

# Patient and Public Participation

## Annual Report 2017-18



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# Foreword

## By the Accountable Officer and the Lay Chair of the Quality and Patient Experience Committee

The engagement and involvement of patients, partners and other stakeholders are key to the commissioning of services in the Vale of York. The CCG puts quality and safety of patients at the heart of its work, with the commissioning of services informed by local need and influenced by the engagement and involvement of the community through open and honest conversations with patients, service users, our partners and other stakeholders.

In 2017-18 we created a range of engagement and involvement opportunities to gather the views of patients, service users and other stakeholders. The feedback received through our series of 'Big Conversations' events was rich in personal experience and helped to shape the coming year's plans and improvement programmes.

We launched our Commissioning Intentions in February 2018. One of the most positive features of the commissioning intentions is that they reflect the issues that the local community highlighted at our series of engagement events. These plans, alongside our important work with partners to strategically develop and deliver services in joined-up, integrated ways will help to manage the risks around delivering the local system's financial, performance and quality improvement. We aim to achieve this through the transformation of acute services, the strengthening of our primary care provision and the development of mental health services – all of which were highlighted by local patients and the public as being important to them.

Knowing what is important to the community at the planning stages has proved essential and helps with our work to develop a safer and stronger community, supporting key prevention and behaviour change initiatives that can ultimately reduce demand on more expensive interventions.

Stakeholder views also make a meaningful contribution in helping to shape services and to achieve the best possible outcomes and we will continue to ensure that wide and collective patient and public participation is embedded in the commissioning and improvement of local services.

We continue into 2018-19 with our call to the local community to be involved and tell us what is important to them about local health and care services. This document is a summary of our work and successes in the last 12 months.



**Phil Mettam**  
Accountable Officer



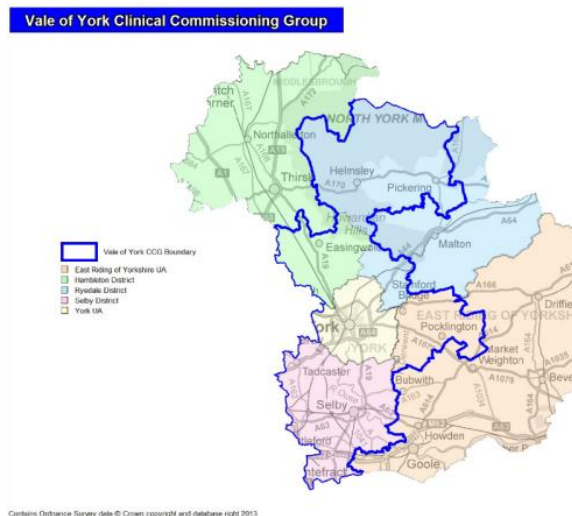
**Keith Ramsay**  
Lay Chair of the Quality and Patient Experience Committee

## 1. The context: The CCG and what it does

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:

- 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

1.1.1 The CCG services towns and cities including York, Selby, Easingwold, Tadcaster and Pocklington and has a population of over 350,000 people. It's vision is to achieve the best in health and wellbeing for everyone in our community and it works closely with a range of partners to achieve its goal.



1.1.2 In 2017-18, the CCG had 26 member practices in its operating area and an annual commissioning budget of £455.1m. 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. Public engagement and patient experience is formally reported through the Quality and Patient Experience Committee (QPEC) that meets every two months.

## 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.

#### **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.

#### **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. Engagement strategy and action plan**

6.1. The CCG's [engagement strategy 'Involving Local Communities 2016-19'](#) sets out its intentions for ways in which it aims to involve stakeholders and the local population. Engagement plays a vital role in achieving the local, strategic initiatives and delivering the best health and wellbeing within the resources available.

6.2. As part of its engagement work the CCG has created an [engagement work plan](#) to ensure that it carries out what is set out in the strategy. This work plan was approved at the February 2017 Quality and Patient Experience Committee and at the May 2017 Governing Body.

