

PPI activities in service areas and evidence of their impact for 2016-17

Service Area: Customer Care- Quality team				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
<ul style="list-style-type: none"> 2 weekly reports to capture and inform senior management team of any pending enquiries and complaints. 6 months quality meeting reports to provide an overview of all activities delivered by the customer care team. Annual report to present all cases, themes and complexity of the issues raised to the team. Quarterly submission of the CCG's complaints 	<ul style="list-style-type: none"> 22 complaints received for the CCG to respond 35 complaints were redirected to the appropriate organisation 4 complaints escalated externally, 2 PHSO, 1 ICO and 1 NHSLA. 9 enquiries received for the CCG to respond 13 MP queries received 26 phone calls received seeking advice and clarification 	<p>Timely and effective response is important having affect for patient's satisfactory. The CCG is closely monitoring the response time within 25 working days. If any anticipated delays the complaint is notified with a holding email.</p> <p>Updated patient information leaflet available on the CCG website.</p>	 Complaints procedure leaflet - v  Complaint Action Plan.docx  Complaints Investigation Report  Managing multi-provider flow	<p>Further work needed to capture outcome of learning for complaints, strengthen multi-agency working, supporting lead investigators with follow through on actions from complaints.</p> <p>Providing complaints update meetings for lead investigator and new employees (potentially new lead investigators).</p>	<p>Improve data capture on response times. Avoid delays.</p> <p>Making sure the patient's satisfactory is marinated and fully achieved.</p> <p>Work closely with other agencies in the borough involved in multi-provider complaints.</p>

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to HSCIC.					
	<p>Themes of complaints:</p> <ul style="list-style-type: none"> - process and delays in IFR application - service delivery (care homes) - delays and handling process of a Personal Health Budget - multiple concerns with NHS and Local Authority (joint complaint) - payments made in error - refusal of IVF treatment - difficulties during CHS assessment 	<p>Created an action plan for use by lead investigators for lessons learnt from for each complaint.</p> <p>Created process of collaborative working with other organisation in the borough. Agreed flow chart of managing multi-provider complaints.</p>	 <p>Managing Children's multi-pro</p>	<p>Continue to seek better clarity on management of primary care related complaints.</p> <p>Review of lessons learnt from the complaints.</p>	
	<p>Themes of enquiries:</p> <ul style="list-style-type: none"> - assistance in accessing mental health services for autistic kids - mental health commissioning between WCCG and Maudsley - rules of IFR funding - requirement for IVF treatment - seeking regarding care home contribution and continuing funding - BCG vaccine for newborns - local funding for homeopathic services - assistance in conception policy and treatment 				

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2.9. Service Area: Planned Care				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
Have a patient point of view on decisions being made on ENT services.	A patient has attended each ENT meeting and has challenged some of the decisions and assumptions of the project group.	The group are reassured that the decisions made are appropriate and take into consideration patients feedback.	 ENT Meeting 01.11.16 - draft min	Continued patient attendance at ENT working group	Input on additional pathways: <ul style="list-style-type: none"> • Dizziness • Snoring • Sleep apnoea
Have patients input on the redesign of diabetes services.	The Wandsworth Diabetes Patient Group (WDPG) presented a report detailing the requirements of a well run diabetes service.	The diabetes specification included where possible all the requirements. Where not possible, due to the remit being wider than that of diabetes, the requirements were shared with the relevant department.	 Diabetes Patient Group Recommenda	Engagement at a more defined level of diabetes: <ul style="list-style-type: none"> • Podiatry • Case management • Education 	Targeted input into specific areas of diabetes to offer reassurance that the plans are appropriate and that no changes have a negative impact upon patients and the patient directed goals have a positive impact upon patients.
	Patient representation at the diabetes Clinical Reference Group	All decisions and discussions include the patient voice.	 DM CRG Nov Minutes.docx	Discussions with WDPG on what they want to be involved with and how.	Focussed patient engagement concentrating on feedback on changes and

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					plans.
	Patient presentation at the diabetes workshop event. Event finalised with a panel of patients explaining what the proposals meant for them and how they felt about the day's discussions.	Reassurance that patients are involved and in agreement with the work that has occurred to date and is planned.	 Dm Workshop 17.1.17 Notes.docx		
Collect patient views on changes to urogynae service				Write to patients who are currently using the service to explain the plans for establishing a service at SGH and ask for their feedback via a questionnaire.	Get a view on what patients like about the current way of working, what they do not like, if they would change it, how they would change it.

