



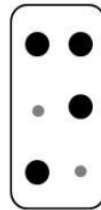
Vale of York
Clinical Commissioning Group

Patient and Public Participation

Annual Report 2018-19

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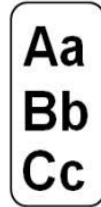
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Foreword

By the CCG's Accountable Officer

This year's engagement report highlights our work to have meaningful conversations with our Vale of York communities and demonstrates the CCG's commitment to involve patients and other stakeholders in everything that we do.

The engagement and involvement feedback we received in the last year has been used to shape local health and care services and our stakeholders' views have influenced the development of our Commissioning Intentions for 2019-20.

2018-19 also saw our engagement and involvement plans focus on clinical engagement to help create opportunities for professional learning and development for local GPs, practice nurses, Allied Health Professionals, Health Care Assistants, Physician Associates. We want to see primary care at the centre of service delivery so we can ensure that hospital based care focuses on the elements that can only be done in a hospital setting. This is why our clinical engagement events are peer-led, providing an opportunity for primary care and secondary care colleagues to share their expertise and insight.

This report also provides a very useful summary of our work, including outcomes and improvements that have been put in place. We have embedded engagement throughout all of our organisational processes within the CCG and created a wider range of opportunities for our stakeholder to have their say. We have also worked with our most vulnerable patients and service users as our work to tackle health inequalities continues.

Our local Patient Participation Groups and community groups have played a very important role in feeding back views our plans. I'd like to thank them and every other patient and member of the public that has taken the time to talk to us. I promise that we will continue with our work to seek the views of our stakeholders from across the Vale of York.



Phil Mettam
Accountable Officer

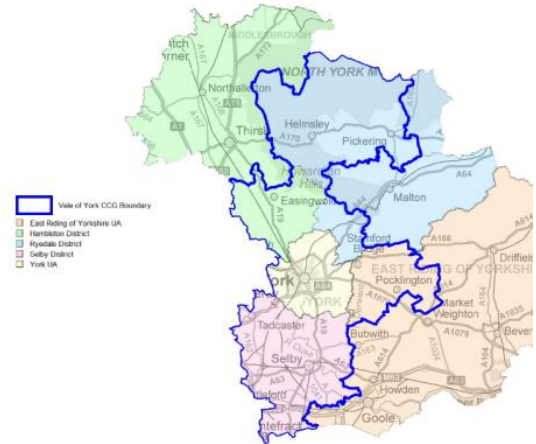
Part 1

**Background,
statutory duties and
our engagement
principles**

1. Background

1.1. NHS Vale of York Clinical Commissioning Group (CCG) is an NHS organisation. It is led by local GPs and other clinicians that treat patients every day and understand the needs of the community and the impact that local services have on patients' health. It is responsible for commissioning the following healthcare services in the Vale of York:

Vale of York Clinical Commissioning Group



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- planned hospital care
- urgent and emergency care
- community health services
- mental health and learning disability services
- services that tackle inequality, including children's health and wellbeing

1.2. The CCG services towns and cities including York, Selby, Easingwold, Tadcaster, Pickering and Pocklington and has a population of over 357,000 people. Its vision is to achieve the best in health and wellbeing for everyone in our community and it works closely with a range of partners and population to achieve its goal.

1.3. In 2017-18, the CCG had 26 member practices in its operating area and an annual commissioning budget of £461.7m. The budget is set by central government and is based upon a complex funding formula that reflects the overall health and wellbeing of the Vale of York community.

2. CCG structure

2.1. The CCG is accountable to its Governing Body, its member practices, local patients and the Vale of York community. It is overseen by NHS England, a public body that is part of the Department of Health. It engages with its public formally and informally.

2.2. Public engagement and patient experience is formally reported through the Quality and Patient Experience Committee (QPEC), which meets every two months. It focuses on quality of services within the Vale of York, patient engagement and experience.

2.3. At the start of each committee 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 accountable for patient involvement.

- 2.4. For each of the committee meetings the Head of Engagement provides an update about patient and public involvement. She discusses recent engagement activity and how this impacts upon commissioning work and decisions.

