

Engagement mapping report

HUMBER COAST AND VALE SUSTAINABILITY
AND TRANSFORMATION PLAN

November 2016



Introduction to the report

The purpose of this report is to present a broad overview of engagement activity that has taken place across the Humber Coast and Vale STP footprint since the publication of the NHS Five Year Forward View in October 2014. Findings from earlier activity have been incorporated where relevant.

*caveats

This report is based primarily on information submitted by CCGs and other NHS organisations in the footprint. It is therefore not exhaustive.

The organisations who have contributed material for this report are:

- NHS East Riding of Yorkshire CCG
- NHS Hull CCG
- NHS North Lincolnshire CCG
- NHS North East Lincolnshire CCG
- NHS Vale of York CCG
- NHS Scarborough and Ryedale CCG
- Hull and East Yorkshire Hospitals NHS Trust
- York Teaching Hospitals NHS Foundation Trust
- York City Council
- Navigo

Some reports cover more than one of the STP priorities and have therefore counted more than once. However, in absolute terms, there have been more than 100 pieces of engagement carried out in the STP footprint during the time period.

We have included some national reports such as Patient Surveys that are generic in nature and are not represented in the specific STP priority categories.

There is no standard template for engagement reporting and information gathering, making it difficult to arrive at a definition of “engagement”.

The report captures intelligence collected from engagement and consultation activities and will help us to:

- Provide information on work which has taken place or is underway to avoid duplication.
- Highlight any gaps in activity across the STP priorities.
- Understand some of the views gathered from local people.
- Ensure that future plans have a baseline of engagement intelligence to support the work.

The report is a working document which will be updated as projects progress. The intelligence collected will help us meet our legal requirement to:

- Find out the views of patients as part of service redesign;
- Ensure feedback is considered in the development of any future options to change the way services are provided or delivered.

In order to deliver the six priority areas in Humber Coast and Vale it is essential that partnership networks work together to understand the view of local populations.

Our priorities are:

- **Helping people stay well**
- **Place-based care**
- **Supporting people with mental health problems**
- **Creating the best hospital care**
- **Strategic commissioning**
- **Helping people through cancer**

It is important that any engagement and consultation work proposed should not confuse the public who may have already given their views about a particular service. With this in mind our approach is to develop plans for engagement and consultation at local level. Where engagement and / or consultation have already happened, the information needs to be incorporated into planned actions in order to promote efficiency and avoid “engagement fatigue”.

Our responsibilities, including legal requirements

Engaging people goes beyond fulfilling statutory and regulatory duties. It is crucial to understanding and valuing the opinions of patients and the public in the commissioning process.

NHS CC has advised that we create our plans with reference to these key considerations:

- How does the STP communication strategy support meaningful engagement with patients, carers, the public and their representatives? Is the substance of your STP being communicated in a way that is understandable and meaningful to different populations?
- How has your STP engagement plan made the case for 'public value'? Do plans clearly communicate what changes mean for patient experience and outcomes and help explain how efficiency savings will be made and the impact on patients?
- How are plans being co-produced with patients and the public? What more can be done to involve patients in developing the plans and supporting the delivery of proposals?
- Does your STP engagement plan clearly link to existing plans and demonstrate how STPs are a continuation of plans already being delivered within your footprint? Or does the plan contain new ideas that go beyond existing plans?

We have access to resources including, but not exclusively:

- Six principles for engaging people and communities, National Voices and the People and Communities Board
- Engaging local people: A guide for local areas developing STPs, NHS England

Legal requirements

There are a number of requirements that must be met when discussions are taking place about the development of services, particularly if any of these will impact on the way these services can be accessed by patients.

These requirements are set out in:

The Department of Health's four tests for service change:

- Strong public and patient engagement;
- Consistency with current and prospective need for patient choice;
- A clear clinical evidence base;
- Support from proposals from clinical commissioners

The Equality Act 2010. All public authorities must have due regard to the need to:

- Eliminate discrimination, harassment and victimisation,
- Advance 'Equality of Opportunity',
- Foster good relations.

A set of principles in relation to the Equality Act 2010 have been detailed in case law.

These are known as the **Brown Principles**.