2.9. Service Area: Children's Commissioning				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
Consultation exercise with a range of young people to participate in the Development of a Mental Health Transition Service for 17-25 year old olds.	The Youth Council, Looked after Children and YP leaving Care noted that a lot of young people receiving support in CAMHS may not reach the threshold for care in Adult Services, so they need support to help them become self sufficient and independent. Support needs to be	The outcome of the consultation has informed the design, management, delivery and evaluation of the new Mental Health Transition Service.	The Mental Health Transition Service commenced on 17th March 2016.	The Wandsworth Youth Council presented their work to the Transition Service Stakeholders	To ensure the delivery and design of the Mental Health Transition Service is

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	<p>holistic and not just focus on their Mental Health.</p> <p>The Youth Council thought a consultation with young people should be done through: Focus groups, online surveys, face to face conversations and interactive feedback buttons</p> <p>Young people to consult with include:</p> <ul style="list-style-type: none"> - Young People 17 years and older who have experienced moving from CAMHS to Adult Services - Young People currently accessing CAMHS and about to transition to Adult Services - Care Leavers and young people in care - Young people accessing CAMHS who are/ will be living independently 			<p>Meeting in July 2016. The Youth Council will also participate in promoting the new service at a stakeholder planned event in June 2016.</p>	<p>youth-focused and meets the quality standards for supporting C&YP to make their transition to adult mental health and other services.</p>
<ul style="list-style-type: none"> • Consultation with YP attending YOT regarding what they considered a priority for improving health provision in the Youth Justice System 	<p>Young People attending the Youth Offending Service were asked about their views of existing provision. Questionnaires were left at the YOT reception. Young people informed us of what they considered priorities to meet their emotional health and wellbeing as; (1) having people that they can meet with quickly/straight away to help manage really difficult feelings (anger, low mood, fear, sadness etc.) that are badly affecting them and what is going on in their</p>	<p>Young people advised commissioners on what they considered a priority when developing existing provision for C&YP who are at risk or caught up in the Youth Justice System.</p>	<p>The service development underway will incorporate prevention and early intervention strategies; brief interventions, assertive outreach, and covert therapy</p>	<p>The proposed service model must meet the youth friendly gaps identified in current L&D provision and to include screening, assessment, brief intervention</p>	<p>Increase level of current provision as it seeks to improve the quality of the care pathway for mental health, emotional</p>

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	<p>life, which might get worse without support (2) having people outside of YOT, in the community, in the neighbourhood that can help YP get support if they have got in with the wrong crowd and need help to manage really difficult feelings (anger, low mood, fear, sadness etc.) that are badly affecting YP and what is going on in their life.</p>		<p>for engaging CYP who need therapy. The new service model aims to address all vulnerability groups, targeting young people on edge of gangs, CYP with dual diagnosis and delivering substance misuse primary intervention.</p>	<p>and sign posting. Provision to include; assertive outreach, education and early intervention for engaging CYP with mental health needs.</p>	<p>health and general wellbeing within the Youth Justice System. Achieve the best possible outcomes for CYP at risk and caught in the Justice System. Narrow the gap between CYP with best and worse outcomes. Enhance closer working between the YOT and Liaison and Diversion service interface.</p>
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					<p>Increase staff productivity and effectiveness across the system due to improved care pathways.</p> <p>The adoption of best evidence based practice in early intervention and prevention strategies will be key enablers for achieving quality and productivity gains.</p>
<ul style="list-style-type: none"> • Consultation with the Youth Council regarding the development of a web based module which will target 	<p>Suggestions by Young People of e-module layout;</p> <ul style="list-style-type: none"> • Duration 1 hour • Interactive – Video scenario / 	<p>Young People feedback will inform the development/ design of a mental health e-learning module for Wandsworth Children’s Workforce</p>	<p>A Full Young People involvement and Participation report in place to inform service</p>	<p>Total scope of training specified Clinical in put for training</p>	<p>A bespoke mental health e-learning module to</p>

