

Meeting date: 20 March 2018

Item No:

## GOVERNING BODY IN COMMON

<b>Title of report:</b>	<b>DDES CCG and North Durham CCG Engagement Activity report October to December 2017 (Q3)</b>
<b>Author of report:</b>	Tina Balbach, Engagement Lead, Durham Dales, Easington and Sedgfield CCG Daniel Blagdon, Engagement Lead, North Durham CCG
<b>Sponsor Director:</b>	Joseph Chandy, Director of Primary Care, Partnerships and Engagement
<b>Date of report:</b>	February 2018
<b>Name of person presenting the report at the meeting:</b>	Joseph Chandy, Director of Primary Care, Partnerships and Engagement
<b>Reason for report:</b> ✓ <i>please tick relevant category</i>	<ul style="list-style-type: none"> <li>▪ Information only ✓</li> <li>▪ Development / Discussion</li> <li>▪ Decision / Action</li> </ul>
<b>Recommendations:</b> <b>(i.e. action being sought from the meeting)</b>	The Governing Bodies are asked to: <ul style="list-style-type: none"> <li>▪ receive the update regarding the engagement activity for Quarter 3,</li> <li>▪ Review the activity undertaken and provide any comments and suggestions for the future.</li> </ul>
<b>Report status:</b> ✓ <i>please indicate relevant category</i>	<ul style="list-style-type: none"> <li>▪ Official ✓</li> <li>▪ Official Sensitive: Commercial</li> <li>▪ Official Sensitive: Personal</li> </ul>
<b>Is this report confidential?</b> <i>please delete as appropriate</i>	<ul style="list-style-type: none"> <li>▪ Yes</li> <li>▪ No ✓</li> </ul>
<b>Procurement Conflict of Interest completed and attached:</b> <i>please delete as appropriate</i>	<ul style="list-style-type: none"> <li>▪ Yes</li> <li>▪ n/a ✓</li> </ul>
<b>CONFLICTS OF INTEREST</b>	<b><u>THIS SECTION MUST BE COMPLETED BY THE REPORT AUTHOR / SPONSOR DIRECTOR</u></b>
<i>Are any members of the meeting likely to have a</i>	NO

<i>conflict of interest for this agenda item:</i>	
<i>Who is conflicted and why – please give the name(s) of all conflicted members?</i>	<i>Not applicable</i>
<i>Are the conflicted members detailed above allowed to receive this paper and attend the meeting?</i>	<i>Not applicable</i>

<b>Purpose of the report and summary of key issues:</b>	<p>The purpose of the report is to provide an update on the range of engagement activities that took place during October to December (Q3) 2017 in both DDES CCG and North Durham CCG.</p> <p>The areas covered in the report include:</p> <p><b>County-wide Activity</b></p> <ul style="list-style-type: none"> <li>• Mental Health Crisis Service patient engagement</li> <li>• Ophthalmology</li> <li>• Stroke engagement</li> <li>• Governing Body development session</li> </ul> <p><b>North Durham specific activity</b></p> <ul style="list-style-type: none"> <li>• Patient Reference Group</li> <li>• North Durham Patient Congress</li> <li>• Shotley Bridge Hospital engagement</li> <li>• Patient, Public and Carer Engagement (PPCE) Committee</li> </ul> <p><b>DDES specific activity</b></p> <ul style="list-style-type: none"> <li>• Health Network meetings</li> <li>• DDES Commissioning Priorities</li> <li>• Monthly Patient Reference Groups</li> <li>• Ambulance PRG</li> <li>• DDES PRG Chairs meeting</li> <li>• Skerne Medical Group</li> </ul> <p><b>On-going partnership projects</b></p> <ul style="list-style-type: none"> <li>• Young Carers</li> <li>• Gypsy Romany Travellers Practitioners Meeting</li> <li>• Investing in Children (IiC)</li> <li>• Teams Around Patients (TAPS)</li> <li>• Young People’s Portal Board</li> </ul> <p><b>Future activity</b></p> <ul style="list-style-type: none"> <li>• Care Navigation</li> <li>• Hospital of God</li> </ul>
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	Primary Care Services engagement
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<b>DDES and North Durham consultation and other approval routes (including outcomes):</b>	<u>Meeting/route</u> Patient Public and Care Engagement Committee	<u>Date</u> 21 February 2018	<u>Outcome</u> Agreed
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<b>Supporting documents/ Appendices:</b>	Engagement Activity Update Engagement evidence log
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### Impact Assessment and Risk Management Issues

*Consideration given and action taken in this report relating to impact assessment and risk management issues is detailed below:*