The Brown Principles are:

- The organisation must be aware of their duty.
- Due regard is fulfilled before and at the time any change is considered as well as at the time a decision is taken. Due regard involves a conscious approach and state of mind.
- The duty cannot be satisfied by justifying a decision after it has been taken.

- The duty must be exercised in substance, with rigour and with an open mind in such a way that it influences the final decision.
- The duty is a non-delegable one.
- The duty is a continuing one.

An Equality Impact Assessment (EQIA) will need to be undertaken on any proposals for change that are developed through the programme, in order to understand any potential impact on protected groups and ensure equality of opportunity. Engagement must span all protected groups and other groups, and care should be taken to ensure that seldom-heard interests are engaged with and supported to participate, where necessary.

The Health and Social Care Act 2012 - 'no decision about me, without me'.

The Act makes provision for CCGs to establish appropriate collaborative arrangements with other CCGs, local authorities and other partners, and it also places a specific duty on CCGs to ensure that health services are provided in a way which promotes the NHS Constitution. The Act updates Section 244 of the consolidated NHS Act 2006 which requires NHS organisations to consult relevant Overview and Scrutiny Committees on any proposals for a substantial development of the health service in the area of the local authority, or a substantial variation in the provision of services.

The NHS Constitution

'You have the right to be involved directly or through representatives, in the planning of healthcare services, the development and consideration of proposals for changes in the way those services are provided, and in decisions to be made affecting the operation of those services'.

HCV engagement and consultation activity review

We have reviewed more than 100 reports from relevant engagement and consultation carried out by CCGs, providers, local authorities and others including Healthwatch in the Humber Coast and Vale footprint between October 2014 (publication of the NHS Five Year Forward View) and October 2016. Findings from earlier activity have been incorporated where relevant.

We have engaged with more than 30 000 people over the past three years, using National Patient Surveys and our own programmes via campaigns including Ambition for Health and Healthy Lives, Healthy Futures.

Engagement exercises currently underway (November 2016) or recently concluded include Urgent Care in Hull and East Riding.

Some of the headline themes from our engagement are:

People would like to be allocated an expert clinician who will be a single point of contact for any queries regarding their health and wellbeing. They would like their clinician to follow up with them proactively.

People want quick and easy access to health care advice from home using the telephone or internet. Through new shared care records they would like to have access to co-located diagnostics, treatment and support services for maximum flexibility and convenience.

People would like access to support and help when they need it. They feel they need more information about alternatives to primary care, and how to access these.

People want access to the right services, at the right time in the right place. This need stretches across dentistry, mental health services, pharmacy, social care and more.