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<p>the children's workforce, such as Foster Carers, Social Workers, Schools, Health Visitors, School Nurses and GPs.</p>	<p>case studies– 5-10 minutes</p> <ul style="list-style-type: none"> • Information ; what it is, how the issue is caused, what is the impact, what is the solution – 5 Mins • Mini quiz per session (if there is time) as a recap to check understanding • Suggestions on what to do throughout • Could be divided in parts • Mix of questions- multiple choice - • Extended answers <p>Governance;</p> <ul style="list-style-type: none"> • Compulsory course for everyone who wants to enter this workforce to know about issues impacting on the emotional health and wellbeing of children and young people • Renew every 2 years • Young people need to be consulted at renewal stage as issues impacting on CYP mental health change • Must retake if fail multiple choice 		<p>specification.</p>	<p>content and assurance</p>	<p>reflect the needs of children and young people in Wandsworth h.</p>
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2.9. Service Area: Multispeciality Community Provider (MCP)				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
NHS Wandsworth Clinical Commissioning Group (CCG) has recently developed a Multispeciality Community Provider model (MCP) which will transform both Primary Care and out of hospital care across Wandsworth, and support delivery of the 17 specifications set out in the London Strategic Commissioning Framework for Primary Care.	Following an open procurement process we are pleased to announce that the CCG has awarded the MCP contract to the Wandsworth GP Federation (Battersea Healthcare Community Interest Company – the Not-For-Profit GP Federation for Wandsworth). MCPs are a new type of integrated care model, which combine the delivery of primary care and community-based health and care services – under a Lead Provider. It also incorporates a much wider range of services and specialists wherever that is the best thing to do. The model will allow health and care professionals to work together with and for patients. Wandsworth GP Federation will ensure that agencies across health, mental health and social care are connected	The Federation will deliver the MCP specification for a seven year period from 1 April 2016 using a phased approach. We expect the specification to evolve over time as we capture and evaluate learning from the initial model. Phase 1 (from 1 April 2016) will see the Federation deliver the following services: <ul style="list-style-type: none"> • Primary Care Enhanced Services – Planning all Care Together (PACT) The PACT enhanced service identifies patients at risk of hospital admission and resources GPs to pro-actively manage their care. • Primary Care Enhanced Services – Diagnostics Four diagnostics services have been bundled into an 	MCPs are a new type of integrated care model, which combine the delivery of primary care and community-based health and care services – under a Lead Provider. It also incorporates a much wider range of services and specialists wherever that is the best thing to do. You can find more information	The CCG will support the Federation in the procurement and mobilisation of Phase 2 (from October 2016) and Phase 3 (from April 2017) services as below. The service specifications for Phase 2 and 3 are yet to be fully developed, and will require joint working from the Federation, the CCG and other local providers to ensure each service will be effectively	