(✓) tick as appropriate	Impact area
	<b>Does this report identify a risk for the CCG?</b>
	no
	<b>Does this report impact on the environment/sustainability of the CCG?</b>
	no
	<b>Does this report have legal implications?</b>
	no
	<b>Are there any resource implications – finance and/or staffing as a result of this report</b>
	no
	<b>Has this report taken into account equality and diversity?</b>
	no
	<b>Does this report impact on Quality, Innovation, Productivity and Prevention (QIPP)</b>
	no
✓	<b>Has there been any consultation/engagement (patient, public, stakeholder, clinical) with regard to the content of the report?</b>
	Content is focussed on engagement
	<b>Are there any clinical quality/patient safety issues identified in this report?</b>
	no
	<b>Does this report impact on any information governance issues?</b>
	no
	<b>Other implications</b>
	None identified

**Engagement Activity: October - December 2017**  
**NHS NORTH DURHAM AND DURHAM DALES EASINGTON AND SEDGEFIELD**  
**CLINICAL COMMISSIONING GROUPS**

## **1. Background**

This report has been produced in relation to the engagement activity that has been undertaken during this reporting period. It also highlights some future activity that is going to be implemented in the next quarter.

As part of the closer working between the two CCGs, this report has been produced to bring together all engagement activity across County Durham into one report. The contents has been divided into county wide activity, North Durham specific activity and DDES specific activity.

Appendix one is the Engagement Evidence Log which shows the full information of where engagement activity has been carried out within this period. Included below is specific information regarding key pieces of work.

## **2. County-wide Activity**

### **Mental Health Crisis**

As part of the review into the Mental Health Crisis Service and Home Treatment, engagement has been an integral part of this process. The engagement team has focused on conversations with patients and carers.

An online survey was created along with a paper version and this was shared widely via groups and social media. The team went along to meetings such as the County wide mental health forum, Cree Groups and also Home Group Happy clubs which are groups where people who have or have had mental health issues attend and get involved in physical activity.

Overall 26 surveys were completed. Due to the sensitive nature of the patients and the subject matter combined with the time of year, a small number of returns were expected. The key points from conversations have been gathered and analysis will be carried out with a report produced by the end of January. This report will also include analysis from engagement with GPs, Mental Health Crisis Service staff and service managers and also wider stakeholders.

### **Ophthalmology**

By working together with County Durham and Darlington Foundation Trust (CDDFT), the CCGs have started conversations with patients who have raised intra-ocular pressure (IOP) with no signs of glaucoma. Following the release of updated national guidance the trust and the CCGs have started the process of these patients receiving their future review appointments and routine monitoring appointments in community settings.

Conversations were planned to be undertaken at each of the three CDDFT sites currently delivering the review appointments. At the point of writing only one site has been able to be completed with future opportunities still to be provided by the trust. The conversations that were completed provided an indication that, for those contacted, the change would be welcomed. It did highlight an issue regarding those individuals who live outside of the County Durham area and how they would be managed and communicated with which has been shared with the commissioning team.

Wider communication to all of the relevant patients about the plans for the repatriation into community settings for future reviews have been provided and circulated. This will be followed up with Commissioning colleagues in the new year in relation to further conversations required.

### **Stroke services**

As part of the ongoing review of Stroke Services and a subsequent extension the Stroke Association contract a decision was made to engage with stroke patients, their carers and family members. In July a stroke survey was developed which was shared with various stakeholders for comments to enable this survey to be easy to complete. Patients were identified via GP practice lists. A covering letter, survey and freepost envelope was then posted out to all those patients identified. Due to the fact that a large number of stroke patients have issues with mobility or communications problems it was vital to ensure that not only was the survey posted out to identified patients but other alternative options for being able to participate in the engagement was offered. To do this the engagement team have worked in partnership with Healthwatch

This partnership arrangement has meant that Healthwatch have been able to offer one to one appointments, phone calls and a text messaging services to allow people the opportunity to talk about their experiences. The survey was also available on line and this has been heavily promoted via the two CCG social media platforms – Facebook and Twitter. The survey closed on October 12<sup>th</sup> 2017 and Healthwatch have been preparing a report based on the findings and this was shared with the CCG Commissioning Teams for consideration.

The recommendations have been shared with the joint Executive and a report is being taken to the Overview and Scrutiny Committee (OSC) in mid-January. This report will be then fed back to Healthwatch.

### **Governing Body Development session**

A scheduled opportunity to engage members of both Governing Bodies from the CCGs took place in December. A presentation was delivered by Feisal Jassat (Lay Member for Engagement North Durham CCG) supported by David Taylor-Gooby (Lay member for Engagement DDES CCG) as well as Tina Balbach and Daniel Blagdon.

The presentation reiterated to members the requirements that CCGs have in relation to engagement activity. It also reviewed some of the information highlighted in the recent feedback from NHS England in relation to patient engagement information on the CCG website. This was followed up with a group discussion about the variations in Communications, Engagement and Consultation and example scenarios for members to identify what would be appropriate.

