

Engagement action plan 2017-19 for NHS Vale of York Clinical Commissioning Group

Below is NHS Vale of York's our two year action plan for engagement based on the vision for public involvement within the 'Involving local communities - Engagement Strategy 2016-19'.

Please note that all of our public engagement and patient experience is formally reported through the Quality and Patient Experience Committee (QPEC). The QPEC meeting is held every two months (February, April, June, August, October, and December) and focuses on quality of services within the Vale of York, and patient engagement and experience. At the start of each meeting we hear a <u>patient story</u> to ensure that the service user voice is at the heart of every meeting. A Healthwatch representative sits on the group which is chaired by a Lay Chair. Minutes and key actions feed into the <u>Governing Body</u> through a standing item on the agenda presented by the Chief Nurse. The <u>committee governance structure can be viewed here</u>.

For each of the committee meetings the <u>Head of Engagement provides an update about patient and public involvement</u>. Information can be found on <u>the get involved section of our website</u> and the how we involve public in our <u>governance pages</u>.

In addition to the action plan, we are frequently asked to become involved in projects which may develop as service change. As part of these pieces of work we have involved our local population in these plans through a range of methods. Our <u>consultations</u> and <u>surveys</u> can be found here.

Output	Activities	Timeframe	Measure/Evidence	Progress
1. Events an	d public engagement			
'Big conversation' engagement events – Altogether, better	 Plan and carry out a series of 'big conversations' with patients, the public and stakeholders to share plans with the local population about the financial recovery and the CCG's key priorities Develop a clear narrative to explain what we are doing as a CCG and work with patients and the public to ensure messaging is audience appropriate Use branding 'altogether, better' to incorporate systemwide partnership working Deliver events through the localities with partners Use conversations as an opportunity to 	March-Sept 2017	 Evidence of a series of stakeholder and patient events: Range of stakeholders, diverse geographical spread, variety of formats – workshops, forums, roadshow style presentation Monitor numbers of patients and stakeholders spoken to at events Evaluate impact of engagement through surveys post event 	Over 40 events organised and attended between July and October 2017. Specific focus on raising the awareness of the financial challenge and asking the public about how they would like to become involved in the formulation of plans and ideas. Variety of methods uses – public meetings, forums, library and market stalls, and links with the voluntary sector. Update and report provided at GB on 7.9.17 and QPEC on 12.10.17. (Please see reports for full update) Information recorded on the CCG website – including verbatim comments. http://www.valeofyorkccg.nhs.uk/get-involved/ Conversations with our general population will continue and follow up sessions will be scheduled for March /April 2018. Comments and outcomes of discussions with our population have been incorporated into the CCG's commissioning intentions. These were shared and were taken too GB on 4.1.17. The intentions reflect the views of local people who attended our series of 'big conversation' engagement events where we asked the community 'what is important about local healthcare services?'Topics including cancer, dementia, mental health, access to health prevention / education and access to primary care services were identified by participants. More info here:

	open a dialogue with patients and the public about what matters to them the most across health care, and use this to feed into future commissioning plans.			https://www.valeofyorkccg.nhs.uk/our-work/commissioning2018-19/
NHS 70 celebrations	Organise a number events with our local communities, health partners, local authorities and voluntary sector which focused on acknowledging the great work of the NHS, whilst raising awareness for our key priorities. • Keeping yourself and your community healthy and well (self-care, prevention, exercise, diet) • Supporting mental health and well being • Tackling loneliness and isolation Focus on creating a legacy for the Vale of York and collectively asked members of our community to share their pledges to show how	June-July 2018	 Evidence of a series of stakeholder and patient events: Range of stakeholders, diverse geographical spread, variety of formats – workshops, forums, roadshow style presentation Monitor numbers of patients and stakeholders spoken to at events Evaluate impact of engagement through surveys post event 	We attended and hosted over 20 events across the Vale of York and helped facilitate/promote even more through GP surgeries, libraries, care homes and local employers such as LNER. We received support by local MPs, Lord Mayors, providers, businesses and voluntary sector organisations. These included: A business briefing session, jointly with the Public Health team and the local MP to work with local employers and look at how they can help support the health and wellbeing of their workforce. A double-decker bus tour of various sites in York, Selby and Easingwold, and members of the public were invited to come along to receive healthcare advice, signposting and health check-up. Encouraging encouraged our GP practices, Care Homes within the patch to hold an event on the day. Working with the library to support their health and wellbeing sessions. Hosting an internal NHS Vale of York CCG 1940s-themed event to celebrate 70 years of the NHS that the public were invited and encouraged to take part in. The celebrations included food, music and other attractions. More info here: https://www.valeofyorkccg.nhs.uk/nhs70