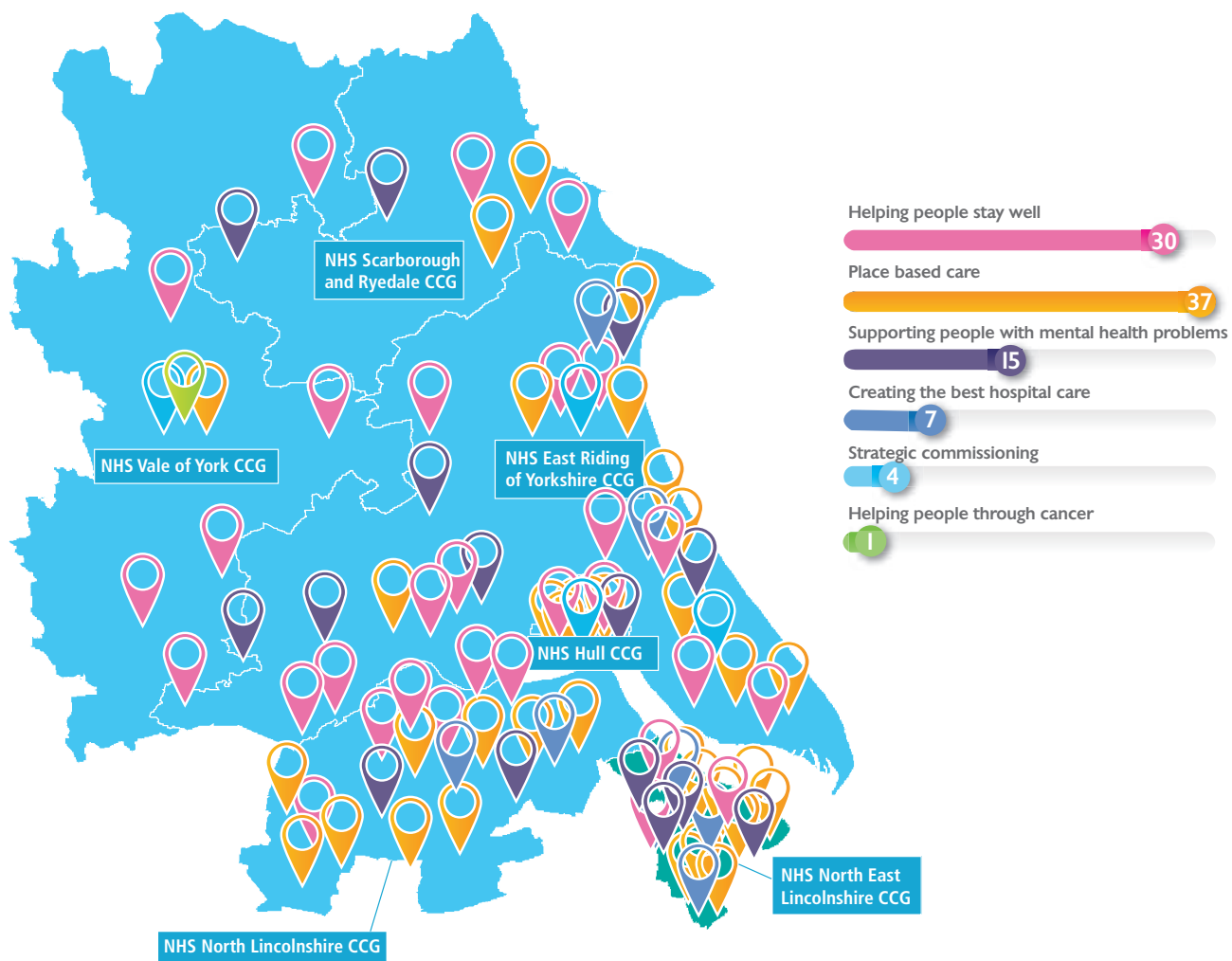
People want more accessible GP services and a broader range of services offered in GP practices.

People would like a more responsive, clearly joined-up approach to transport between the voluntary, public and private transport providers and health and social care services. They would like safe, affordable transport home after treatment.

At a glance

We have accumulated more than 100 reports from engagement carried out across the Humber Coast and Vale footprint between the publication of the NHS Five Year Forward View in October 2014 and October 2016.

This map shows these engagement reports broken down against the STP priorities.



Here is a capture of what engagement has told us in each of our priorities.

Helping people stay well – people want

More joined-up working between health and social care

More information about self-care and how to access the right service at the right time

More clinics to help people manage their long-term and multiple conditions

Reduced waiting times for mental health counselling and treatment

More services for young people e.g. school nurses

Place-based care – people want

Improved access to GP services; appointments at convenient times, including in the evening and at weekends.

A balance of planned and urgent appointments at the GP practice

Care close to where they live

Walk-in (no appointment) facilities for urgent care needs

A broader range of services at the GP practice

Joined up care and shared records across providers

Information to support people to help manage their own health, including signposting to voluntary and community services.

Supporting people with mental health problems – people want

Appropriate support and services in place to prevent a crisis occurring

More outreach services

Better access to crisis support

Better quality crisis intervention

Improved access to CAMHS

Improved transition from CAMHS

A co-ordinated approach between services upon discharge

Collaborate between medical and non-medical providers to address the social causes of poor mental health.

Creating the best hospital care – people want

Urgent care services closer to home – particularly in GP practices and walk-in centres

Better information about the difference between urgent and emergency care

A conveniently located A & E unit, with on-site out of hours primary / urgent care

Shorter waiting times in A & E departments

Better discharge planning from acute settings

Consultant outpatient clinics in the community

Adequate parking spaces available at hospital sites, and the price of parking should be as low as possible.

Better, more co-ordinated public transport, particularly to major hospitals.

To be listened to, and be involved in the design and delivery of hospital services in their communities.