## **3. Patient Reference Groups (PRG)**

### **DDES PRGs**

The second PRG 'in Common' was held in October, at Hardwick Hall in Sedgfield. Attendees received two presentations; the first was from Paul Copeland, Project Manager for Teams Around Patients (TAPs) and covered TAPS and Integrated Health. The second presentation was delivered by Jo Laverick from Durham Community Action (DCA) on Integrated Health and Social Care.

Feedback received from PRG members on the 'in Common Meetings' has been very positive and the feeling is that it is a great opportunity to bring all members together to be involved in

discussions from different localities. The CCG will continue to work closely with the PRGs to make continuous improvements

Areas that have been discussed with the locality based PRGs during the reporting period have been:

- Primary Care Services (PCS) – patient engagement
- Care navigation
- Online consultation
- Young People's take over
- Stroke
- Teams Around Patients (TAPS)
- Mental Health Crisis Service

### **North Durham PRG**

The members of the group have continued to highlight pertinent patient issues which have included;

- Speech and Language services
- Text messaging alerts used by practices
- Screening for Abdominal Aortic Aneurysm

A presentation was delivered to the group regarding the development of Care Navigation locally. This was extremely well received and there was significant interest from members regarding how they could help to communicate and educate other members of their practices regarding the new approach. Members of the group who are interested will be invited to contribute to the workshop event in February 2018 looking at identifying the pathways that will be incorporated initially.

## **4. North Durham specific activity**

### **North Durham Patient Congress**

On the 19 October 2017 in Bowburn NHS North Durham CCG held their latest patient congress event. The focus of the event was mental health which included a presentation about the Accountable Care Partnership from Tees, Esk and Wear Valley Foundation Trust as well as anti-stigma and discrimination work through a young people's project led by Investing in Children. The event also saw workshops to discuss specific services such as Street Triage and Liaison Psychiatry.

The event was opened by a fantastic and moving 'flash mob' performed by students from New College. They performed a powerful song 'You Will Be Found' from the musical Dear Evan Hansen and incorporated their pieces of dialogue around the event venue. The purpose was to highlight a range of mental health conditions and how there are likely to be people around us every day who are affected by them without us being aware.

A full [write up of the event](#), a copy of the [slides used in the presentations](#) as well as a [video summary in pictures](#) is available on the CCG website.

### **Shotley Bridge Hospital working group**

In November the initial working group in relation to Shotley Bridge Hospital met and has patient representatives from the Derwentside area included in its membership. This group will be working over the next year to gather and analyse information about services for that population to consider what possibilities there may be for the future ahead of any required engagement or consultation activities.

## **Patient, Public and Carer Engagement (PPCE) Committee**

During this quarter there were two 'formal' meetings and one 'development' session. The formal meetings included discussions in relation to an update on the CCGs Delivery Plan provided by Mike Brierley (Director of Corporate Programmes, Performance and Delivery), an introduction to the concept of 'Practice based budgets', information regarding winter messaging, the quarter 2 engagement report, an update on the Learning disabilities Accountable Care Partnership and a review of the committees terms of reference.

The development session saw members of the committee receive an informative presentation regarding the plans for implementing Care Navigation locally in the New Year, as well as conversations regarding the outcomes from and future completion of the national 360<sup>0</sup> stakeholder survey.

### **5. DDES specific activity**

#### **Health Networks**

The engagement team attended a health network meeting in December at Durham Dales Health Network where updates were given around urgent care, stroke, mental health crisis and minor eye

The Engagement Lead also attended the East Durham Trust Annual Conference and the Health and Wellbeing Board Engagement Event in October.

#### **DDES Commissioning Priorities**

The Commissioning Priorities Public Engagement Event took place on October 12<sup>th</sup> at Spennymoor Town Hall. The event was well attended and introductory presentations were given by Dr Stewart Findley, Clinical Chief Officer, Sarah Burns, Director of Commissioning and Michael Fleming from Public Health at Durham County Council.

Participants heard four, ten minute presentations on supporting older people, cancer, urgent care and smoking and respiratory. There were facilitated table discussions after each presentation for twenty minutes where attendees gave their views, feedback and ideas around what should be our priorities in terms of planning and purchasing future health services.

The event attracted a wide range of people, members of the public as well as representatives from local voluntary and community groups.

A write up from the day is available on the [CCG Website](#) alongside photographs and videos.

The CCG are currently in the process of pulling together reports from each of the table top discussions. These reports will be shared with the presenters so they are able to provide a response and show how this public input will help to inform the decisions we make about what health services we commission. These reports will be available on the CCG website in due course.

