

NHS LINCOLNSHIRE EAST CCG GOVERNING BODY MEETING

Report to:	NHS Lincolnshire East CCG	Agenda item:	
Date of Meeting:	29 June 2017		

Title of Report:	Annual update on the Patient Council 2016/17
Status of report: (decision and approval, position statement, information, confidential discussion)	Information
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Appendices:	Appendix 1: Terms of Reference March 2016

1. Purpose of the Report (including link to objectives)
<p>The purpose of this report is to:</p> <ol style="list-style-type: none"> 1. Provide the Governing Body with an update of the work undertaken by the Patient Council over the previous 12 months 2. Outline the Patient Council's priorities for the next year to ensure it effectively supports the CCG's objectives in relation to Patient & Public Engagement and Experience

2. Recommendations
<p>That Governing Body is asked to note the contents of the report and approve the priorities moving forward.</p>

3. Background
<p>The Patient Council, established in March 2015, meets on a quarterly basis. It brings together representatives from patients and the public of East Lincolnshire to ensure their voices are heard, enabling them to make an effective contribution to the prioritisation, design, planning and commissioning of health care services in alignment with the CCGs strategic objectives, forming part of a wider continuous process of listening to our patients.</p> <p>The purpose of the Patient Council is to:</p> <ul style="list-style-type: none"> • provide a mechanism to feed patient and public voice into decision making within the CCG; • collate the views of a wide range of groups by drawing on the networks of Patient Participation Groups (PPGs), Health watch, voluntary and community groups and others; • provide scrutiny of the CCG's engagement and consultation activity; • enable existing networks for involvement to have a voice in decision making around health and care issues; • Provide a channel for outgoing communication and engagement to patients and members of the public. <p>Alongside the Patient Council, we have developed a Virtual Patient Council. This enables people who cannot attend Patient Council meetings to still take part in the work of the Patient Council via the CCG's website, ensuring we have the opportunity to hear from a wider range of patients, including hard to reach groups. This has not been utilized as much as anticipated and so alternative methods of engaging with those unable to attend the Patient Council meetings are being explored. In addition, the representatives</p>

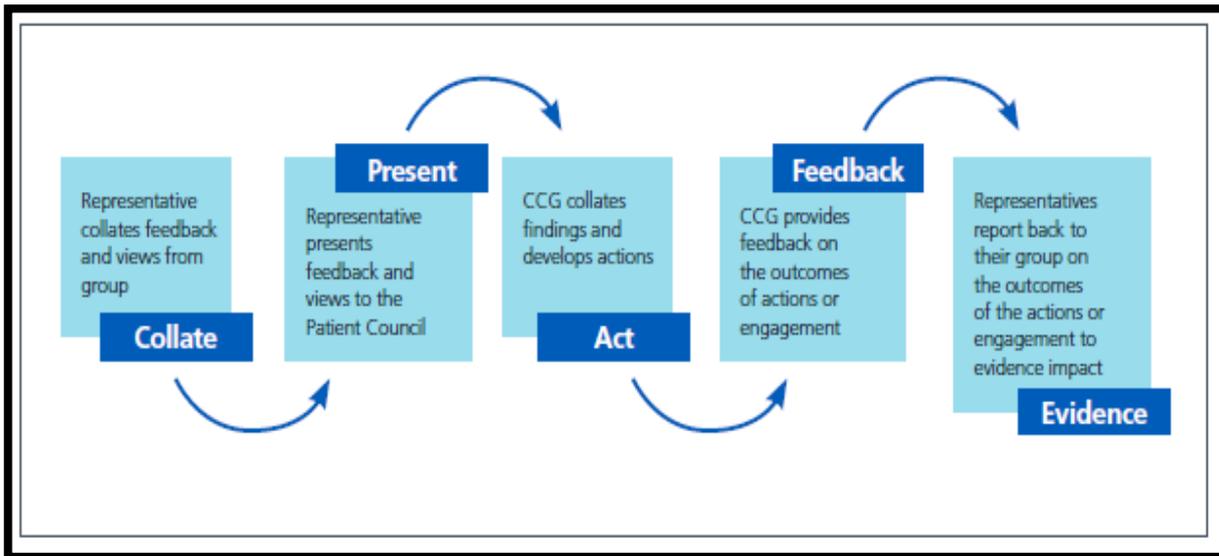
at the meeting will receive refresher training on accessing and using the Virtual Patient Council to support their wider groups to utilize this resource.