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	<p>and co-ordinated to deliver multidisciplinary care for patients at home and in the community.</p>	<p>overarching specification to ensure a standardised, efficient service, which all patients across Wandsworth can access 24hr Ambulatory Blood Pressure Monitoring, 12-lead Electrocardiogram, Phlebotomy and Spirometry.</p> <ul style="list-style-type: none"> • Enhanced Care Pathway (ECP) The ECP will support the 3000 frail older patients on the Community Adult Health Services case load, initially focusing on 500 of the most complex patients at highest risk of deterioration. • Primary Care Quality Contract This borough-wide contract operates at individual practice level to identify and resolve gaps in quality, supporting GP practices to deliver high quality patient care. • Learning Disability Primary Case Management 	<p>about MCPs in NHS England's multispecialty community provider (MCP) emerging care model and contract framework.</p> <p>This is an exciting development in our plans for transforming health services in Wandsworth and we will keep you updated as the work progresses. In the meantime if you have any questions please contact Katie Denton (Katharine.denton@wandsworthccg.nhs.uk).</p>	<p>integrated.</p> <p>Phase 2</p> <ul style="list-style-type: none"> • Community Adult Health Services (CAHS) • Better at Home Service <p>Phase 3</p> <ul style="list-style-type: none"> • End of Life Care Co-ordination Centre (EOLC) • Community Based Care Models for Long Term Conditions (LTCs) 	
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		This service will reduce health inequalities by improving access to Primary Care for people with learning disability, whilst ensuring that the care they receive is fully integrated with the wider health and care system.		 Better at Home event feedback v3 (002).doc	
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2.9. Service Area: Primary Care Quality Objective: PPI, Carer and Seldom Heard Groups Representation				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
PPI engagement around Primary Care Quality – all three Locality Patient groups, PPI Reference Group, Heathbridge Patient Group	<p>Presentation to and then workshop and discussion about CCG plans for managing Primary Care Quality</p> <p>Questions asked:</p> <ul style="list-style-type: none"> • As patients what do you see as good quality general practice? What is poor quality? • How can quality be assessed by the CCG? • What can or should be measured? • How can the CCG gather patient views about quality in general practice? 	Feedback fed in to development of primary care quality processes.	Write up of workshops discussions	Engagement of patients in primary care quality work	Continued engagement of patients in quality improvement

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2.10. Service Area: Battersea Locality Objective: Embedding PPI in Locality Services				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
Battersea Patient Consultative Group	<p>Opportunities for the patient group to feed into locality and CCG wide work streams.</p> <p>Discussions and input from group on areas including:</p> <ul style="list-style-type: none"> • Nine Elms and Vauxhall • Primary Care Quality • End of Life • Wandsworth Self-management service • GP Patient Survey results • Voluntary Sector Coordination Project • Locality projects 	<p>Feedback from focus areas taken back by relevant leads to feed into their workstreams</p> <p>Feedback regarding locality projects fed into Management team and members forums to develop projects.</p> <p>Feedback or queries about specific services passed on to appropriate leads</p>	Minutes of meetings	Meetings to continue every two months	<p>Patients to have opportunity to feed in to CCG work / strategy</p> <p>To provide conduit between CCG and individual practice patient groups</p>

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<p>Battersea Locality Members Forum</p>	<p>Members Forums cover a range of topics – focused on the practices as members of the CCG and commissioners</p> <p>Monthly meetings with member practices. Chair of PCG chair this meetings. Two other patient representatives from PCGS are also to attend.</p>	<p>Feedback from specific discussions passed back to relevant leads to inform their workstreams</p> <p>Members Forums cover a range of topics – focused on practices as members of the CCG and commissioners.</p> <p>Feedback from specific discussions passed back to relevant leads to inform their workstreams.</p>	<p>Minutes of meetings</p>	<p>Monthly meetings to continue</p>	<p>Patient views fed into discussions. Feedback passed back to relevant leads to inform their work</p>
<p>Seldom Heard Groups Visits</p>	<p>Annual visit by one GP from each practice to a seldom heard group or community</p>	<p>GPS have template to complete that reflects their observations, new learning and issues to take back to their own practice.</p> <p>Enables voice of the community groups to be heard and for the GPs to find out about local issues and develop relationships with community groups that they might refer patients for social support not provided by GPs.</p>	<p>Minutes from these meetings are available through Danielle.price@wandsworthccg.nhs.uk</p>		
<p>Joint Locality Patient Group Chairs meetings</p>	<p>Quarterly – all three locality’s patient chairs and locality managers</p>	<p>Opportunities for update and discussions on Wandsworth wide issues and service improvement programmes where patients can best be represented.</p>	<p>Minutes from these meetings are available from Danielle.price@wandsworthccg.nhs.uk</p>		