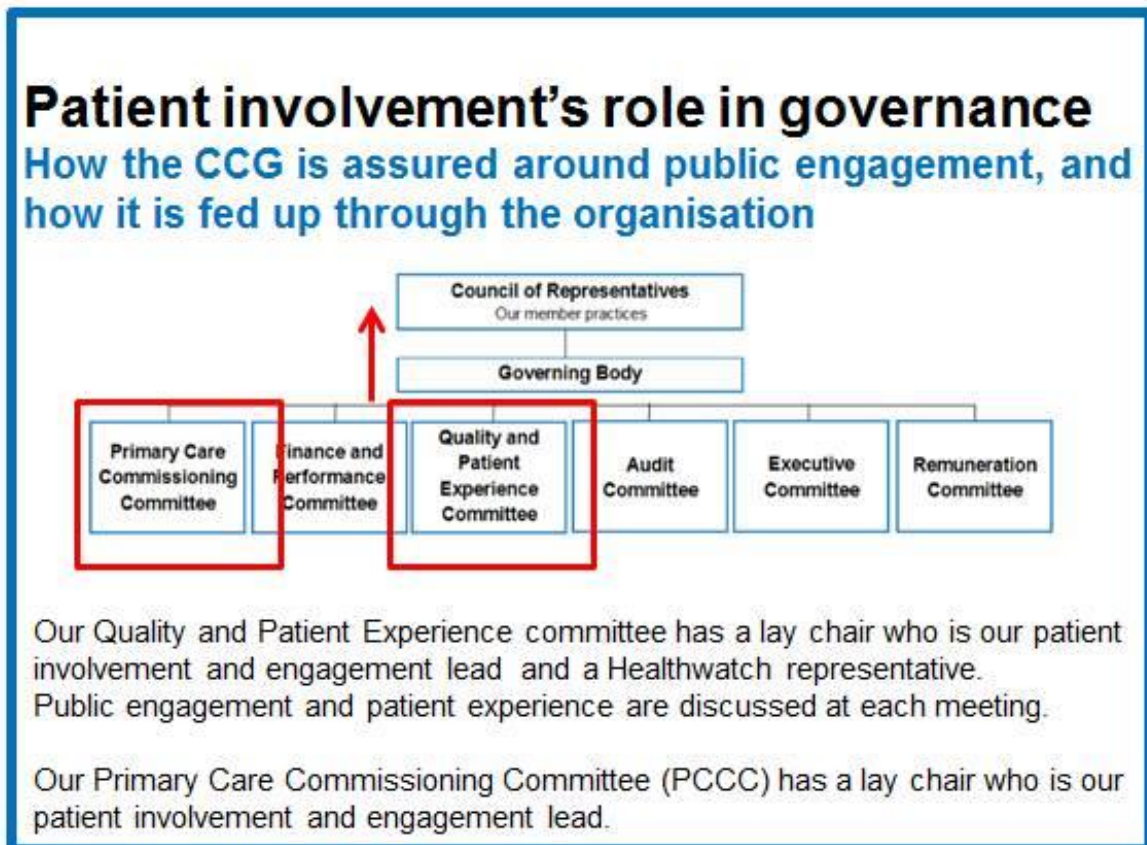


Figure 1 – Governance structure for engagement

3. The duty to engage

- 3.1. The Health and Social Care Act 2012 (section 14Z2) sets out the legal duty for the CCG to involve the public in the commissioning of services for NHS patients, and in the decisions about services that will be provided to them.
- 3.2. As part of its statutory duty the CCG is required to implement a number of key engagement activities. However, it commits to going above and beyond the minimum requirements to ensure that patients' needs are at the heart of everything it does. The CCG wants to ensure that it reflects the views of its population and has effective patient, carer and public involvement embedded in its work and in its planning processes.

- 3.3. The CCG follows and implements a set of guidance issued by NHS England. This statutory guidance outlines best practice for enabling people to voice their views, needs and wishes, and to contribute to plans, proposals and decisions about services.

4. The CCG's engagement principles

- 4.1. The CCG has a set of engagement principles based on its core values. As part of this it strives to:
- Hold open, clear informed and collaborative conversations
 - Ensure engagement is core to planning, prioritising and commissioning activities
 - Develop innovative and interactive approaches to holding engagement conversations
 - Seek and listen to views of partners, patients, carers and local citizens
 - Be honest and transparent in offering opportunities and discussing constraints and challenges to the delivery of services
- 4.2. During 2018-19 the CCG began to review its engagement principles. As part of the refresh of its engagement and communications strategy, the CCG wants to ensure that its principles reflect the needs and expectations of the community. Following a number of public forum events and meetings, the CCG's population said that building trust and relationships, regular communications, listening and providing timely feedback, being honest, inclusive and accessible are important principles and that they would like to see these embedded within the CCG's future strategy.

5. NHS Vale of York CCG Constitution

- 5.1. The NHS is founded on a common set of principles and values. The CCG's Constitution sets out the rights and responsibilities of patients, the public and staff along with the plans it has committed to achieve.
- 5.2. The Constitution is one of the CCG's pillars of governance. It describes the arrangements in place to discharge its statutory duties and functions and includes the relationships between the Council of Representatives, the Governing Body and the organisation's core management processes.
- 5.3. Within the Constitution, there is specific reference to how the CCG must make arrangements to secure public involvement in the planning, development and consideration of proposals for changes and decisions affecting the operation of commissioning arrangements.

6. How the CCG engages and involves its population

- 6.1. The engagement and involvement of patients, partners and other stakeholders is intrinsic to the commissioning and procurement of services. The CCG works closely with its communities to ensure services that are commissioned on their behalf best meet the needs of our Vale of York population.
- 6.2. The CCG creates a range of engagement and involvement opportunities to gather views. The information received is always rich in personal experience and helps to shape commissioning decisions, service specifications and improvement programmes.
- 6.3. The CCG believes that involvement is not just the role of an individual, or one team; but the responsibility of everyone in the organisation. It already uses a variety of mechanisms and networks (appendix i) to involve the local population and gather feedback, including:
 - Focus groups
 - Informal discussions
 - Formal consultations
 - Public meetings
 - Regular stakeholder newsletters
 - Social media – such as Twitter and Instagram
 - Surveys
 - Press and media
 - Meetings with voluntary groups
- 6.4. The CCG's website, newsletters and Twitter are key communications channels. It has over 5,000 followers on Twitter and followers include key stakeholders such as providers, partners, local MPs, councils and voluntary sector partners as well as members of the public.
- 6.5. We know that not everyone likes receiving information the same way. We try to provide information in alternative formats for our population; so that it can appeal to a wide an audience as possible. We particularly use our relationship with our Voluntary, Community and Social Enterprise (VCSE) networks to help distribute important messages to underrepresented areas of our community.
- 6.6. During 2018-19 a number of key campaigns around healthy hearts and self-care were launched using a variety of medium including video, social media and use of television radio and printed press.

7. Partnership working

- 7.1. The CCG works closely with its communities to ensure services that are commissioned on their behalf best meet the needs of our Vale of York population.
- 7.2. Our partnerships with local authorities have further strengthened and the CCG would like to thank colleagues for their on-going support and positive feedback via the national survey of CCGs. Our stakeholder survey results have improved and we will continue to be led by our values and actively seek opportunities for collaborating to improve outcomes and value.
- 7.3. The Governing Body's engagement with member practices has grown and strengthened, and this has led to more discussion about services and the specific needs of patients within each of its three localities.