## **7. How the CCG engages and involves its population**

- 7.1. 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.
- 7.2. The CCG created 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.
- 7.3. 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 to involve the local population and gather feedback, including:
  - Focus groups
  - Informal discussions
  - Formal consultations
  - Public meetings
  - Regular stakeholder newsletters
  - Social media
  - Surveys
  - Meetings with voluntary groups
- 7.4. 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.

## **8. Listening to the Vale of York population**

- 8.1. This year the CCG has focused its attention on the needs of the local population by holding a series of "Big Conversations" with those living in the Vale of York area around healthcare priorities. During 2017 the CCG asked people: "What is important to you about local healthcare services?"
- 8.2. Over the course of 2017-18 the CCG held and attended over 100 events and forums and talked to over 1,200 people. The events focused on enabling the local community to share their views on how we can work together to ensure a sustainable health and social care system. They ranged from public events with the Accountable Officer and clinical leads, to working with the voluntary sector and local Healthwatch teams, as well as hosting library, market stall and student drop-in sessions to ensure as wide a range of views as possible were captured. Thank

you to all those who took part!

- 8.3. In particular, between July and October 2018 the CCG held over 40 face-to-face events specifically as part of its 'Big Conversations'. These sessions specifically focused on the current financial challenges and asked the population what their priorities for healthcare would be. The system spends more on health than it can afford and as a result the local health and care system needs to work in new ways to help improve outcomes and achieve value for money. It was important for the local population to have the opportunity to have their say about the future delivery of health and care in the Vale of York.
- 8.4. The focus of the engagement was around six 'Big Conversation' public events in Easingwold, Helmsley, New Earswick, Selby, York - West Offices and York - Priory Street. Two sessions were held in the afternoon, and four in the evening to allow a variety of availability for people to attend. A presentation and discussion format was adopted.
- 8.5. In addition to the public meetings, the CCG also went out into the community to help capture views from a range of our population.
  - 8.5.1 Market stalls - Two sessions. Drop-in sessions were held at market days in Pocklington and Selby, where CCG staff and Healthwatch volunteers talked to members of the public to gather views on local health services and their thoughts on the financial challenge.
  - 8.5.2 Library stalls - Thirteen sessions. The CCG collaborated with York Explore and North Yorkshire libraries to hold a number of drop-in stalls at local sites across York and North Yorkshire. These included Bishopthorpe, Copmanthorpe, Dunnington, Fulford, Haxby, Huntingdon, New Earswick, Pickering, Poppleton, Sherburn in Elmet, Strensall, Tang Hall and York Central.
  - 8.5.3 Patient Participation Groups. Several GP practices have Patient Participation Groups (PPGs) that meet on a regular basis to discuss primary care based health and care and how improvements can be made for the benefit of patients and the practice. The CCG has attended and presented at PPGs across the Vale of York. Twelve of the sessions we specifically focused on priorities and the financial challenge.
  - 8.5.4 Forums - Seven sessions The CCG presented at several voluntary sector forums and groups including the Learning Difficulty Forum, Voluntary Sector Forum, the Carers' Advisory Group in East Riding and York and the local Ageing Well and Mental Health Forums.
  - 8.5.5 Student events - During September, the CCG teamed up with local university, York St. John, and York College to ask students and young people about what was important to them when accessing healthcare. Information stalls and a session

about health at the Student Experience Zone were engagement methods used at these events.

## **9 Commissioning on behalf of the community**

- 9.1 The feedback and comments collated from events throughout 2017-18 have provided the foundations for the CCG's Commissioning Intentions – the organisation's strategic direction over the next two years. Listening to the population's views and experiences – including the need to improve access to GPs, calls to place more focus on mental health and provide more joined-up services, along with the requests for information and support to help people to stay healthy and well have been reflected in CCG's future priorities.
- 9.2 Collecting these views at the draft planning stage has proved essential and this will help to develop:
- a safer and stronger community
  - support key prevention and behaviour change initiatives and
  - reduce the demand on expensive healthcare interventions.
- 9.3 The feedback collated from these events has proved vital in the development of our [commissioning intentions for 2018/19](#). A [two-page summary](#) of the Commissioning Intentions is also available.