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1. Collective Duties- Engagement and Participation Activities in various services of Wandsworth CCG.				Action Plans for 2017-18	
2.11. Service Area: Wandle Locality Objective: Embedding PPI in Locality Services					
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
Wandle Locality Patient Consultative Group Meetings every 6 to 8 weeks	<p>Feedback from focus areas taken back by relevant leads who attend to present to the group. Workshops written up and circulated</p> <p>Representatives from Practice Patient Groups, Locality Management, Clinical Lead, HealthWatch, PPI Reference Group, Voluntary Organisations</p> <p>Opportunities for the patient group to feed into locality and CCG wide work streams</p> <p>Annual locality roadshow – 10th September.</p> <p>Discussions and workshops from group on areas including:</p> <ul style="list-style-type: none"> • Locality decisions and projects 	<p>Feedback from focus areas taken back by relevant leads to feed into their workstreams</p> <p>Feedback regarding locality projects fed into Management team and members forums to develop projects.</p> <p>Feedback or queries about specific services passed on to appropriate leads. Feedback from focus areas taken back by relevant leads to feed into their workstreams</p> <p>Feedback regarding locality projects fed into Management team and members forums to develop projects.</p> <p>Feedback or queries about specific services passed on to appropriate leads</p> <p>Was opportunity for public to ask CCG questions?</p> <p>Stalls from various local groups and projects such as Citizens</p>	<p>Minutes from these meetings are available from Danielle.price@wandsworthccg.nhs.uk</p>	<p>Quality plans to be aligned with CCG Operating Plan for 201-17 and beyond</p>	

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	<ul style="list-style-type: none"> • Co-commissioning • CCG Commissioning Strategy • Primary Care Transformation • Diabetes CRG • Community ophthalmology redesign • Improving Access to Psychological Therapies • Healthwatch • Social Prescribing • Citizens Advice • Lifetimes • Wandsworth Wellbeing Hub • South West London Issues Paper • CCG Board Lay Member • Patient Online • Members to feedback to PCG from practice patient group meetings. 	<p>Advice, Lifetimes and Pauls Cancer Centre Presentation by Clinical Leads on the locality Q&A session</p>		<p>Once a year Locality Road Shows for 2017-18</p>	<p>Engagement with the wider public and stakeholders about Locality Developments.</p>
<p>Wandle Locality Members Forum</p>	<p>Monthly meetings with member practices. Attended by the Chair of the PCG.</p> <p>Members Forums cover a range of topics – focused on the</p>	<p>Feedback from specific discussion passed back to relevant leads to inform their workstreams.</p>		<p>Ongoing meetings every two months of 2017-18</p>	<p>Engagement and input into specific CCG strategies/projects. Input into Locality</p>

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	practices as members of the CCG and commissioners				projects.
Seldom Heard Groups Visits	Annual visit by one GP from each practice to a seldom heard or community group	Enables voice of community groups to be heard, and for local practices to find out about and develop relationships with groups that may benefit their patients. GPS have template to complete that reflects their observations, new learning and issues to take back to their own practice.	Reports feedback to the PPI Team. Reports available from chan.maher@wandsworthccg.nhs.uk Minutes from these meetings are available from Danielle.price@wandsworthccg.nhs.uk		
Joint Locality Patient Group Chairs meeting	Quarterly meetings – all three locality patient chairs, locality managers, Update from each locality Discussion on what can be done Wandsworth wide and how patients can be best represented	Feedback from the joint locality patient group chairs meeting is feedback into the locality patient groups	Minutes from these minutes are available from Danielle.price@wandsworthccg.nhs.uk		
Wandle Management Team	Monthly meetings with Clinical Leads, Lead Nurse, Public Health and Chair of the PCG	Discussion around Locality Projects and Investment Budget. Direct opportunity to feed into Locality Projects. Actions from meetings shared with Members Forums and PCG.	Minutes of these are available from Claire.frampton@wandsworthccg.nhs.uk		