8. Engagement with our population

- 8.1. Over the last year the CCG has focused its attention on the needs of the local population. During 2018-19 it held thousands of conversations with its communities and facilitated hundreds of events and meetings with partners and the public to help gather views about what is important to them to keep them healthy and well. This rich source of feedback has formed the foundations of the CCG's priorities. It has also proved an essential tool in raising awareness of health prevention messages and involving patients and the public in the review of services and providing feedback to improve services.
- 8.2. As has been alluded to earlier in this document, working in partnership with health colleagues, local authority partners, voluntary organisations and the wider community is vital for helping to achieve best outcomes for the local population. The CCG could not engage with and care for its residents without the continued support of the community and voluntary sector partners and the CCG would like to thank all of the organisations that have supported vulnerable members of the population to be involved.

Part 2

**Our key engagement
activities in 2018-19**

9. Key engagement activities during 2018-19

9.1. During 2018-19 the CCG worked with its population on a number of key projects. These include:



Figure 2 – Key engagement activities in 2018-19

10. Commissioning intentions for 2019-20

10.1 The CCG's commissioning intentions for 2019-20 reflect the views of local people and key community stakeholders with whom the CCG has been in conversations with over the last year.

10.2. During the summer of 2018, the CCG team spoke to hundreds of people and partners within the Vale of York about what they would like to help keep them healthy and well. The CCG's priorities for 2019-20 build on work that has been carried out in 2018-19 while moving towards longer-term planning.

You said	We did / we are doing
We want better access to GP services	Invested over £6.5million to provide improved access to primary care services in the evenings, at weekends and bank holidays
Timely access to mental health services is needed	Invested £220k to improve access to ADHD diagnosis services and Child and Adolescent Mental Health Services
Cancer services are important	Cancer champions Better survival rates Speeding up diagnosis times Improving diagnostic testing
Increase the focus on prevention	Social prescribing - designing better personalised, preventative care to help people to feel well. Launch of a self-care campaign to encourage our community to use NHS services wisely and self-treat many common illnesses and ailments

Figure 3 – You said, we did: Priorities 2018-19

11. Working with local Healthwatch and forums

- 11.1 The CCG works closely with colleagues at Healthwatch York, North Yorkshire and East Riding of Yorkshire to seek the views of patients, carers and service users. Its role is to provide a single point of contact for people to report their experiences, concerns or their compliments about health and social care. The CCG receives copies of the feedback and uses these to work with providers in primary care, acute care and community services to improve the experience for patients.
- 11.2 The CCG regularly attends local Healthwatch Assembly meetings and has presented on several occasions during 2018-19.

Date	Activities with Healthwatch partners
April 2018	<p>The CCG's Executive Director for Primary Care and Population presented the CCG's commissioning intentions and priorities for 2018-19.</p> <p>The CCG's Senior Quality Lead talked about the work that is taking place within care homes and the training and support that is offered to staff working with some of the most vulnerable patients in our community to recognise deteriorating residents, to improve safety and to raise awareness of pressure ulcers.</p> <p>The CCG's Quality Lead for Primary Care gave feedback on the development of a Learning Disability nursing service to help improve the uptake of annual health checks.</p>
October 2018	<p>The Executive Director for Primary Care and Population Health gave an update about how the CCG is performing against its priorities of GP services, mental health and cancer services.</p>
January 2019	<p>CCG's Head of Engagement provided an update on areas of patient feedback and where these helped to shape the commissioning intentions for 2019-20. A table top exercise was conducted to gather views to feed into the CCG's communications and engagement strategy and formulate its engagement principles.</p>

Table 4 – Key Healthwatch engagement activities in 2018-19

12. Maternity Voices Partnerships (MVP)

- 12.1 The CCG accesses a number of forums and channels where patients and members of the public are represented. These groups help assure the CCG's public involvement work.

12.2 In 2018 we set up a Maternity Voices Partnership (MVP) forum and appointed a lay chair, Emily Pickard.

12.3 Previously known as Maternity Services Liaison Committees, a Maternity Voices Partnership (MVP) is a group of women and their families, commissioners and providers (midwives and doctors) working together to review and contribute to and co-design local maternity care.



12.4 The group shares, plans events and focuses on collecting patient and service user feedback to improve services.

12.5 As part as our work to increase engagement and seek opinions about certain aspects of maternity services in relation to the national maternity review 'Better Births', we attended a children's activity day event in York in May 2018. We talked to parents about their experience of care, what they though was important and how they might like to be involved in helping to develop your local maternity services. They told us that the following priorities were important to them: Better postnatal and perinatal mental health care, continuity of carer and personalised care. This feedback had contributed to the work plan for the MVP during 2019-20.

13. NHS 70 celebrations

13.1 The National Health Service turned 70 on 5 July 2018. The CCG embraced the celebrations not only as a CCG, but across the Vale of York community to reflect on the history and achievements of one of the nation's most loved institutions. More can be found here: <https://www.valeofyorkccg.nhs.uk/nhs70>

13.2 During June and July 2018 the CCG organised over 20 events in collaboration with local communities, health partners, local authorities, businesses, libraries and voluntary sector (appendix ii). These events focused on acknowledging the good work of the NHS and its staff, whilst raising awareness around key priorities of self-care, mental health and tackling loneliness and isolation.