	they will help health and care services, by telling us: How they would improve their own health and wellbeing How they could support their neighbours and local community What will help them stay healthy and well			The comments and pledges received fed into our commissioning intentions for 19/20 https://www.valeofyorkccg.nhs.uk/commissioningintent ions and were there basis of a winter help us help you campaign. https://www.valeofyorkccg.nhs.uk/winter
2. Patient exp Patient insights	Develop a system to	Establish	Evidence of changes	Evidence provided in the bi-monthly Quality Patient
	record patient experiences/insights to feed into CCG	process by April 2017 – but is an on-	made and/or actions taken as a result of patient experience data	Experience Committee meetings via the patient experience report. https://www.valeofyorkccg.nhs.uk/get-involved/how-
	Assess how the CCG can listen,	going item	collated Include in reports and	we-involve-the-public-in-governance/ Attendance at quarterly patient experience
	review, triangulate and act on patient		publish as appropriate	engagement network across STP by Patient Experience lead and Head of Engagement.
	feedback • Demonstrate that			Stories and information shared across CCGs. Monthly catch up with patient experience team to
	action is taken by the CCG as a result			discuss patient feedback and use this to contact providers.
	of patient experience data and			https://www.valeofyorkccg.nhs.uk/get-involved/holding-providers-to-account-on-patient-and-
	evidence			public-involvement/
Patient stories and engagement	Capture patient stories and ensure	On-going	 Evidence of patient story in minutes of 	As part of commitment to ensuring the patient, carer and public voice is heard within the organisation, we
events	that they are incorporated into meetings, briefings		meetings (internal and external) and on website	present a patient story as a regular item at the start of each Quality and Patient Experience Committee (QPEC) – since Dec 2017.
	and events			We use real patients, carers and family members to
				tell their experience of using those services with the

				aim of understanding what the organisation needs to do better. Sometimes this may be feeding into the commissioning of services or working with providers and partners to improve patient experience. With each patient story we formulate an action plan, and give an update at the Quality and Patient Experience Committee. https://www.valeofyorkccg.nhs.uk/get-involved/patient-stories/ Information on our action plan can be viewed here: https://www.valeofyorkccg.nhs.uk/data/uploads/get-involved/qpec/engagement-update-qpec-december-2018.pdf
'You said, we did'	Create a repository of meaningful CCG engagement, where we listen and acted upon patient feedback Promote 'you said, we did' on the CCG website and through engagement events and roadshow Illustrate the difference that public involvement has made to commissioning, decision making and/or services and includes our seldom heard groups	On-going	Repository of meaningful CCG engagement, where we listen and acted upon patient feedback	You said, we did template devised and sent out to commissioners to complete as part of the debrief and feedback process of each piece of work/project. Evidence of you said we did on the CCG website. https://www.valeofyorkccg.nhs.uk/get-involved/you-said-we-did-our-conversations-with-the-local-community/

3. Key stakeh	nolders and networks (stakeholder map – app	pendix i)	
Patient Participation Groups (PPGs) initial meetings	 Map and identify existing PPGs Work with practices to ensure that PPGs continue Use PPGs as groups to increase patient involvement and gather feedback Collate and share benefits of PPGs Triangulate feedback from patients and the public about primary care and use to improve and inform services 	 Database of all PPG attendances Contact and conversations with 70% of PPGs by August 2017 Evidence that PPG have been consulted on recovery plan 	Database of PPG attendances. 26 PPGs in total, 6 meet virtually and 20 in person. As of 25.11.17 attended 13/20. PPGs are on stakeholder mailing list and receive regular updates from the CCG. PPGs have been used as a method to gather feedback about various consultations and surveys, as well as to ask for opinions on proposals and on the current financial situation – such as the development of the new mental health hospital, improving GP access, End of life care strategy. Feedback and comments are recorded Selby Posterngate PPG helped organise the Selby Community day for NHS 70 during July 2018. https://www.valeofyorkccg.nhs.uk/nhs70 https://www.valeofyorkccg.nhs.uk/get-involved/patient-participation-groups/
NHS Vale of York CCG engagement network	 Re-establish CCG network – a group which supports patients and the public to learn about healthcare in the Vale of York community, feeds into CCG priorities and quality improvement and takes key messages back into its communities Consider the opportunity for quarterly meetings The group will receive regular 	 Evidence of first meeting/communication by June 2017 Track numbers of stakeholders on mailing list and attending meetings 	The formation of a CCG network is currently virtual. The 'my CCG' mailing list was contacted to ask if members wanted to remain on the mailing list. At events, names of interested parties were added to the database. Those on the mailing list receive a monthly newsletter, press releases and updates and invitations to events and to provide feedback on proposals. All of the information collated is on the website, or within the engagement folder on the x drive. Stakeholder newsletter which is sent to the virtual network: https://www.valeofyorkccg.nhs.uk/get-involved/join-our-mailing-list-and-sign-up-to-our-mailing-list/ Invitations to events, meetings and surveys is sent to the group and many have attended the consultations, Healthwatch Assemblies we present at and our NHS 70 and Big conversation events.