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		Allows the Chair of the PCG and then rest of the PCG to feed directly into decision making at Locality Level.			
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2.12. Service Area: West Wandsworth Locality Objective: Embedding PPI in Locality Services				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
West Wandsworth Members Forum	A patient representative attends each meeting as a representative of the locality patient group. Other attendees at these meetings include GP representatives from each practice, locality management, public health reps and prescribing rep. Locality issues are discussed and presentations are given by relevant project/service leads. There are opportunities for attendees to provide feedback and ask questions.	Provides a link between the patient group and the Members Forum and enables the patient voice to be heard.	Minutes of meetings	Monthly meetings to continue (10/year)	Patient views are fed into discussions. Feedback passed back to relevant leads to inform their work

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<p>West Wandsworth Locality Patient Consultative Group</p> <p>Monthly meetings with up to 9 patient representatives attending and on average around 5 attendees a month.</p>	<p>Opportunities for the patient group to feed into locality and CCG wide workstreams. Feedback obtained from the group is passed on to the relevant lead within the CCG to co-produce locality initiatives. The patient representatives also feedback into their practice patient groups.</p> <p>Recent meetings have discussed major service changes including the Southwest London Issues Paper, the transforming primary care workstream, domestic violence services and ongoing work with the West Wandsworth locality initiatives.</p> <p>Opportunities for the patient group to feed into locality and CCG wide work streams. Recent meetings have discussed; Urgent Care and 111, End of Life Care, Productive PPI, Voluntary Sector Coordination Project, Wandsworth Wellbeing Hub, Primary Care Quality, Domestic Violence, Wandsworth Self-Management Service</p>	<p>The feedback on locality initiatives informs the development of these throughout the year. Feedback on wider CCG projects is provided to the relevant project lead or CRG manager. Feedback on local services provided.</p> <p>The feedback on locality initiatives informs the development of these throughout the year.</p> <p>Feedback on wider CCG projects is provided to the relevant project lead or CRG manager.</p> <p>Feedback on local services is provided directly to the service leads.</p>	<p>Minutes of meetings</p>	<p>Ongoing 2017-18</p> <p>Locality plans to be aligned with CCG Operating Plans for 2017-18 and beyond.</p> <p>Meetings to continue every two months</p>	<p>Patients to have opportunity to feed in to CCG work / strategy</p> <p>To provide conduit between CCG and individual practice patient groups</p>
<p>Joint Locality</p>	<p>The Locality Patient Chairs meet to</p>	<p>Ongoing discussions link to the</p>			

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Patient Chairs meetings Quarterly meetings	discuss how localities can work together to best represent patients in service improvements and locality developments.	work of the locality patient group. Feedback from the joint locality patient chairs meetings are passed onto patient groups.			
Seldom Heard Group Visits- Annually	Each GP practice is asked to visit a local voluntary or seldom heard group on an annual basis	Enables the voice of community groups to be heard by GPs and fed back to their practices. Reports of each visit are written for wider communication and learning.	An action from these visits is to feedback to practices to inform their staff about the work of local voluntary groups. Improved and relationships and potential referral to voluntary sector/community groups to support social issues such as isolation and needs for befriending.		