## **10 Working with stakeholders and partners**

- 10.1 Working in partnership with health colleagues, local government, voluntary organisations and the wider community is vital for helping to achieve best outcomes for the Vale of York population.
- 10.2 We work closely with our voluntary sector representatives to ensure that as many groups as possible are represented in our work with our patients and the public. The CCG could not engage with and care for its population without the continued support of the community and voluntary sector partners. Thank you also goes to the organisations that supported the most vulnerable members of the local population to be involved.
- 10.3 An extensive list of stakeholders and a proactive approach to networking ensures the CCG provides up to date information on its work and enables their involvement. The CCG regularly attends a wide range voluntary sector forums, assemblies and events.
- 10.4 Close partnerships with Healthwatch York, Healthwatch East Riding of Yorkshire and Healthwatch North Yorkshire as well as local voluntary and third sector organisations and working with them on projects and having these present at meetings and committees to mutually share news and information is also a very important part of the CCG's work



- 10.5 The CCG also plays an active role in formally approved forums and channels where patients and members of the public are represented, involved and informed, including:
- Attendance of voluntary and patient groups at committee meetings – such as the Maternity Services Liaison Committee (MSLC), the Quality and Patient Experience committee (QPEC) and the local Wheelchair and community equipment service user group.
  - Quarterly meetings between the CCG’s Accountable Officer and MPs with constituencies in the Vale of York to discuss citizens’ needs.
  - Regular attendance at Practice Patient Participation Groups (PPGs) where volunteer patients, practice management and GPs meet on a regular basis to discuss the primary care based services and the opportunities for improvement to benefit patients and the practice.
  - Updates on the ‘Get involved’ section of the CCG’s website to highlight areas where patients and the public can become involved in the work of the CCG.
- 10.6 Bi-monthly Governing Body meetings are held in public and advertised via the CCG’s website, media releases, newsletters and social media channels. Members of the public are able to attend and written questions can be submitted in advance. These are addressed in the first part of the Governing Body meeting.
- 10.7 Every year the CCG holds an Annual General Meeting (AGM) where it presents its Annual Report and Accounts. The event is advertised to the public. Previous AGM events have included a market place of information stall holders. Local organisations that took part were also invited to chat with the Governing Body and the CCG’s Clinical Leads.
- 10.8 The CCG’s staff regularly attend and get involved in many of the above activities.

## **11 Providing quality assurance and listening to patient feedback**

- 11.1 Under the organisation’s statutory duty to secure continuous improvement within the services it commissions, and as part of its work to pursue assurance of safety and quality, the CCG has a Quality Assurance Strategy. This is built upon the recommendations of reports by Francis, Keogh, Berwick and others, defining the CCG’s vision for ‘quality’ and how the CCG will assure itself, and its stakeholders, that people within the local community will receive high quality care.
- 11.2 Quality is everyone’s business and the CCG is committed to working with partners across the system to ensure the best possible outcomes and experience for patients and their carers and families. The CCG is committed to openness and transparency when developing or assuring services and seek to hear the voice of the local population and the impact of its decisions on people.

11.3 Engagement activities are just one way the CCG establishes what the local population's opinion about local services. It also collates feedback through a range of other methods including national surveys, such as the Friends and Family Test and GP Patient Survey; local patient feedback surveys such as Care Opinion and information provided through complaints and incidents. These are reported through the Quality and Patient Experience Committee that meets bi-monthly.

## 12 The CCG's commitment to equality, diversity and health inequalities

12.1 The CCG remains committed to addressing health inequalities in the Vale of York and it understands that some groups of people, including people with Protected Characteristics experience different access and outcomes when they use NHS services.

Characteristic	Protection for
Age	A person belonging to a particular age or age group. People of different ages including children, younger and older people.
Disability	People who have a disability or a physical or mental impairment and it has substantial and long term adverse effect on an individual's ability to carry out normal daily living activities.
Gender reassignment	People who are proposing to undergo, are undergoing or have undergone a process (or part of a process) to reassign their sex by changing physiological or other physical attributes of sex.
Marriage and civil partnership	People who are married or in a civil partnership.
Pregnancy and maternity	Women who are having or have recently had a baby.
Race	People characterised by shared ethnicity, colour, nationality (including citizenship) ethnic or national origins.
Religion or belief	People with or without a religion or belief.