	newsletters, receive invites to public meetings, have the opportunity to have their say about new services and service changes • Keep website pages and regular communication up	
	to date • Support members who are unable to attend meetings via online community/newslett er	
Close partnership working with stakeholders	Continue to work in partnership with key organisations such as Healthwatch and identify how we use their experience and networks to involve patients and the public in areas of commissioning	Evidence of meetings and involvement in commissioning decisions Regular meetings with representatives from across the voluntary sector. Attendance and presentations given at Healthwatch, CVS, MH, ageing well, LD and carers forums. These are held on a events and meetings database. https://www.valeofyorkccg.nhs.uk/get-involved/events-and-meetings/ https://www.valeofyorkccg.nhs.uk/get-involved/our-work-with-healthwatch-and-vcse-organisations/
MP, councillor and scrutiny engagement	Work with the accountable officer to build and maintain relationships with the Vale of York's MPs and councillors Work with MPs to involve their constituents and identified groups in	 Evidence of meetings with MPs and working with constituents Feedback and evaluation of involvement The accountable office, Phil Mettam, has regular meetings with the local MPs. Members of the executive team attend HOSCs and Health and Wellbeing Boards across the three local authority areas. During the NHS 70 events local MPs were informed and took part in celebrations. Rachael Maskell, MP for York Central helped arrange a meeting with 50 leads from businesses to discuss health and wellbeing of their staff. We regularly respond to MP letters and recod and file

Voluntary organisation and community group engagement	working with the CCG to share plans with the local population about the financial recovery plan and key priorities • Organise a number of workshops with voluntary organisations to gather opinions and user experience, and feed back into the organisation and inform decisions • Ensure diverse geographical spread and engagement and involvement of seldom heard groups (see section 5)	On-going	 Evidence of meetings Feedback and evaluation of involvement Engagement and satisfaction survey Evidence of diverse geographical spread 	Regular meetings with representatives from across the voluntary sector. Attendance and presentations given at Healthwatch, CVS, MH, ageing well, LD and carers forums. We present as a standing item at each Healthwatch York Assembly in Jan, April and October. https://www.valeofyorkccg.nhs.uk/get-involved/ourwork-with-healthwatch-and-vcse-organisations/ (Please see stakeholder and engagement database - https://www.valeofyorkccg.nhs.uk/get-involved/events-and-meetings/) Plans and intentions shared with organisations such as HealthWatch to gauge local opinion.
Universities	Establish link with the universities to understand how students are using healthcare – link in to welfare teams, GPs on campus. Consider the opportunity to link in with health and social care students and scope opportunities to	On-going	Evidence of meetings with the university and groups of students	During September 2017 we worked with the local universities and colleges to host a number of events during fresher's week. Working with partner organisations and local GP services we helped to promote public health messages and encourage students to sign up for the GP and signposting for meningitis jab. We also asked students about how they access healthcare, what is important to them, how best to communicate important messages and what are their biggest health concerns. (Please see student feedback write up).

	Scope most appropriate ways of engaging this community (link to communication actions in section 5)		Nov 2017 we spoke at a health and wellbeing day at York St John University and the Deputy Chief Nurse gave a presentation. In March 2018 we attended a health and wellbeing day at York College and spoke to over 200 students about how they would like to access GP services. This fed into the GP extended hours work. In June 2018 we held an NHS 70 event at the festival of ideas at the University of York. Many students came and signed our birthday card and made pledges. For 2019-20 we are in discussions with Healthwatch about creating some volunteer posts for students – as part of their learning and development.
Volunteers	Scope opportunity to involve volunteers in working in partnership with the CCG to help deliver messages into the local community	Evidence of interaction with volunteers and involvement in 'big conversations'	Linked in with Healthwatch volunteers, who attended many of our events and helped support stalls and speak to the public. These included our New Earswick event, Selby and Pocklington Market Stall, the Healthwatch Assembly and our AGM. We continue to hold a drop-in session with Healthwatch volunteers on the second Monday of each month in west offices. We also speak at Healthwatch Assemblies each quarter. https://www.valeofyorkccg.nhs.uk/get-involved/our-work-with-healthwatch-and-vcse-organisations/ For 2019-20 we are in discussions with Healthwatch about creating some volunteer posts for students – as part of their learning and development.