Our NHS 70 celebrations in the Vale of York



Date	NHS 70 activities
<p>Community health bus tour on 1, 15 and 18 June 2018</p>	<p>The CCG boarded a double-decker bus to visit various sites across its patch in York, Selby and Easingwold, and members of the public were invited to hop-on board and receive healthcare advice, learn more about health check-ups and sign health pledges.</p> <p>The aim of the tour was to take the celebrations and engagement into some of the most deprived and rural areas of the community in partnership with health, voluntary sector and local authority colleagues.</p>
<p>Involving local employers in helping to improve the health and wellbeing of their staff June and July 2018</p>	<p>Over 50 organisations in York sent representatives along to a business briefing, held in partnership with the CCG, the City of York Council’s Public Health team and the local MPs to work with local employers and look at how they can help support the health and wellbeing of their workforce. Many signed up to give health checks to their employees and took leaflets and advice about vaccinations, healthy work place and carers’ information.</p> <p>London North Eastern Railway (LNER), formerly Virgin Trains East Coast, was the first organisation to take the opportunity to join forces with the CCG, hosting an event at York Station where staff members signed pledge cards and wrote goodwill messages in the CCG’s giant NHS70 birthday card.</p> <p>Staff from the CCG also pledged to donate thousands of miles to the NHS this year, by taking part in regular physical activity throughout 2018 as a collective birthday present to the NHS.</p>
<p>NHS 70 giant birthday card tour June and July 2018</p>	<p>The CCG created a 4ft high birthday card to mark the occasion. In the weeks leading up to the 70th birthday, the birthday card toured all four corners of the Vale of York so people could sign their names or write their messages to express what the NHS means to them and their families. Communities were encouraged to have a conversation about how to keep their communities healthy and well.</p>
<p>1940s themed tea-party celebrations 5 July 2018</p>	<p>The CCG held a 1940s-themed event to celebrate 70 years of the NHS on 5 July and everyone was invited to celebrate and become involved in raising awareness around self-care, tackling loneliness and isolation and supporting those with a mental and physical health condition. The conversations with the community have helped feed into a number of campaigns and the CCG’s latest commissioning intentions.</p>

Figure 5 – NHS 70 engagement activities in 2018-19

13.3 We used all of the feedback and pledges from conversations with the community at the NHS 70 events to influence areas of our work and to guide our future planning.



Fig 6 – Examples of the community’s feedback that has shaped our work

14. Working with carers

14.1 The CCG is committed to hearing the voice of the carer and their families and this is most notable through its engagement work. The CCG regularly attends the Carers’ Advisory Groups (CAG) and other forums such as York Parent

Carers forum. These groups are run by carers and professionals to represent the needs of carers.

14.2 In 2018-19 the CCG has led on the following pieces of work with carers through these forums:

- Understanding the view of carers who use patient transport
- Raising concerns about the change in continence product provider, and working with the hospital Trust to convene a focus group to understand issues of the new product and involving the most vulnerable patients in the process
- Involvement in developing the City of York's new Carers' Strategy
- Providing training around recognition and support for carers within GP surgeries in partnership with York Carers Centre and members of the East Riding of Yorkshire Carers Advisory Group
- Supporting GP surgeries to become carer friendly employers
- Training with carers to recognise pressure ulcers and deterioration of family members
- Review of transition services to support parents of young people with special educational needs and disability (SEND) on moving into adulthood
- Autism pathway review with York Parent Carer Forum (Parents of children with autism) and improving communication tools

15. Improving access to General Practice

15.1 Between February and April 2018 the CCG gave its population the opportunity to think about their needs and then tell the CCG how they would like evening and weekend general practice appointments to be delivered. This was conducted through an online survey and face-to face events in railway stations, colleges and supermarkets to target those who may need appointments outside of normal working hours.

15.2 During our engagement period we were able to look at the equality monitoring information to establish who had completed the survey. At the initial stages of the survey period mainly received responses from our population in the 65 and over age range. As the GP evening and weekend hours may benefit those who may be occupied during the day (caring, working or in education) we wanted to target a wider range of our population. We also noticed a lower take up of people with a learning disability/difficulty.

15.3 We decided to target some specific areas of our population:

- Commuters – by giving out leaflets at rail stations early morning and evening
- Large employers within York – by emailing staff comms teams at Nestle, Aviva and the Council.
- Students – By sending information to universities and speaking to students at York College during a health and wellbeing day.

Where our population received the survey	Percentage of responses
GP practice	18.16%
Local Press	3.77%
CCG website	2.51%
Other website	3.77%
Twitter	7.26%
Facebook	7.54%
Email	21.23%
Given survey	10.06%
Other	28.35 (Highest responses include through work (Nestle), Local library and University)

Figure 7: How people heard about the GP access survey

- We also worked with York People First (an advocacy group run by Trustees who all have a learning difficulty) who sent out the survey with its newsletter.

15.4 The CCG received 1,043 responses through a mixture of online surveys and paper questionnaires.

15.5 In developing the new model of care, the CCG has listened to its population and set up services based on what the population has said they want. This included the days and times they preferred, as well as offering telephone appointments and sessions via the internet through an app called 'PushDoctor'.

The community said

I would be prepared to have a consultation over the internet

I would be happy to see a clinician from another practice for one-off care needs

We listened

The practices in the North Locality are working out of two hubs in Easingwold and the clinicians are covering these hubs between them.

We have introduced the 'PushDoctor' online option to see a clinician

Figure 8 – Examples of the community's feedback that has shaped our work

16. Hearing the patient story

16.1 As part of commitment to ensuring the patient, carer and public voice is heard within the organisation, the CCG has now embedded a patient story as a regular item at the start of each Quality and Patient Experience Committee.



16.2 Patient stories bring experiences to life and make them accessible to other people. They encourage those that work in health and social care to focus on the patient as a whole person rather than just a clinical condition or as an outcome. The CCG invites 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.