#### **Ambulance PRG**

The Ambulance PRG was held in November and was attended by two officers from NEAS who gave updates on the current performance data across the DDES area, recruitment and the Community Paramedic Role.

It was proposed to invite representatives from North Durham PRG to this group to make it a County Durham Patient group.

### **PRG Chairs Meeting**

The Chairs met in November where the main issues discussed were the PRG in Common, STP and locality issues.

### **Skerne Medical Group**

In October, meetings took place with the Practice Manager to discuss the future of the Trimdon Village branch of Skerne Medical Group. Advice was given regarding the communication of the potential future options and also the engagement of the practice patients.

These were left with the practice manager to inform us on a way forward.

## **6. On-going partnership projects**

### **Young Carers**

- CCG representation now linking into the relevant working groups to support the delivery of this plan across County Durham.
- All GP practices have been written to regarding the take up of the Young Carers Charter. This has already seen a small number of practices contact the Young Carers service to take up this opportunity and we will continue to monitor this moving forward.
- North Durham CCG has also completed their own reaccreditation of the Young Carer Charter status during this time.

### **Gypsy, Romany and Traveller Practitioner meeting**

- The team attended the meeting in December and discussed the Primary Care Services (PCS) and the mental health crisis service engagement.
- The practitioners tried to identify some people who had accessed the mental health crisis service but unfortunately no one would discuss this subject with them.
- The team will do a site visit to in January to Ash Green Way in Bishop Auckland to attempt to speak to clients about their use of Primary Care services.

### **Investing in Children**

- The members of the health group have continued to work the DDES in relation to Primary Care Services and an agenda day is being arranged in each locality to gather views on how services could be accessed.
- Members of the group have also been helping produce an 'easy read' version of the Young Peoples Mental Health Transformation Plan to be shared across the County.
- All practices have been written to in relation to the liC Membership Award which recognises steps taken to create young person friendly aspects in services. The CCGs are continuing to work with liC to identify how best we can support our practices to take up this opportunity which can be used for evidence as part of their CQC inspections.

## **Teams Around Patients (TAPs)**

- Members of the Engagement team have continued to provide advice and support as part of the Communications Workstream involved with the development of the TAPS programmes.

## **Young Peoples Portal Board**

- Working with partners to help produce relevant content and information for young people across County Durham.
- Site now live and available for individuals to review and use.
- Initial launch has seen local Voluntary and Community Sector partners sent the link to help them provide further input to the content of the site which they feel is relevant for groups they are working with.
- More formal launch to follow in new year.

## **6. Future activity planned**

### **Care Navigation**

Discussions are underway with local Federations as well as individual practices regarding the future implementation of Care Navigation. Initial presentations have also been given to the respective Patient Groups with both CCGs to help introduce them to the subject and what this will mean in practice locally. So far there has been a very positive response from patient groups regarding the intentions for Care Navigation and the positive impacts they can see for our population.

In the New Year further work is planned with practices to identify potential areas that will be part of the initial implementation. The offer of patient involvement in this process has been made with a large number of interested individuals wishing to help contribute to the development. There was also significant interest from patient group members in how they could help to communicate and educate other members of their practices regarding the new approach. A formal communications and engagement plan is being developed to respond to this.

### **Hospital of God**

A plan of sessions and visits has been devised as part of the review of dementia services and support provided by Hospital of God. This will incorporate services provide by Hospital of God as well as similar provision provided in other parts of the county for comparison. There has already been dialogue with Durham County Carers Support in relation to the development of the questions that will be used, given that the majority of the respondents will likely be carers, friends and family members. The engagement team is also waiting for information from NECS colleagues regarding a local piece of research into dementia care that was carried out earlier in 2017. This will be used to help inform the question development and to double check against the groups that are identified for inclusion to avoid duplication.

### **Primary Care Services**

Since the implementation of the Primary Care Services (PCS) in DDES, data is showing that these services are not being utilised in the expected way. Therefore engagement will commence with patients, hard to reach group and wider stakeholders to ensure everyone is

aware of the current utilisation of services and stakeholders are given the opportunity to aid in the development of and decisions about new options for service delivery.

An Engagement plan has been designed to ensure that all the key groups are reached.

A meeting was held in December with the rural Dales councilors where they were updated on the utilization of the service. They were asked to share groups with the engagement team that they felt were a priority to work with. These groups have been added into the engagement plan.

Investing in Children (IiC) are holding three agenda days in each DDES locality to engage with young people to gather feedback on how they would respond to different health problems, where they would go and what services they would access.

**Author:** Daniel Blagdon, Engagement Lead NHS North Durham CCG and  
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**Sponsor:** Joseph Chandy, Director of Primary Care, Partnerships and Engagement

**Date:** February 2018