GP engagement	 Visit GP practices involve stakehor in conversation about the GP forward visites, recovery plan and gather feedbace. Create a protect learning event GP practices to attend quarter increase engagement, improve learning and networking. 	olders is ive ew, and sk. cted for all by to	Visit 90% of GP surgeries to talk about key priorities, recovery plan and gather feedback Feedback and evaluation of involvement Engagement and satisfaction survey Measure involvement and impact through council of representatives	Shaun Macey and the Chief Accountable Officer have made visits to surgeries across the NHS Vale of York patch during 2017. Sarah Goode and Lynn Sugg visited all practices during 2018 to help with CQC preparation. 2016-18 the COR meets monthly and key items are discussed. During 2018 the reset of the Governing Body included a GP clinical Chair and three locality GP leads. Monthly Council of Reps is now replaced with a quarterly meeting and the focus is placed on a quarterly GP engagement event called Protected Learning Time for all GPs and nurses within primary care. The first session was held at York Racecourse. on 31 Jan 2019 and 333 GPs and nurses attended. The next session is 11 April.
4. Statutory d	uties			
Duty to consult	Ensure that CO meeting statute duties under se 14Z2 of the He and Social Car (2012)	ory ection alth	 CCG staff are aware of when to consult patients and the public in programmes of work Evidence that staff have considered duty to consult by use of guidelines from the engagement toolkit (see section 6) 	Increased understanding and recognition of patient engagement and duty to consult. Patient and public engagement is embedded as part of the process in commissioning project planning. https://www.valeofyorkccg.nhs.uk/get-involved/our-legal-duty-to-involve-public-patients-and-partners/ Toolkit items continue to be advertised in engagement newsletter and shared with PMO and work stream leads. https://www.valeofyorkccg.nhs.uk/get-involved/engagement-toolkit/ We held a refresh of training sessions in Sept and Oct 2018 around embedding engagement within projects.

				https://www.valeofyorkccg.nhs.uk/data/uploads/staff-engagement/ppi-statutory-guidance-for-engagement-form-2017.docx https://www.valeofyorkccg.nhs.uk/data/uploads/staff-engagement/engagement-and-comms-training-session-for-website-dec-2018.pdf
Annual report for patient and public involvement activity	Create a section for the annual report that includes an update on all patient and public engagement activity within the CCG	Yearly	Annual report submitted and noted, containing key activities and achievements from the previous year	2017/18 was the first year that we have produced a separate annual report for patient and public engagement. As part of our governance process, the annual report was presented to and approved by our Quality and Patient Experience Committee in June 2018 and noted by the Governing Body in July 2018. Annual engagement report: https://www.valeofyorkccg.nhs.uk/data/uploads/get-involved/engagement-annual-report-2017-18-final-presented-at-qpec.pdf https://www.valeofyorkccg.nhs.uk/get-involved/our-engagement-strategy-and-action-plan/ A draft copy of the next version will be taken to the April 2019 QPEC.
Patient engagement in service change, service delivery, design and redesign	Ensure that patient involvement is included at all stages of the commissioning cycle – involving patients in commissioning intentions, services design, procurement and monitoring and performance. Work with CCG teams to ensure that	On-going	 Ability to provide good quality examples of patient engagement, leading to positive external perception Projects and developments will benefit from patient engagement and statutory requirements will be met 	Patient and public engagement is embedded as part of the commissioning cycle. https://www.valeofyorkccg.nhs.uk/get-involved/our-approach-to-engagement/ https://www.valeofyorkccg.nhs.uk/get-involved/our-approach-to-engagement/#commissioning%20cycle Examples of recent patient engagement in helping to shape service provision: Community equipment and wheelchair services Development of a new mental health hospital Non-emergency transport services