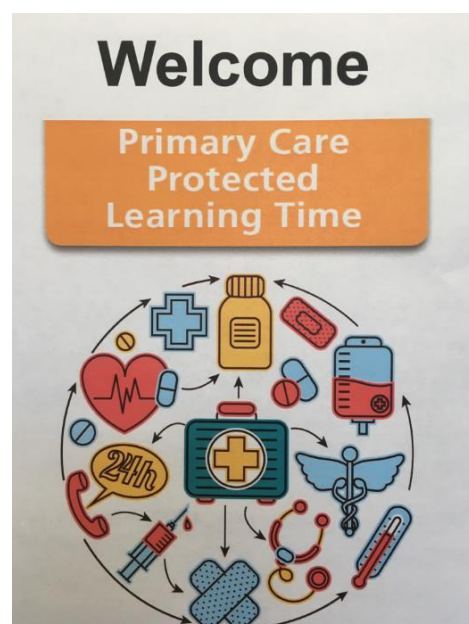
16.3 Within the 2018-19 year the CCG heard a patient story from a family member of a resident of a care home who was part of the Continuing Health Care (CHC) assessment, how it felt to access mental health services in times of crisis, the experience of end of life care services, feedback on child and adolescent mental health services and two stories related to opiate prescribing. These stories have fed into action planning and service development.

17. Clinical engagement

17.1 The Governing Body's engagement with member practices has grown and strengthened, and this has led to more discussion about services and the specific needs of patients across our patch.

17.2 In the past year there has been a great focus on clinical engagement across the Vale of York, in particular with colleagues from Primary Care.

17.3 In early 2019 the CCG, in partnership with Hull and York Medical School, introduced quarterly Protected Learning Time (PLT). These peer-led sessions set aside



dedicated time for Primary Care colleagues to learn and share best practice. We were delighted that over 330 GPs, Registered Nurses, Health Care Assistants, Allied Health Professionals and Physician Associates from across the Vale of York attended the inaugural session in January 2019. Workshops included a focus on resilience, children's mental health and dementia, end of life care, reducing opiate usage, safeguarding and innovation and workforce.

17.4 These events will be the key to forging relationships and building clinical networks over the coming years. This has been an important step forward in creating a structured environment for shared learning which will lead to improved care for patients. It will also create an environment which supports the retention of local clinicians and offers a basis for future recruitment.

17.5 Feedback was hugely positive and colleagues from across primary care have had the opportunity to shape future events.

Our clinicians said

We want protected time to get together, network and learn

We listened

We now host quarterly protected learning time events for primary care covering a range of topics from mental health and end of life care, to paediatrics, prescribing and interpreting liver tests

Fig 9 – Examples of the feedback from primary care that has shaped our work

17.6 During 2018-19 we have been working very closely with our primary care nursing staff. Practice based nursing staff and Health Care Assistants deliver vital work in their important roles. Our lead for Primary Care and colleagues from our Quality and Nursing Team have been instrumental in coordinating a practice nurse engagement network. This includes, building relationships to share learning and improve service delivery/patient care, involvement in the CQC Ready programme, improving communications (Practice Nurse Engagement, website, nurse meetings-local and strategic planning, Practice Nurse Forum 2018), and celebrating success through nominations and winners at the General Practice Nurse Awards 2018 and 2019.

18. Supporting our staff and embedding engagement in all projects

- 18.1 The CCG has designed a toolkit to provide staff with resources to help them to assess the level of public and patient engagement that is needed within any project large or small. The CCG uses the NHS England patient and public engagement statutory guidelines to assist with decision making. This process includes tools such as a stakeholder mapping process, guidance for equality impact assessments and a template to address if the legal duty needs to be applied.
- 18.2 The CCG wants to be sure that the decisions it takes make a real, positive difference to its population. To ensure that participation activity reaches diverse communities and groups with distinct health needs the CCG uses a Quality and Equality Impact Assessment tool to assess and measure the potential impact of proposed service changes or reviews, as well as the need for patient and public involvement.
- 18.3 The CCG provides regular updates to staff to emphasise the importance of involving patients and public in its work. Training sessions were held throughout 2018-19 for all staff to:
- increase awareness of the legal duty to involve
 - encourage staff to incorporate communications and engagement throughout any project cycle, and
 - improve knowledge of the connection between equality, engagement and health inequalities duties within the NHS.
- 18.4 The CCG also publishes weekly communication newsletter containing information on future events, feedback from our population and links to useful articles, documents and videos about patient and public participation.
- 18.5 Opportunities to attend and help at engagement events are also offered by to CCG staff. To date more than 40 colleagues have participated in engagement activities.

19. Tackling health inequalities

- 19.1 Health inequalities are the differences in the health of different parts of the population. We are committed to addressing health inequalities and understand that some groups of people, including people with protected characteristics` experience different access, experience and outcomes when they use NHS services. The impact of this can be inequalities that affect broad groups of patients, families and carers. Being a member of certain groups e.g. those with a physical disability or a mental illness, Black and Minority Ethnic (BME) groups

and the homeless also play a part, due to social marginalisation, poor access to services and likelihood of income deprivation.

- 19.2 Tackling health inequalities is a long-term process, but with the strength of partnership working we can shape joint plans for the coming years around the need to promote self-care and prevention work to help people improve their health and wellbeing.
- 19.3 That is why, in addition to offering tailored and individual support services, the CCG has been working with its Health and Wellbeing Board partners in the City of York, North Yorkshire and the East Riding of Yorkshire to create an environment that makes healthier choices easier. The CCG takes a holistic approach to reducing health inequalities by:
- considering the impact on health inequalities in every decision we make and every policy we deliver;
 - allocating resources to where they are needed most;
 - working in an integrated way for individuals and communities who suffer poorer health outcomes;
 - working with individuals / communities to develop community based solutions to improving the health and wellbeing of our population.
- 19.4 As part of the Health and Wellbeing Board we use the Joint Strategic Needs Assessment to help identify the health and wellbeing needs of our local population and to inform the development of services and engagement activities to reduce health inequalities.
- 19.5 The CCG has taken a proactive approach towards the use of engagement in addressing health inequalities, and has undertaken a number of activities designed to increase its reach to diverse groups of people. This has ranged from working with people in our community with a learning disability to understand any barriers they may experience to accessing healthcare. It also includes our work with the Parent Carer Forum to review the autism pathway through to taking a bus into some of our most rural and deprived communities to reach people in locations where the CCG has not historically had a presence. As a result, the CCG has been able to engage with new audiences and gain additional views as to where services are most needed.