<b>Sex</b>	Men and women.
<b>Sexual orientation</b>	People whose sexual orientation is towards people of the same sex as themselves (gay or lesbian); people of the opposite sex (heterosexual); or people of both sexes (bisexual).

- 12.2 A toolkit has been developed to assist staff that play a lead role in engagement to help them to define and scope involvement activities around the CCG's commissioning and improvement work. This process includes stakeholder mapping processes, guidance for completing equality impact assessments and templates to establish the appropriate application of the legal Duty to Involve.
- 12.3 The CCG takes a holistic approach to reducing health inequalities by:
- considering the impact on health inequalities in every decision it makes and every policy it delivers;
  - 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 the local population.
- 12.4 More information can be found in our [Equality, Diversity and Human Rights Strategy](#) (see document pages 235 – 244).

## 13 NHS Vale of York CCG in numbers 2017-18

Events	
Events attended	100+
Patient participation groups	20
Voluntary sector forums	7
Libraries stalls	13

Twitter	
Tweets sent	1,335
Number of followers	5,438
New followers on 2018/18	501
Retweets and likes	2,940

Website and media	
Total users	24,793
Total user sessions	48,285
Page views	120,428
Media releases	59

## 14 Highlights – a year in brief

A few key moments from conversations with the community during 2017-18:

<p><b>April 2017</b></p>	<p>The CCG enjoyed meeting with Healthwatch and local carers organisation to find out what matters to them, listening to their feedback at their regular sessions.</p> <p>The CCG also surveyed patients and the public about their experience of using non-emergency transport. This was used to help inform the service specification and procurement of a new medical non-emergency transport service.</p>
<p><b>May 2017</b></p>	<p>The CCG met patient representatives and practice staff at Milfield, Tollerton and Pickering PPGs to find out more about patient experience and the pressures within primary care.</p> <p>The engagement action plan was launched at the Governing Body meeting on 4 May 2017.</p>
<p><b>June 2017</b></p>	<p>The CCG supported Carers Week attending events in York and promoting information through its staff engagement channels.</p> <p>Stakeholders, voluntary sector and the public joined the CCG for an interactive session on tackling the issues of health language and communications.</p> <p>The Wheelchair and Community Equipment Service user group met with providers to share feedback from those using services.</p> <p>The CCG's Chief Nurse and one of the Joint Medical Directors presented to 40 residents of Pocklington about commissioning and current health topics.</p>
<p><b>July 2017</b></p>	<p>The series of Big Conversations was launched. Hosting 40 events over between July and October, the CCG visited communities in areas such as Easingwold, Selby, New Earswick, Helmsley and York to talk with them and gather views..</p> <p>The Student Health Needs Assessment (SHNA) report was presented at the York Health and Wellbeing Board, following conversations and</p>

	<p>feedback from over 1,800 students within York.</p> <p>The SHNA was commissioned following recognition that students form a significant proportion (around 15%) of the York population and have a specific set of health needs, with a particular focus on mental health concerns of York students.</p>
<b>August 2017</b>	<p>The CCG continued to tour around the Vale of York patch as part of the 'Big Conversations' to listen to the views of the local population.</p> <p>This month the CCG also visited libraries and market stalls to ask local communities for their thoughts on local health services.</p>
<b>September 2017</b>	<p>During September the CCG attended a number of events hosted by York St. John University and York College to talk to students about how the younger generation accesses health care and what they do if they were unwell.</p> <p>Work began with members of the local community with attendance at a learning disabilities forum to learn more about overcoming barriers that may be associated with accessing GP services and cervical screening.</p> <p>The CCG held its Annual General Meeting to present the Annual Report and Accounts 2016-17. Stakeholders and voluntary organisations were invited to have a stall at the event and chat with local GPs.</p>
<b>October 2017</b>	<p>Filming of the CCG's first patient story began and patient stories became a standing item at the beginning of each Quality and Patient Experience Committee.</p> <p>The CCG met with staff and members of the public at the Pickering and Sherburn's one-stop-shop library service.</p>
<b>November 2017</b>	<p>Attendance at Haxby and Millfield surgery Patient Participation Groups this month allowed the CCG to capture feedback about GP services. The PPG received a presentation on the financial position of the CCG and information about its transformation policies.</p>