	engagement is embedded within projects from the outset Use networks and ensure hard to reach groups and those affected by service changes are involved, consulted and kept up-to-date throughout the process			Perinatal mental health services Extended access GP services End of life care strategy Peri-natal MH services Feedback is stored within individual work streams/projects. Training provided for staff: https://www.valeofyorkccg.nhs.uk/get-involved/our-legal-duty-to-involve-public-patients-and-partners/ https://www.valeofyorkccg.nhs.uk/get-involved/engagement-toolkit/ https://www.valeofyorkccg.nhs.uk/data/uploads/staff-engagement/ppi-statutory-guidance-for-engagement-form-2017.docx https://www.valeofyorkccg.nhs.uk/data/uploads/staff-engagement/engagement-and-comms-training-session-for-website-dec-2018.pdf Examples of your said, we did https://www.valeofyorkccg.nhs.uk/get-involved/you-said-we-did-our-conversations-with-the-local-community/
Advance equality and reduce health inequality	Provide training and tools for staff understands its population and identifies those who may be least likely to be heard, or experience the worst health	On-going	Evidence of a toolkit and training sessions. So that the CCG understands its population and has identified those who may be least likely to be heard, or experience the worst	Health inequalities toolkit and training for our staff We have designed a toolkit to help leading on engagement to define their involvement activities and scope the activities required for each commissioning intention. This process includes tools such as a stakeholder mapping process, guidance for equality impact assessments and a

- outcomes.
- Use a range of inclusive approaches and methods of engagement are used to meet the needs of the community (including those protected by a characteristic under the Equalities Act 2010 and those affected by health and social inequalities) and are promoted through diverse community channels.
- Work with partners to enhance engagement, particularly with those who experience the worst health outcomes

- health outcomes.
- Public facing communications are accessible to local communities, for example in accessible formats and using a range of methods.
- Evidence that the CCG considers equalities and health inequalities when planning and implementing its approach to public involvement.

template to address if the legal duty needs to be applied.

We provide regular updates to our staff and have invited in external facilitators to hold a session in 2017 and in November 2018 and Feb 2019.

The aim of the session was to increase understanding and knowledge of the connection between equality engagement and health inequalities duties within the NHS.

Objectives:

- To raise awareness of the Equality, Engagement and Health Inequalities duties
- To increase awareness and understanding of equality and health inequality data and how this informs an effective Equality Impact Analysis
- To increase understanding of the connections between engagement and equality and how engagement activity can help to fill data gaps
- To apply learning to role

Resources:

https://www.valeofyorkccg.nhs.uk/getinvolved/engagement-toolkit/ https://www.valeofyorkccg.nhs.uk/data/uploads/getinvolved/presentations/population-health-13.2.19.pdf

 Equality and health inequalities training slide pack

- Equality legislation hand out
- Sources of information for health inequality data
- Improving equality across protected characteristics
- NHS England training resources

Equality Impact Analysis (EIA)

We measure the equality impact of our decisions to carefully consider how they affect the local population. To view EIAs on our policies <u>click here</u>. To view EIAs on our Governing Body papers, please <u>click here</u>.

We also carry out Equality Impact Assessments as part of our Quality Impact Assessment when reviewing strategies, services, projects and policies. Here are examples of some of our latest EIAs:

- Gluten free food prescribing EIA
- <u>Development of a new mental health</u> <u>hospital EIA(Pages 60-75)</u>

An Equality Impact Assessment is undertaken on major strategies, policies and changes to services to ensure that they do not have a differential impact on any community group.

In order to help support our staff to consider the equality impacts across protected characteristics, we have a matrix of questions that they can use as a tool.

Click here to access the Equality Impact

				Assessment tool. More info: https://www.valeofyorkccg.nhs.uk/equality-and-diversity/equality-and-health-inequalities/
Quality and patient experience committee (QPEC)	Provide regular updates to the Governing Body through the Quality and Patient Experience Committee	Quarterly	Evidence of update and progress provided at quarterly meetings	Regular update provided at each QPEC meeting. https://www.valeofyorkccg.nhs.uk/get-involved/how-we-involve-the-public-in-governance/ Reporting of patient and public experience and engagement activities Public engagement and patient experience is formally reported through the Quality and Patient Experience Committee (QPEC). Minutes and key actions feed into the Governing Body through a standing item on the agenda presented by the Chief Nurse. All of our Governing Body papers can be found here. The QPEC meeting is held every two months (February, April, June, August, October, and December) and focuses on quality of services within the Vale of York, and patient engagement and experoence. At the start of each meeting we hear a patient story to ensure that the service user voice is at the heart of every meeting. A Healthwatch representative sits on the group which is chaired by a Lay Chair. Engagement reports for Quality and Patient Experience Committee (QPEC):