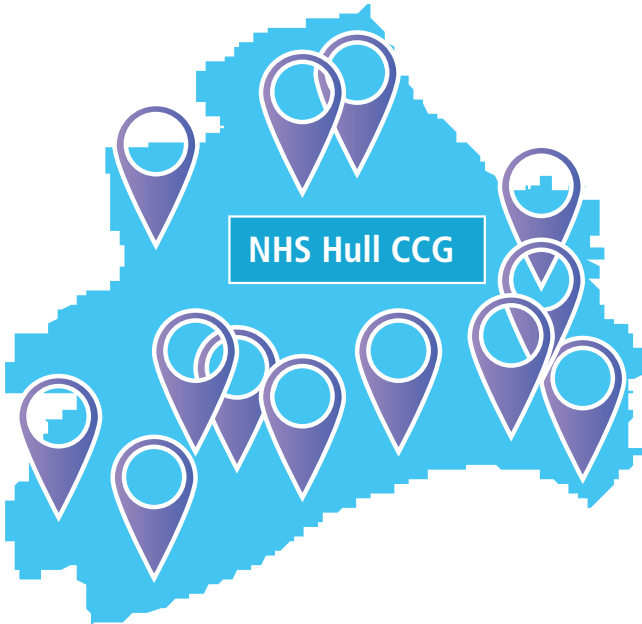
Helping people through cancer – people want

Urgent care services closer to home – particularly in GP practices and walk-in centres

Better information about the difference between urgent and emergency care

Engagement by location

Hull



East Riding of Yorkshire



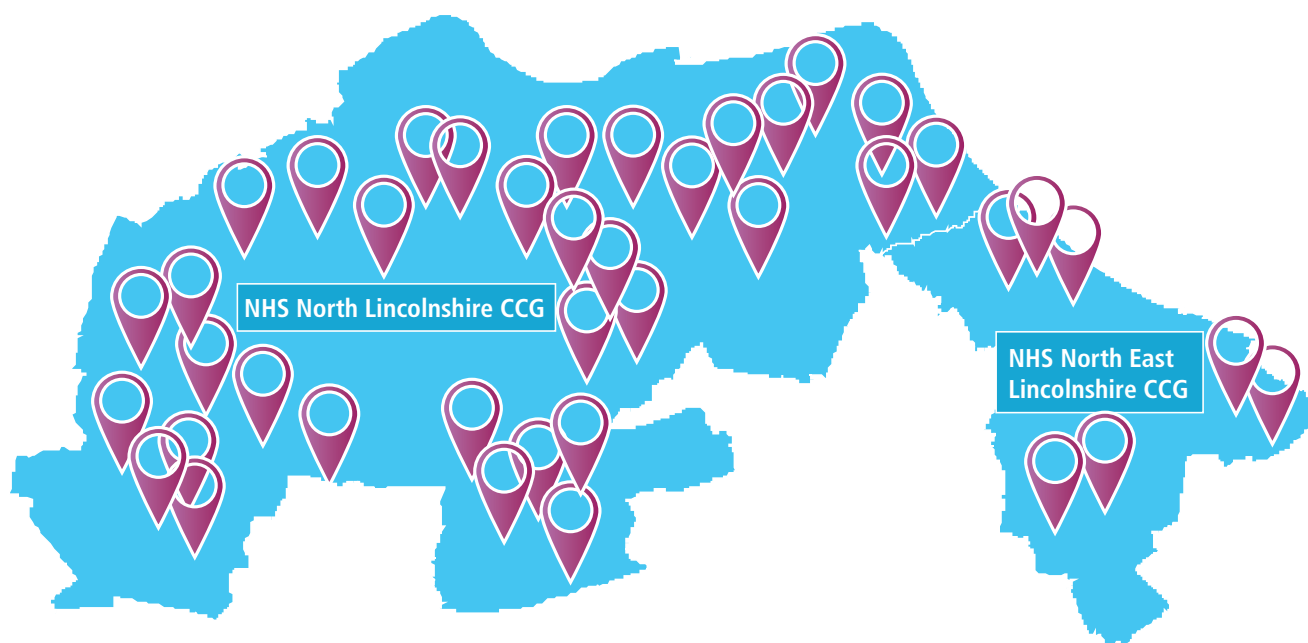
Scarborough and Ryedale



Vale of York



North and North East Lincolnshire



We recognise that there remains much to do to fulfil our obligations in regard to engagement and consultation around the proposals we are developing in the Humber Coast and Vale STP. The next stage of our work is for the localities to develop their place based engagement plans, using the information in the STP roadmap to inform their timeline.