Improving better health outcomes for people with Learning Disabilities

Following attendance at a Learning Difficulties (LD) forum run by York CVS, people with Learning Difficulties told us there were a number of barriers which prevented them from accessing healthcare and attending health checks.

Adults and young people aged 14 or over with a learning disability on the GP practice Learning Disability (LD) register should be invited to attend an annual health check. Annual health checks promote early identification of health issues to allow for appropriate and timely care and also provide opportunity to explain the national cancer screening programmes.

However, following a survey with our GP practices a study found evidence of a discrepancy in cancer screening (bowel, breast and cervical) between the LD and non LD population in the Vale of York.

A new LD Support Team in York has been commissioned and is led by a GP Partner from Haxby Group Practice. The LD Support team with the LD population and other stakeholders will produce a healthcare service that is accessible and appropriate to meet the specific needs of the LD community.

Improving access for LD patients will increase the number of health checks completed with the aim of improving health outcomes. Specific goals include: develop a team able to signpost resources for LD patients and carers, advise practices about clinical coding and registers, roll out a new template and easy to read invite documents across all practices, improve the number and quality of annual health checks, improve screening uptake rates, reduce late cancer presentations, reduce early mortality. The team will gather data to evidence an improved healthcare service for the local LD population.

Figure 10 – Improving health outcomes for people with a learning disability

Helping support the vulnerable

The Quality and Nursing Team supports the local nursing and care workforce to ensure that quality and compassionate care is delivered to some of our most vulnerable population. This work includes engagement through education and skills improvement, via initiatives such as pressure ulcer identifications and recognising a deteriorating resident.

In 2018-19 the CCG engaged care homes and has trained 91 per cent of care home staff, with 72 per cent of homes having 100 per cent of their staff trained on the

React to Red (pressure ulcer) programme. In addition a public facing campaign was supported and staff spend time talking to hundreds of members of the public in Tesco to raise awareness about pressure ulcers.

Information about the CCG's work with care homes and domiciliary care agencies is published at <https://www.valeofyorkccg.nhs.uk/care-homes-our-partners-in-care-1/react-to-red-skin-stop-pressure-ulcers/>.

Figure 11 – Helping support the vulnerable

Palliative Care and End of Life Care services

As part of the on-going improvements for patients in receipt of palliative and end of life care the CCG arranged a number of sessions during Autumn 2018 with clinicians, carers, care homes, service users and the public about their experiences.

The CCG spent a day at the St. Leonard's Hospice Sunflower Centre, talking to patients with a life limiting illness, their families, people who have recently lost loved ones and volunteers. In addition the CCG held a public facing event on 22 November, chaired by the CCG Clinical Lead (GP) for End of Life Care.

This information was used to shape the End of Life Care Strategy and will help to create a soon to be published Citizen's Charter that aims to improve and further develop end of life care and support services.

Figure 12 – Palliative care and end of life care service

20. How we hold providers to account on patient experience and public involvement

- 20.1 As part of the CCG's legal duty, we monitor our providers' patient experience and feedback through a number of channels including contract management boards, through our patient relations team.
- 20.2 The Quality Assurance Strategy and accompanying framework sets the CCG's objectives, responsibilities, and governance arrangements for the monitoring and assurance of quality in the services it commissions. One of the main objectives is to ensure that services commissioned are safe, effective, provide good patient experience and ensure continuous improvement.
- 20.3 We capture feedback from service users about providers through compliments, complaints, patient experience feedback reports and the results from surveys. In addition visits to providers' services are undertaken to review the quality of services.

21. How we have used patient insight and feedback to improve services

- 21.1 The Engagement and Patient Relations Teams meet each month to analyse patient insight to identify key themes of feedback.
- 21.2 A strong example from December 2018 includes feedback about the Accessible Health Standards where, at a visit to MySight York, the Head of Engagement was made aware that some of its members had recurrent issues around receiving accessible format information from a local provider. The CCG's Patient Relations Team investigated further and concerns were shared with the provider which resolved the immediate issue for this patient cohort and put in place plans to overcome the issue for other patients.
- 21.3 Another example, recorded through the CCG's Patient Relations Team and the CCG's work with local carers groups, allowed for the capture of feedback about a change in continence products in June 2018. On investigation, the Provider had procured a new supplier and some service users and carers raised concerns about the product. The CCG's Deputy Chief Nurse liaised with the provider about these issues and arranged an event hosted by the provider listen to patients and their carers. The need for better communication with patients and involving them more in the process was an important learning point taken from this event.

The community said

I am not receiving information in large print from my local healthcare provider

We listened

We contacted the local trust to highlight this concern, which in turn allowed them to review their Accessible Information Standard process

Figure 13 – Examples of patient experience feedback that has shaped the work of our health partners

22. The next steps

22.1 Building on the engagement strategy and engagement action plan the CCG will continue to involve its patients, service users, partners and the wider community in its work. The next year will move into more targeted engagement and communications, focusing on the needs of our local population. The development of Primary Care Networks (PCNs) will encourage more local working and delivering services around the needs of the population.