4. Summary of Key Issues for Discussion

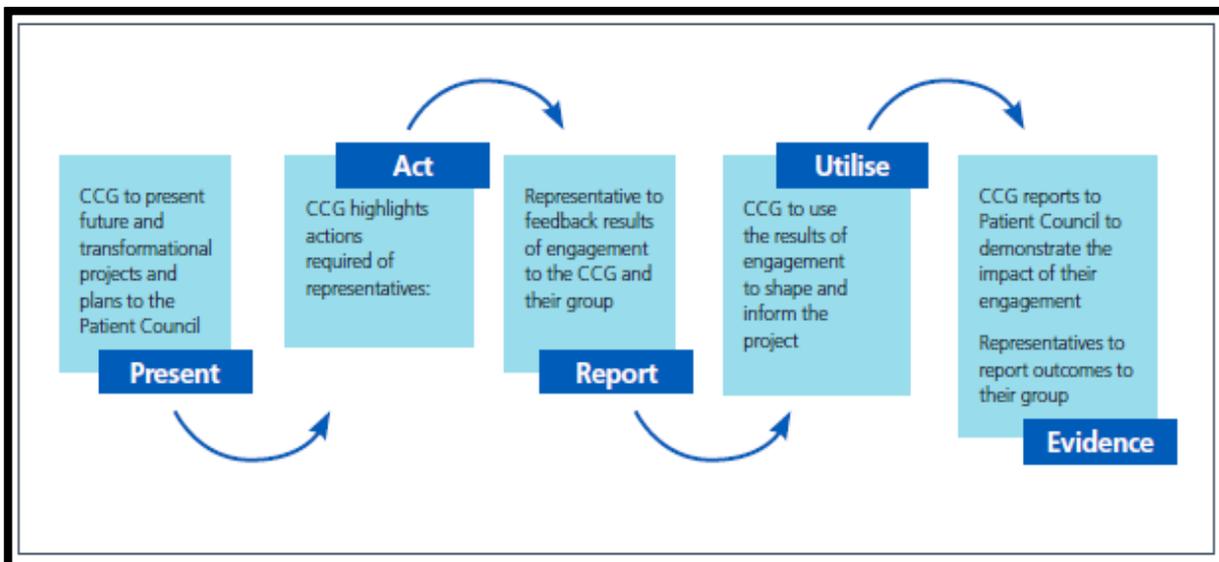
Update of the work undertaken by the Patient Council in 2016/17

During 2016/17 we have further developed the patient council to ensure the representative patient voice is strengthened and their role in shaping commissioning decisions in the CCG is clear. The new model below demonstrates the 2 way role of the patient representative and CCG in the Patient Council and how this is escalated and utilised within the CCG. This was agreed at the Patient Council meeting on 16 September 2016 and has been successfully implemented in subsequent meetings.

1. Patient representative role in LECG Patient Council



2. CCG role in LECG Patient Council



Our Virtual Patient Council, available on the “get involved” section of our website is inclusive and open to all of our patients, stakeholders and members of the public who want to get involved but are unable to attend the meetings. During 2016/17 this has been developed further on our website and contains all of the meeting papers, minutes and opportunities for involvement.

Patient Council working group meetings were established to take place before each meeting to ensure effective agenda setting and consideration of requests from Patient Council members in the planning of future meetings. Attendees included: the CCG’s PPI Lay Member, Deputy Chief Nurse, CCG Engagement Manager and Optum Engagement Lead.

Effectiveness and robustness of the Patient Council meetings was assessed and Terms of Reference amended to reflect working to the new model and strengthened arrangements.

In addition, the Patient Council have provided input into various projects, given their feedback, promoted wider engagement and received presentations on the following:

- Patient and Public Engagement and Experience Strategy 2016-19
- Equality Delivery System 2 (EDS2)
- Primary Care Dashboard
- Terms of Reference
- Listening Clinic feedback
- Sustainability Transformation Plan
- Care Portal
- Over The Counter medications consultation
- Development of Virtual Patient Council
- GP recruitment
- GP merger consultation for Wainfleet
- Youth Patient Council planning

Patient Council's priorities for the next year to ensure it effectively supports the CCG's objectives in relation to Patient & Public Engagement and Experience

- Fully embed the new model and feedback processes to ensure representatives bring the voices of the groups they represent to the meetings
- Annual review the Terms of Reference
- Enable wider involvement and engagement in the transformation projects in the CCG
- Enable involvement of wider audiences with Patient Representative Champions to reach out to other groups (for example, Youth Patient Council)
- Review of locality PPG chairs meeting structure to fit in with the Continuous Listening Model
- Continued involvement and promotion of STP
- Effectiveness of the Patient Council surveys

5. Care Quality Commission Implications:

Patient experience is a component of the Care Quality Commissions Standards. National and Regional Patient Experience reports are taken through the CCG's Quality and Patient Experience Committee.

6. Legal/NHS Constitution Considerations

The Patient Council exists to provide assurance and scrutiny in relation to the CCG's duties to communicate and engage with patients and the public under the Health and Social Care Act 2012, Equality Act 2010 and to ensure local learning from the key national patient experience drivers (i.e. Francis Report).

The objectives and the Terms of Reference of the Patient Council promote the NHS constitution.

7. Analysis of Risk including the link to the Board Assurance Framework and Risk Register

No current risks

8. Resource Implications (Financial and Staffing)

Venue costs
Staff time

9.	Patient, Public and Stakeholder Involvement
Stakeholder, patients and their representatives, and the public will continue to be engaged in developing, considering and helping make decisions on any proposals that could have a significant impact on service delivery or the range of health services available.	
10.	Equality and Diversity Impact
An inclusive process, taking account of the needs of all, including those of the protected characteristic groups will be a requirement of our communications and engagement approach in the future.	
11.	Health Inequalities Impact
The CCG communicates and engages with the whole of the local population, including those with protected characteristics.	
12.	References to previous reports
N/A	
13.	Freedom of Information
Public	
14.	For further information or for any enquiries relating to this report, please contact
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