	<p>The CCG began a formal consultation around the prescribing of Gluten Free Foods.</p> <p>Members of the CCG attended the St Leonard's Hospice 'Vision Board Development Day, and give a presentation on 'Palliative and End of Life Care – Commissioning Vision and Strategy', opening up discussions around collaborative working.</p>
<p><b>December 2017</b></p>	<p>The first patient story of a parent carer was shown and was well received at the Quality and Patient Experience Committee.</p> <p>The 'Stay Well This Winter' campaign was launched. Created by engaging with partners and the voluntary sector the series of videos are designed to help people in the Vale of York self-treat common illnesses such as cold and flu at home.</p>
<p><b>January 2018</b></p>	<p>Dr Kev Smith (Executive Director for Primary Care and Population Health) updated the York Healthwatch Assembly about the CCG's priorities and commissioning intentions. The focus was how the CCG can help people to support themselves and delivering services that meet the needs of the Vale of York population.</p> <p>The City of York Youth Council and the Children in Care Council (CiCC) met with one of the CCG's mental health commissioners. Discussion included the Child and Adolescent Mental Health Services' (CAMHS) Local Transformation Plan and capturing the voices and priorities for mental health from young people.</p>
<p><b>February 2018</b></p>	<p>The CCG launches its Commissioning Intentions that were shaped and built upon conversations with local communities. The 2018-19 priorities reflect the views of local people who attended the CCG's series of 'Big Conversation' engagement events. Topics including cancer, dementia, mental health, health prevention and education and access to primary care services were identified by participants and remain a focus for the year ahead.</p> <p>The CCG also visited several care homes and forums to speak to staff and residents about what matters most to them. These important</p>

	conversations fed into the care homes strategy and have ensured that the focus is on person-centred care and quality.
<b>March 2018</b>	Improving access to GP services survey was launched. The CCG asked the Vale of York population to complete a short survey to help shape how this additional service is delivered events at train stations, colleges and with partners made it possible to capture thoughts and feedback from a wide selection of the local population around the introduction of weekend and evening appointments.



## 15 Getting out and about with the community

15.1 The CCG aims to listen to the local population and ensure that it makes the most of the patient feedback it receives and use it to improve local services. In addition to the 'Big Conversations' the CCG has worked closely with its communities and local vulnerable people on a number of projects. Below is a selection of the actions that the CCG has undertaken as a result of listening to what local people have said. A selection of these projects has been chosen below.

### 15.1.1 Working with learning disability partners

In September 2017 GPs and nurses from the Quality and Nursing Team attended a local forum to discuss the potential barriers of attending health screening appointments and accessing primary health care services. Discussions highlighted that the length of a GP appointment was not always long enough to communicate issues. It also raised the need for more accessible information for patients and health professionals, and the requirement for easy read invitation to screening letters to encourage uptake.

15.1.2 In response to the feedback the CCG worked on action plan to address potential barriers and updates and feedback was provided at the York LD forum in December 2017 and to a local advocacy group member in January 2018. Some of the key areas include:

- Design of a template for a patient to complete prior to seeing their GP or nurse. This included a list of concerns, accompanied by an easy read body map and visual pain score.
- Work on a central repository for links to easy read leaflets, patient information and guidance for health professionals.
- A survey to establish baseline figures across primary care to determine current cancer screening uptake for patients with a learning disability.
- Improving communications with primary care and raising awareness of LD support available for healthcare professionals.