Priorities	2016 Oct – Dec	2017 Jan – Marc	2017 Apr – Jun	2017 Jul – Sep	2017 Oct – Dec	2018 Jan – Mar	2018 Apr – Jun	2018 Jul – Sep	2018 Oct – Dec	2019 Jan – Mar
	Shadow Running Preparation & Detailed Design		Shadow Running			Cut-over to Business as Usual (BAU)				
	1					2		3		
1. Helping people stay well	Dev of Phase 1 Programme, eg. Injury prevention, wider determinants		Phase 1 Programme roll-out and review			Develop Phase 2 Programme		Phase 2 Programme roll-out and review. Ongoing benefits realisation.		
2. Place based care	Primary care Review & Redesign		Plan and roll-out in localities			Refine and benefits realisation				
	Pathway redesign: elective and complex discharge.		Plan and roll-out in localities			Refine and benefits realisation				
	Detailed Design: social prescribing & community navigation		Plan and roll-out in localities			Refine and benefits realisation				
	Implement Electronic Care Record									
	HCV Integrated Multi-disciplinary Locality Teams Framework & Op Model Design (incl. enablers)		Shadow running of Integrated Multidisciplinary Locality teams in localities (incl. enablers)			Steady state running and commissioning of new ACOs in localities				
	Care market capacity review		Plan & roll-out in localities							
3. Creating the best hospital care	Detailed review and options appraisals: Elective, Acute Network, Specialised Commissioning, Back-office and pathology		Consult & Pilot across HCV acute hospitals			Detailed design and implementation across HCV acute hospitals				
	U&E: 4 P Standards Planning		U&E: 4 P Standards Roll-out							
4. Supporting people with Mental Health problems	Design shared HCV Mental Health Standards		Establish shared commissioning & resourcing models, run pilots			Steady state running of new model and benefits realisation				
5. Strategic Commissioning	Strategic Review		Plan Shadow Run & options appr.		Shadow running and pilot governance arrangements, including suspension of PBR			Implement steady state commissioning op model and new contractual arrangements.		
6. Helping people through cancer	Detailed planning: 62 day target, lung cancer pathway, diagnostic model		Pilot, review and iterate			Steady state running of new model and benefits realisation				

Support for our consultation and engagement work

Healthwatch across the patch will facilitate and support the engagement programme, providing comfort that our engagement and consultation process is robust. We are being advised at the strategic level by The Consultation Institute.

Appendix

List of engagement reports

List of engagement reports supplied by organisations in the STP partnership

North Lincs / North East Lincs

- Accord (community membership body, NE Lincs) Annual Members Meeting – feedback to participants
- HLHF Consultation Report – Hyper-acute stroke services and ENT inpatient surgery
- HLHF phase 2 children's surgery
- HLHF phase 1 Engagement (case for change/funnel/OHH):
- NAViGO Health and Social Care CIC Mental Health Community Service User Survey 2015
- NAViGO Health and Social Care CIC 2014 Mental Health Inpatient Survey
- NAViGO Health and Social Care CIC Mental Health Acute Inpatient Service Users Survey 2015
- N Lincs CCG Health Matters event feedback
- N Lincs CCG Health Matters event 2 feedback
- N Lincs CCG Health Matters event 3 feedback
- NE Lincs CCG Quality Survey Report 2016
- Public and stakeholder engagement on service specification for Patient Transport Services in North and North East Lincolnshire 2015
- N E Lincs The Way Forward 2016 Feedback and update for Participants
- Leaving Hospital on the Mend and In the Know
- Experience Led Commissioning Crisis Mental Health programme
- Experience Led Commissioning Keeping Well programme
- Experience Led Commissioning long-term conditions
- Experience Led Commissioning Dementia
- Experience Led Commissioning children with long-term conditions
- Ophthalmology
- Community Equipment / wheelchair services
- CAHMS inpatient procurement
- MH Concordat/MH Crisis Care
- TCP LD 2016
- MND in NEL
- Advocacy and supported living specification and procurement
- Social Prescribing
- Commissioning Intentions
- Opening the door - GP accessibility