22.2 We will look to implement the following strategic communication and engagement objectives to support the overarching vision of what needs to be achieved to address local health issues within our community.

22.3 The communications and engagement strategy for 2019-22 will have clear priorities, a long-term focus and to maximise the potential for change on a broader societal level (appendix iii) it will encourage and facilitate stakeholder participation.

- **Person centred**
Understanding the health needs from a patient / service user perspective to encourage greater community participation.
- **Results oriented**
Focusing on the positive outcomes for local patients to help them increase their knowledge and adopt healthier behaviours.
- **Evidence based**
Communication and campaigns will be based on formative research and data that identifies practical solutions for our community. Facts, vision, stakeholder buy-in, and audience participation will be essential for success.
- **Participatory**
Promote participatory decision making, planning, implementation and evaluation with stakeholders.
- **Promote self-efficacy**
To reinforce individual and collective self-efficacy to support local communities to assert their will over health inequalities.
- **Using many alternative methods of communication**
Using dynamic, two-way exchanges of information and ideas through one or a combination of tools that are most appropriate to the audience.
- **High quality**
Designing high quality communication messages and materials and delivering effective online and offline community-based activities.
- **Sustainable communications programme**
Reaching new audiences and adapting to changes to achieve a long-term impact that maximises the potential for change on a broader societal level.

Part 3

Our case studies

Working with external partners, John Brown, Healthwatch York

The CCG has a close relationship with Healthwatch York to join up working and engage with patients and the public. There are a number of specific activities throughout the year which demonstrate this.

West Offices stand

Through the CCG, Healthwatch host a stall in West Offices the second Monday of every month. This arrangement is highly regarded by Healthwatch as the best of the functions Healthwatch operates on, largely because of the high footfall which isn't captured anywhere else on a regular basis. In four hours community champions can engage with members of the public visiting the council and sign post them – if necessary – to a relevant organisation. It is also an opportunity to populate questionnaires and receive feedback on services.

John Brown, Healthwatch York said, "West Offices is a brilliant venue for Healthwatch to engage with a mixed population. Having a regular residence means people know where to find us and repeat customers can provide updates on the services they are receiving"

Healthwatch Assembly

The Healthwatch Assembly is a twice yearly event which invites all of the partner organisations who support Healthwatch in anyway. The event is for sharing best practice and engaging in discussions about health and social care issues topical to the Vale of York population. The CCG is a critical partnership which makes formal contribution to the Assembly with senior doctors and GPs contributing to the agenda. This includes facilitating discussions, sharing information and proposing ways to improve patient care and experience.

NHS70 Bus

Healthwatch was one of the organisations who joined in the NHS70 celebrations with the CCG. The double decker bus and giant birthday card directly attracted members of the public to come forward and celebrate the services available to them. This created an opportunity for Healthwatch to signpost people in a 'one-stop-shop' space with everyone together. The bus covered a large geographical space and members of the Healthwatch team joined it for the entire duration which strengthened relationships.

John Brown, Healthwatch York said, "The CCG are excellent with partners and always very open in and amongst the public. I believe that Vale of York CCG is among the best of the CCGs for straightforward relationships with other organisations."

Figure 14: Case study one

Hearing the patient story

Jenny Brandom, Deputy Chief Nurse, NHS Vale of York CCG

Patient stories are integral to influencing the decisions Vale of York CCG make in commissioning. They help identify population needs and where to commission services that will be most beneficial.

Listening to patient experience not only empowers the patient but strengthens the relationship the public have with healthcare services. In direct response to patient stories in 2018 – 2019 Vale of York CCG has:

- Worked more collaboratively with providers, local authority and education
- Developed an integrated policy and care pathway with social care to reduce duplicity and improve communications
- Developed targeted transition (from child to adult services) work
- Developed targeted Special Educational Needs and Disability (SEND) work to address reforms required and quality of Education, Health and Care plan
- Worked on a smoother transition from child to adult services

Jenny Brandom, Deputy Chief Nurse said, “Through patient stories, we are able to improve commissioning activities and develop a positive relationship with our population.”

“We’ve heard from a number of people in receipt of mental health services, Continuing Healthcare, Care home provision and children’s services to create stories which are shared amongst healthcare professionals.”

Patient stories are recorded either digitally or in a document which is presented at Governing Body meetings, other staff meeting, forums, patient experience reviews and cascaded in online communications. This ensures all health and social care professionals who support the population are engaging in how services affect patients directly - using feedback to make informed decisions.

Figure 15: Case study two

Helping vulnerable people

Sarah Fiori, Senior Quality Lead for Care Homes, NHS Vale of York CCG

Through engagement with care home staff in the Vale of York, the CCG participated in NHS England's 'React to Red initiative' which reduced the number of elderly people experiencing pressure ulcers primarily in care settings.

'React to Red' is an NHS pressure ulcer prevention campaign committed to educating about the dangers of pressure ulcers through training to recognise increased risk. Pressure ulcers are largely preventable, posing significant healthcare challenges for the most vulnerable and frail such as pain, reduced mobility, social isolation and increased dependency.

The Senior Quality Lead led the implementation delivered by a Project Nurse and an Assistant Practitioner to reach 1,736 eligible staff across 66 care providers in the Vale of York. Successful delivery relied upon on going engagement with care home staff to build relationships, trust and credibility. This dedicated engagement stimulated enthusiasm for further work benefitting staff, informal carers and residents.

React to Red has been a success across the Vale of York in reducing pressure ulcer incidence and severity by 75%, an example of collaborative working between health, social care and the wider community.

