suggested to also link with providers, who have connections / links with BAME community groups also.</p>	
06	<p>Citizen Insights</p> <p><u>Input into five year system plan</u></p> <p>AW-B advised that in order to support the local system plan, a deliberative workshop to complement insights from the panel was held.</p> <p>The objectives of the workshop explored the views of respondents in relation to both Integrated and Personalised care for the five year local system plan.</p> <p>The group were split into three sub-groups, who then took part in table based discussions.</p> <p>Discussions are ongoing in relation to the next stages of the long term plan.</p>	
07	<p>Project Updates</p> <p><u>PPI Policy Engagement</u></p> <p>AW-B advised that the public engagement for the PPI policy engagement ends on 13th December 2019 and the team are not expecting a large volume of feedback. To-date 25 people have completed the online survey.</p> <p>MC and TR are also in the process of gaining more anecdotal feedback.</p> <p>The intended timescale for the policy is for it to be updated and reviewed at the January PPIF meeting and will then be submitted to the Governing Body in February for approval. AW-B flagged that toolkits will also be developed along similar timescales, to translate the ‘theory’ of PPI Policy into ‘practice’ in key critical areas of activity.</p>	
08	<p>Future Agenda Planning</p>	

	Item	Action owner
	<p><u>Review proposed plan for agenda items to cover in upcoming PPIFs throughout 2020</u></p> <p>AW-B advised that due to an item raised at a previous meeting to plan ahead for these meetings, a directory of topics has been produced and a first draft circulated to members for comment. AW-B also flagged that this approach had first been trialled by the North Somerset PPIF and is a good example of sharing best practice across the PPIF groups.</p> <p>The group welcomed this documentation and the following feedback / suggestions were made:</p> <ul style="list-style-type: none"> • It was suggested that tabs be added along the bottom of the spreadsheet for each local area PPIF to complete, so that we have a single tracker of discussion topics across the PPIF networks • Primary care networks engagement and representation / community involvement needs to be reflected. • Write words in full, as not everybody knows what each acronym is • Engagement best-practice sharing/ reviewing new approaches – this should be added to the PPIF agenda at regular intervals (but not at not every meeting) – to ensure that we are continuing to innovate in our approaches to engagement <p>The following topics should be added to the spreadsheet:</p> <ul style="list-style-type: none"> • Mental Health Strategy • Primary Care Strategy • Healthwatch – topic areas can be added at a later date once the work plans have been agreed <p>A query was raised in relation to the Weston College entry and CB provided the necessary background and a relevant update for members. The intention is not to cut across ongoing work with Healthy Weston, but is more to provide any necessary support. MA advised that if she can assist in any way, she has key relationships in Weston College so would be willing to assist.</p>	
09	<p>Any Other Business</p> <p><u>Shine-On Campaign</u></p> <p>TR advised of a partnership between the Independent Mental Health Network and organisations across BNSSG to launch “Shine-On” which is a campaign to prevent suicide in BNSSG. The link containing further information can be found here: https://www.stevedocumentary.com/</p>	

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	<p>A link will be shared in due course to the film that has been shown as part of the event held on 26th November.</p> <p>Booklets are available and can be requested at tom.renhard@imhn.org</p> <p><u>Mechanism Process between local PPIs and the Main Forum</u></p> <p>LF requested a process whereby issues that are raised at the local PPIFs are fed back into the main PPIF and also the CCG. It was agreed that this is an important issue and would be discussed further outside of this meeting.</p> <p><u>Dates for 2020 Meetings</u></p> <p>ST-W advised that all dates have been agreed for 2020 and sent via diary invite to all members. Two meetings will be held each in the Vassall Centre, South Plaza and Clevedon. Members agreed that the Clevedon Town Council building is suitable – however ST-W reminded that it was necessary to ensure that any meeting venues would have a dial-in facility. AS will confirm bookings and update diary invites shortly.</p> <p>ST-W gave thanks to members of the group for all of their contributions throughout 2019 and also thanked MC, TR, Laura Welti and AD for their input into the working group and the Insights and Public Engagement Team and PEMs for all of their hard work into preparing materials for the PPIF meetings.</p>	
	<p>Date of Next Meeting</p> <p>The next meeting will take place on Tuesday 21st January 2020, from 14:00-16:00pm in the Sue McMullen Room, Vassall Centre, Gill Avenue, Fishponds, Bristol, BS16 2QQ.</p>	

Amanda Smith
Executive PA to Director of Transformation
30th December 2019