15.2 Patient stories at committee meetings - As part of the CCG's commitment to ensure the voices of patients, service users, carers and the public are heard the CCG began to collect and present patient stories in 2017-18 and this is now a regular item on the Quality and Patient Experience Committee agenda.

15.2.2 A patient story is an account of an individual's experience of health or care and enables the CCG and service providers to have a better understanding of the impact from the individual's perspective. Patient stories help to bring experience to life and help the CCG to focus on the person rather than clinical conditions or

patient outcomes.

15.2.3 Patient stories are presented at the beginning of each Quality and Patient Experience Committee and either spoken in person, shown via video or read out on behalf of the individual involved. Committee discussions that immediately follow stories are used to foster a culture of learning from experience and to influence policy direction and service improvements.

15.3 Care home engagement - the CCG is working with its Partners in Care members to promote quality and improve joint working between the NHS and the care home sector. Regular Partners in Care meetings take place bi-monthly. Care home managers and staff, facilitated by the CCG, share experiences and best-practice and receive updates. The forums are well attended and provide the space for information sharing and bringing stakeholders together to discuss delivering high quality care to residents. Examples of key themes that have been discussed over the year include the introduction of a Care Home Bed State Tool to identify the number of beds that are available within the Vale of York, recognition of deteriorating residents, pressure ulcer identification and training, celebrating successes and reducing falls and risks through safety huddles. More than 40 Partners in Care members attend the meetings where they focus on quality and patient care and have the opportunity to network and share best practice. .

15.3.1 Focused engagement events with care home staff and residents have also taken place and the outcomes of these have fed into the care homes work and strategy throughout 2018.

15.3.2 In February 2018 the CCG visited William Wilberforce Residential Home in Pocklington to talk to staff and residents about what matters most to them. Strong themes around person-centred compassionate care, leadership and supporting staff to do their job well were captured at the event.

15.4 Working with children in care - During 2017-18 the CCG's Safeguarding Leads made it possible to engage with children in care to better understand their perspective and perceptions of healthcare services. The Designated Nurse for Safeguarding, on behalf of the CCG, worked with children in care in the City of York to develop resources that support children, young people and their carers understanding of how statutory health assessments can be.

15.4.1 The CCG's Nurse Consultant for Primary Care also spent time with young people in care to gain a greater understanding of what they need from local GP services. Feedback from the sessions was shared as part of GP and primary care staff safeguarding training. It was also used to raise general awareness of the particular health needs of children and young people in care. The response from primary care has been very positive.

15.5 Working with carers groups - Following a number of meetings with carers groups, it was suggested that the CCG could help increase awareness of carers within GP practices. The CCG has worked with a local Carer's Centre to provide free training to GP practice based healthcare professionals to help raise awareness of identifying and supporting unpaid carers. Four training sessions took place in 2017-18 and provide the opportunity for professionals to learn more about the support available for unpaid carers across the city.

## **16. Supporting our staff with engagement**

16.1 To ensure that engagement is embedded throughout its work, the CCG launched an internal engagement toolkit to support a more consistent delivery of engagement activities across the organisation. This toolkit helps staff leading on engagement to define and scope involvement activities.

16.2 The CCG also publishes weekly communication and engagement newsletter containing information on future events, feedback from our population and links to useful articles, documents and videos about patient and public participation.

16.3 Opportunities to attend and help at engagement events are also offered by to CCG staff. To date more than 30 people have participated in engagement activities