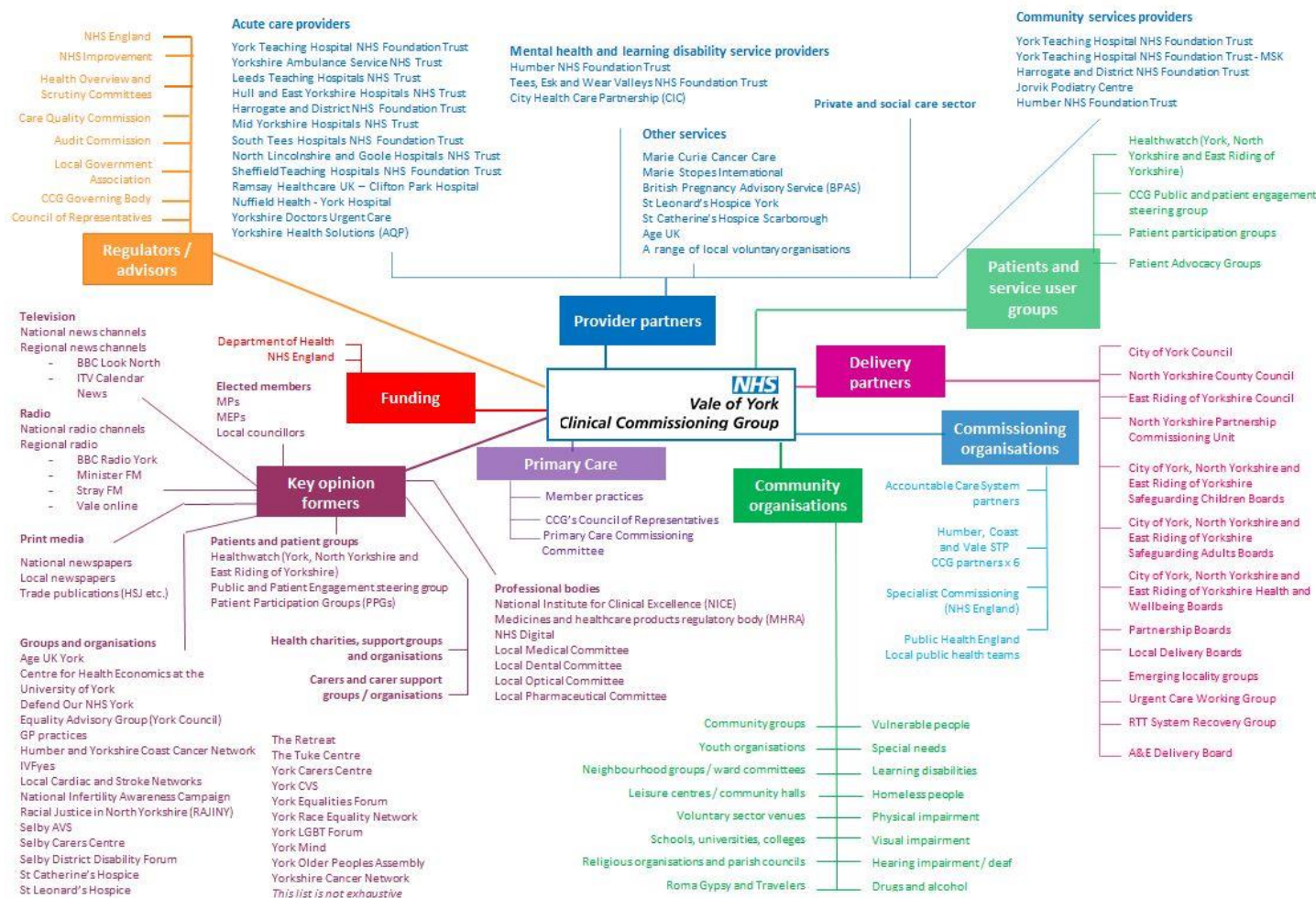
Thanks to the programme other health issues have been identified relating to nutrition and hydration, and mobility and continence. These were able to impact on the reduction of other harms in the elderly such as falls, Urinary Tract Infection (UTI) and Acute Kidney Injury (AKI) which all contribute to increased quality of life for residents.

On-going engagement work with care home staff continues in a new initiative which will follow an approach to reducing the risk of falls.

Figure 16: Case study three

Appendices

Appendix i: Our stakeholder network



Appendix ii: Our NHS 70 events roadshow

Date	Event
8 May 18	Voluntary Sector Forum, 10am-12pm
18 May 18	Acomb Library Explore, 10am-3pm
30 May 18	Mumbler maternity event at York Mount School
1 June 18	Bus Tour York Central – Parliament street and Acomb high street
4 June 18	People Helping People Launch (CVS and CYC)
7 June 18	Tommy Whitelaw: What matters to you? Two sessions
8 June 18	Employers meeting at West Offices 15.30-17.00. Over 50 organisations represented.
11 June 18	West Offices Foyer, 11am-1pm
12 June 18	Festival of Ideas, University of York, 12pm-2pm
15 June 18	Bus Tour Easingwold and Monks Cross
18 June 18	Bus Tour Selby and surrounding areas
2-6 July 18	Acomb, York, Clifton and Tang Hall Libraries NHS70tea party celebrations
2 July 18	Tea and cake at East Riding Carers Advisory Group
3 July 18	Pocklington Carers forum tea and cake
4 July 18	Staff NHS 70 Celebration, 1-2pm
5 July 18	West Offices Tea Party in the foyer, 1-3pm
5 July 18	NHS 70 – celebration at York Minster
7 July 18	Selby War Memorial NHS70 celebrations, 1pm-4pm
19 July 18	Health and wellbeing session with LNER (trains)

“ Communication that creates distinctive, positive discussions that is supported with messages that can position a permanent foothold in the minds of the target audience. ”

Positive

Unique

Niche

Competitive

Helpful

Clear

Commands attention

Caters to the heart and head

Communicates a benefit

Conveys trust

Consistent

Calls for action