- Community Cardiology
- COPD
- Focussing on MS
- Diabetes Review
- Glaucoma
- HLHF phase 2 (emergency care)
- The Best Medicine - NEL Urgent Care Model
- End-of-Life Care Commissioning Intentions
- Dermatology
- Diabetes model
- Care Networks
- NEPTS
- North Lincolnshire Public and Patient Engagement Network (Embrace)

Hull

- Birth Preparation & Parent Education Classes (Hull) Service User Engagement
- Community Services Procurement (Hull) Patient Experience Data Pack 2015
- Hull Integrated Care Centre Public Consultation Report July 2015
- Story Street Hull Walk-in Service User Engagement 2015
- People's Panel Survey
- PPG Event
- Primary Care Blueprint
- Community Services Consultation
- UEC consultation (ongoing October 2016)
- Non-emergency transport
- Wheelchair Equipment Services
- Working with diverse communities
- Transforming MH services for children and young people (with ERY)

Vale of York

- City of York Council / Healthwatch Consultation and Observation Report Broadway Lodge
- City of York Consultation and Observation Report Hall Cottage
- City of York / Healthwatch Consultation and Observation Report Harlington House
- City of York Market Position Statement event 2016
- City of York Council Riccall Carers Home Care Quality Monitoring Report 2016

- City of York Consultation and Observation Report Derwent Road
- City of York Surecare Home Care Quality Monitoring report 2016
- Discover (mental health)
- Gluten-free prescribing (2 events + midpoint review)
- Urgent Care and GP OOH
- LTC
- Health and Wellbeing in Easingwold
- Re-procurement of wheelchair services
- Community equipment re-procurement
- MSK re-procurement of service
- Discover (maternity and perinatal mental health)

Scarborough and Ryedale

- Bridlington Partnership Bridlington Forward feedback newsletter
- Scarborough, York and East Riding, York Teaching Hospital Trust Urology Diagnostic Service Patient Experience Survey Feedback Report 2015
- Healthy Lifestyles
- Ambition for Health
- Patient voice in primary care strategy
- Podiatry Services
- Wheelchair services
- Urgent Care Services

East Riding of Yorkshire

- Alfred Bean Health and Wellbeing Centre (Driffield) update newsletters (2)
- ERY CCG Community Hubs engagement report
- Pocklington Together – health and social care services feedback and update report
- ERY CCG Community Services Patient Survey Feedback
- ERY CCG Supporting Children and Young People's Mental Health and Wellbeing Autumn 2015
- ERY CCG Engagement meta-analysis 2015
- HEY, ERY and Hull Medicine Transformation Programme Comparison of Patient Feedback from Acute Assessment Unit and the new Ambulatory Care Unit December 2014

- Humber FT and ERY CCG Hornsea Forward feedback newsletter
- Pharmacists in GP Practices in ERY Patient Survey Feedback
- East Riding Adult Safeguarding Strategy 2016-18 Survey Feedback Report
- Alfred Bean Hospital Cardiac Rehab Service review day 2015
- Humber FT and ERY CCG Withernsea Forward feedback newsletter
- Brid Forward - Specialist services inc MH, dementia; stroke; GPs
- Brid Inc - future Bridlington Health Centre/Clinical Hub new build
- Healthy Lives, Healthy Futures for Goole
- Meta-analysis - round-up of major engagement undertaken over last 18 months turned into meta-results
- Children and Young People's Mental Health and Wellbeing services
- Humber FT World café events
- Equality and Diversity Survey
- Transforming MH services for children and young people
- Pharmacists in GP practices
- Community Services Procurement
- Community Services Patient Survey feedback
- Community Services Outcomes Framework
- Community Services review
- NHS Prescribing
- Community Equipment and Wheelchair survey
- Friends and Family Test pilot in GP surgeries – Falls; LTCs and Minor Cognitive Impairment services
- Prescribing survey

National

- National Inpatient Survey:
- National GP Survey;
- National Cancer Patient Survey (CCG Level data)
- Friends and Family Test
- Young Minds report on CAHMS Specialised Commissioning Pre-Procurement of Inpatient Facilities for Young People in Humber;
- NHS Confederation, attitudes to the NHS
- National Inpatient Survey – Mental Health