5 Communio	ations and conversations		For each of the committee meetings the Head of engagement provides an update about patient and public involvement. The most recent reports can be found below: • June 2018 report • August 2018 report • October 2018 report • December 2018 report • February 2019 report
Identification of groups who are 'seldom heard' and ensuring that they have the opportunity to engage with the CCG.	Carry out a gap analysis to identify groups that the CCG has not engaged with previously Liaise with voluntary organisations, community groups and key contacts to open dialogue with these groups (seldom heard) On On On On On On On On On O	Evidence of communication and engagement plan for seldom heard groups Engagement and feedback from a number of seldom heard groups	Work has been carried out with a number of key groups: Students Carers LD community Polish community Young people MH service users Pregnant women and new mums Commuters https://www.valeofyorkccg.nhs.uk/get-involved/https://www.valeofyorkccg.nhs.uk/get-involved/yousaid-we-did-our-conversations-with-the-local-community/https://www.valeofyorkccg.nhs.uk/carers https://www.valeofyorkccg.nhs.uk/get-involved/patient-stories/
New ways to engage those in the community who may not have the chance to become	 Establish the preferred way of engaging these communities/groups Explore new communication 	Introduction of new methods of engagement with seldom heard communities and groups	There are several methods of communication available for members of the public. • Text service • Social media • Website

involved and have their say	methods – e.g.: text/social media		 Insights and feedback from these groups fed into QPEC 	Increased communication via video platform, social media over the winter period as part of the stay well this winter campaign. Information on the methods of communication that we use can be found here: https://www.valeofyorkccg.nhs.uk/get-involved/alternativeformats/
'Get involved' section of the website	 Continue to use website as a communication and engagement tool Update existing content Add new information, list events and encourage feedback Source 'patient stories' and where we have carried out meaningful patient engagement 	On-going	 Section of website updated and communicated to key stakeholders Increase traffic/number of hits to the website Increase number of contacts from public 	Get involved section of the website is regularly updated. https://www.valeofyorkccg.nhs.uk/get-involved/ Due to the limitations of the current website, the navigation is not user friendly. A new website will be developed in 2019 and user experience will be much improved.
6. Internal Engagement activity database	Scope development of database to record engagement activity to ensure there is a clear understanding of what engagement is happening at all levels of the organisation Capture all engagement activities that have happened within the	On-going	 Database created and updated on a regular basis Monthly reporting of public and patient engagement 	Data base is regularly updated with events and meetings. https://www.valeofyorkccg.nhs.uk/get-involved/events-and-meetings/

	CCG Use database to collate feedback and use to feed into future decisions			
Engagement strategy and action plan	Update engagement strategy for 2017/18 Create annual action plan to support the implementation of the strategy Provide regular updates to the Quality and Patient Experience Committee	May 2019	Evidence of strategy on website Regular updates against action plan at QPEC Monitor and evaluate programmes of work	Strategy will be updated in the next financial year. Action plan regularly assessed and actions updated and fed into QPEC and Governing body. The plan is on our website: http://www.valeofyorkccg.nhs.uk/get-involved/our-engagement-strategy-and-action-plan/ We are currently reviewing our engagement principles as part of our refresh of our engagement and communications strategy. An initial high level draft of the new communications and engagement strategy is due to go to Governing Body on 7 February 2018. Initial feedback received: November 2018 – January 2019 • Key stakeholders: VCSE organisations such as Selby AVS and York CVS, Healthwatch York and North Yorkshire, Older People Advocacy York (OCAY), York Carers Centre, York College. • Public: Website and comms workshop (29 January 2019) and Healthwatch Assembly (22 January 2019). Drop-in at West Offices (second Monday of the month). • Governing Body GPs and Accountable Officer Workshop 22 and 29 January 2019:

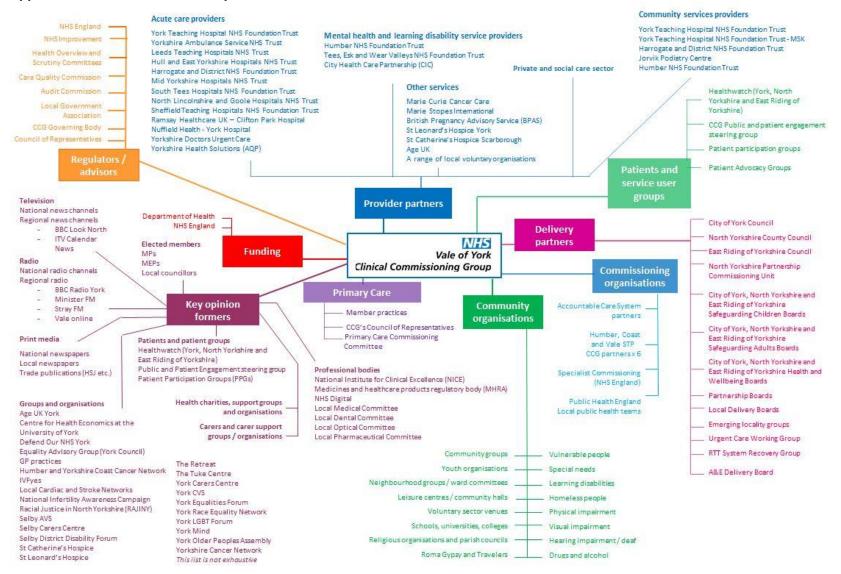
	Presentation about our commissioning intentions, and the new strategy. What our population has told us about these principles: Build trust and relationships. Have a more partnership approach Regular communication: around changes that are taking place – don't stop after consultation. Provide evidence that we have listened, responded and taken their views into account Allow enough time for people to feedback – otherwise it feels tokenistic. Important that people can see the results. Think about where, when and how are we going to feedback. Language is important: We need to create an easy read version of the principles. Honesty: We need to be honest with what can be done within budget Reach out into the community: Go out to people rather than expecting them to come to you. Ensure you gather a wide and diverse sample. Be inclusive and accessible: Consider how you access people who are socially isolated, or who are not represented by existing groups – eg homelessness/financial hardship, people with MH conditions Listening, feedback, openness and transparency need to be added All principles are important, but we need to ensure how they are implemented and adhered to. We will be using this feedback to refresh our core
	We will be using this feedback to refresh our core

				engagement principles as part of the new strategy. Next stages: Develop strategy based on feedback and publish first draft for public consultation following local elections in (May 2019).
Engagement toolkit for staff	 Provide a toolkit to help support staff to ensure that engagement is embedded within all processes of the CCG Dedicated intranet/shared drive section for staff Provide engagement guidance notes, policies and procedures, useful documents, statutory duties Create survey to analyse users' experience before and after using the toolkit 	On-going On-going	 Compare results from staff about their understanding of engagement via a survey – completed before the toolkit is published and afterwards Toolkit and guidelines on intranet Evidence of patient engagement evident throughout commissioning cycle. 	 Engagement session held for staff NHS PPI guidance distributed to all staff Regular weekly engagement update sent to all staff – with information about how to get involved, useful documents, feedback from the public PPI guidance continues to be shared via internal weekly engagement newsletter. Stored on x drive engagement folder. Y:\VOYCCG\Engagement\Engagement Staff Newsletter\Engagement update - staff comms https://www.valeofyorkccg.nhs.uk/get-involved/our-legal-duty-to-involve-public-patients-and-partners/ Toolkit available on our website for staff and public: https://www.valeofyorkccg.nhs.uk/get-involved/engagement-toolkit/ Guidelines and training for staff: Understand the legal duty and embedding communications and engagement within projects We provide our staff with a toolkit to help them to assess the level of public and patient engagement that is needed within a project. We use the NHS England patient and public engagement statutory guidelines to help us with decision making.

		Patient and public engagement form - to help with deciding the level of engagement required within a project Comms and engagement planning form - to help with planning communications, engagement activities and feedback Stakeholder analysis/mapping Quality impact assessment Equality impact assessment prompt form
Engagement workshops for staff	Plan and organise a number of workshops for (which will be delivered on an ongoing basis) about consultation and engagement good practice Invite key speakers e.g. NHS leadership/National Voices to speak at workshops April 20 A	 Evidence of work shows Evaluation of events: Compare results from staff about their understanding of engagement via a survey – completed before the workshops are published and afterwards Engagement training session held for staff in April 2017, September 2018 and October 2018. Equality and diversity training sessions – 24 April and 3 May 2017 and October 2018 and Feb 19 Regular learning lunches on a variety of topics during 2017-18 Tommy Whitelaw – focusing on what matters to me. The story of a carer. June 2018
Staff volunteers	Explore	 Database of engagement will reflect attendance of staff at public events and activities Evidence of engagement within staff PDRs Regular staff attendance at external public events. Over 30 staff helped at the NHS 70 events. Adverts placed in weekly engagement newsletter and via managers. Evidence of advertising in the regular staff engagement emails

	who would like to get involved in public engagement Provide training to interested staff (link to engagement toolkit)			
Staff key messages workshop	Run a number of workshops for staff on: Financial plan, improvement plan, operational plan, Better Care Fund, Accountable Care Systems, performance, risks, governance and engagement.	On-going	Attendance figures – 75% of staff to attend at least one workshop Evaluation and feedback Engagement and satisfaction survey	Complete Learning lunches: STPs Financial plan Programme of work Engagement RSS Counter fraud Data and evaluation Equality and diversity From September 2017, there is now a 6 weekly staff briefing which covers information about the CCG, its priorities and direction of travel. During 2018 a monthly staff briefing was created. An update is provided from a member of the exec team We have had presentations form: Meds Management Long term plan Diabetes HR and OD Revisit values workshop What matters to me Population health