## **17. CCG consultations**

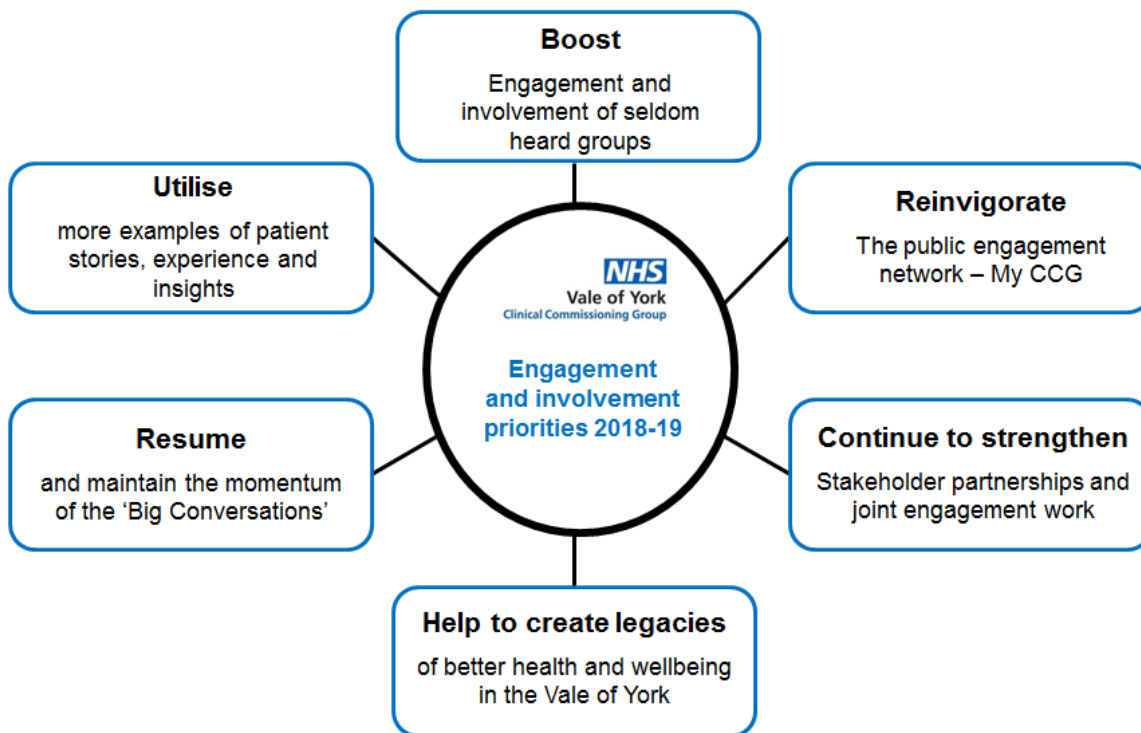
17.1 The CCG actively encourages patients, residents and community organisations to take part and contribute to its work. Taking part in consultations and public engagement exercises is an important way for the local community to give feedback on issues that may affect them.

17.2 In 2017-18 the CCG asked for formal feedback on several areas of its work. These included:

- Gluten Free Foods prescribing
- Improving access to General Practice through evening and weekend appointments
- Non-emergency transport services
- Perinatal mental health services

## **18. The next steps**

18.1 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 priorities for 2018-19 are listed below and are described in the following diagram.



- 18.1.2 Close partnership working with stakeholders - Continuing to work in partnership with key partners such as Healthwatch, patient participation group (PPGs) and voluntary organisations and identify how the CCG uses their experience and networks to involve patients and the public.
- 18.1.3 Conversations with our population about our new strategy - The CCG will ask the local community and key stakeholders to inform the new patient and public engagement strategy for 2020.
- 18.1.4 NHS Vale of York CCG engagement network - We will look to further grow the CCG patient 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.
- 18.1.5 Identification of groups who are 'seldom heard' and ensuring that they have the opportunity to be involved - The CCG will establish the methods that communities and groups prefer to be involved. It will further explore new communication methods – e.g. SMS text messaging and aim to produce more materials in alternative formats.
- 18.1.6 Patient experience and insights - The CCG endeavours to continue to develop a system to record patient experiences and insights to provide feedback to CCG. It aims to improve on how it listens, reviews, and acts upon patient feedback. It will continue to capture patient stories and ensure that they are incorporated into meetings, briefings and events to put the patient at the heart of everything it does.

18.1.7 NHS 70 - The NHS is turning 70 on 5 July 2018. Across the country there will be celebrations And the CCG will work with its partners, service users, patients and the wider public to create a series of local celebrations that help to raise awareness of the CCG's priorities of preventative measures to improve health, self-care methods to stay well, the importance of tackling loneliness and isolation whilst it showcases an innovative and sustainable NHS.