Appendix i - CCG stakeholder map



Appendix ii

Table one: Communication key audiences and interested parties

Organisation/group	Recommended communication and engagement approaches	Recommended communication and engagement approaches
 CCG CCG staff Governing Body members Council of Representatives members 	The Governing Body and Council of Representatives seek assurance that appropriate processes are followed and use evidence to make key decisions. Staff need / want to know the impact that commissions / projects / service improvements have on their work, how they can be involved / influence. Staff hold ambassadorial roles.	 Governing Body/ Council of Representatives meetings and workshop meetings Briefing documents e-newsletters Team meetings Face-to-face meetings Staff huddles
Healthwatch York North Yorkshire East Riding of Yorkshire	Healthwatch will be interested to understand the potential impact of the proposals on patients in the area. They are a useful conduit to share information with the public and should be equipped with information to help them respond to any concerns raised.	 Regular written briefings Share copies of information materials Regular meetings Include in delivery of big conversations
The voluntary sector – individual organisations and umbrella groups	Umbrella groups act as a conduit for information to flow to numerous local volunteer and support groups. They will be interested in any service changes / improvements that may impact on particular groups of patients. Able to help raise awareness of events and opportunities for people to influence decision-making.	 Briefings Updates for inclusion in newsletters/websites Opportunities for targeted engagement such as focus groups with service users, specific community demographics Involve and engage within 'big conversations'
GP practice PPGs	GP PPG groups can be influential in practices, and in turn practices can influence the CCG.	 Updates for PPG meetings Written briefings/newsletters Visit PPG meetings and presentations
Friends of York Hospital	This group of people cares deeply about local healthcare	Regular updates

	and the Hospital itself.	
 GP member practices GPs Commissioning Leads Practice / Business Managers Practice staff 	GPs have a role in the development and provision of services. Their involvement and support is vital. GPs need to be kept informed of progress and encouraged to cascade information to their staff.	Face-to-face meetingsWritten updatesWorkshops
Local media	The media will expect timely information about the CCG's priorities and operational plan, and any developments in healthcare. We can use the local media as a vehicle for promoting the 'Altogether, better' roadshows.	 Face-to-face briefings Media releases Interviews Statements
Provider organisationsYTHFTTEWVOther provider organisations	It is important to work with provider organisations collaboratively to ensure we listen to patients, learn from their experience, and use feedback to inform and improve services.	 Face-to-face briefings Workshop meetings Briefing documents Involvement in roadshows
Local government partner public health and social care teams City of York Council North Yorkshire County Council East Riding of Yorkshire Council	Involvement of and buy-in from Public Health and Social Care is vital. There is a lot of overlap and colleagues in these teams need to be significantly involved.	 Workshop meetings Briefing – face to face Briefing documents Representation at project boards Regular catch-ups / liaison with senior staff Regular liaison and catch ups with communication teams / leads
Health Overview and Scrutiny Committees City of York Council North Yorkshire County Council East Riding of Yorkshire Council	Councillors have an interest on any impact on their constituents and can use service changes as an opportunity to establish / encourage pressure groups.	 Regular bulletins Face-to-face briefings Briefing documents Full OSC committee meeting presentations, OSC mid-cycle briefing updates Verbal updates to Scrutiny Officers Workshop meetings
District Councils	Councillors have an interest on the impact of proposals on	Bulletins

 Selby District Council Easingwold Town Council Pickering Town Council Pocklington Town Council 	their constituents and will often use service change as an opportunity to establish/encourage pressure groups and campaigns.	 Written briefings Face-to-face briefings Workshop events Regular liaison with councillors Regular liaison with Clerk of the council
MPs	MPs have an interest on the impact of service changes / improvements on their constituents. MPs may use service change as an opportunity to establish/encourage pressure groups and campaigns.	 Face-to-face briefings Written briefings Email updates
 Health and Wellbeing Boards City of York, North Yorkshire East Riding of Yorkshire 	The HWB will expect to be briefed on any initiative that will have an impact on the wider health economy.	 Verbal presentations and updates at meetings Regular written briefings
NHS England	NHS England need assurances / updates (particularly around areas that are perceived to be controversial)	Regular teleconferencesFace to face meetingsWritten briefings
Interested parties and lobby groups	Defend our NHS York Mental Health Action Group 38 degrees	 Face to face meetings Written briefings Stakeholder newsletters