Overall, we have successfully embedded PPI and engagement in **21 service areas** that supports the **Individual participation duties (9)**; and **12 service areas that support the Collective participation duties.**

1.1 Service Area: Wandsworth Wellbeing Hubs Objective: To get the views of patients of the service as well as giving them a platform from which they could help develop and tailor the service to how best patients would like it to look and feel.				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact/What Difference	Evidence	Activities	Desired Outcomes
Quarterly meetings with the ¹ Critical Friends in which we discuss the Hub, the activity and marketing opportunities which could help more people access the service and make it more visible.	The website looks and feels good but the marketing strategy needs to extend further than the original soft launch material. The group recommended working	We changed the website a great deal according to the feedback from the Critical Friends. We also used their	Minutes and agendas are available from Amrinder Sehgal, WSMS Service Manager. Additionally we have an action tracker which can also	Ongoing for 2017-18 as funding has just been approved for the next 12 months.	Increased access to locally available services in the community. This can be evidenced through the

¹ A Critical Friend is non CCG staff who want to work constructively with the NHS and raise critical questions to help improve services.
<http://www.wandsworthccg.nhs.uk/getinvolved/PPIResourceCentre/Toolkit/Involve/Pages/Critical-friends.aspx>

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The meetings are normally chaired by a member of the team but the agenda is generally controlled by the patients. There are certain areas which we always ask for feedback such as the look and feel of the website, the services that are available on the directories, feedback that people have received from those who have used the service and a wider discussion on the activity of the service, focusing on both telephone calls and website hits.	with Headstart and Brightside as well as some of the other publications that work more locally rather than across Wandsworth. It was also suggested that we make a bigger presence for ourselves at events and road shows; the group has offered to join us on these events if we require the extra staff.	help to change the language to make it less jargon orientated and to ensure we were reaching the widest audience possible.	be made available as part of the evidence. Details available via: amrinder.sehgal@wandsworthccg.nhs.uk		increased number of hits and self-referral activities to the Wellbeing Hubs, by GPs and other community service providers.
To ensure The Wandsworth Wellbeing Hub is accessible to those without access to the internet or a telephone	Offered face-to-face enquiries in the community	- 8 people have accessed face-to-face enquiries since October 2016	<ul style="list-style-type: none"> Hestia age activity centre requested fortnightly drop-in sessions SWL Vineyard offered their foodbank for drop-ins as and when they are needed 	To offer face-to-face enquiries in primary care	-To contact GP practices to offer regular/one-off Hub Drop-Ins

1. Engagement Structure that supports the Individual Participation Duty

1.2. Service Area: Wandsworth Self-management Service

Objective: Similar to the hub, we have reported our performance and activity to the Critical Friends group and asked for their advice on how to market the courses. We have also used them to pilot and get feedback on new material such as the short course and Health Care Professional (HCP) training.

Action Plans for 2017-18

Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
Quarterly meetings of team and clinical leads to discuss the service, the	EPP is a well-known and established course but may not be appropriate for all, especially	The feedback from both the short course and Health Care	Minutes and agendas are available from Amrinder Sehgal, WSMS Service	Ongoing for 2017-18	More people with Long Term conditions

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<p>courses and other extensions of our remit such as care4me and the self-help group work.</p> <p>We used the meetings to ask how the group felt about the material in the short course and the HCP training. Who they felt the courses should be facilitated by and who the target audience should be.</p> <p>With regards to EPP, we spoke about the difficulty in getting people onto courses and the change in strategy to work closer with the third sector.</p>	<p>those who cannot commit to 6 weeks because of personal reasons and those who are in fulltime work.</p> <p>The short course is a great idea but there was debate about whether this should be light touch or something quite comprehensive i.e. 1 session or 3 sessions.</p> <p>Eventually we went with the light touch approach and arranged a pilot with the group in order to get some critical feedback. The HCP needs to be promoted actively by the GPs as part of self-management as alternative to secondary care and ongoing medication use.</p>	<p>Professionals (HCP) pilots with the group were taken on board. This led to changes made to the end material that was delivered.</p> <p>The feedback on the Expert Patient Programme (EPP) has impacted on the way we market the programme and has led to us creating positive relations with a number of third sector organisations such as Wandsworth Carers and Wandsworth MIND.</p>	<p>Manager. Additionally we have an action tracker which can also be made available as part of the evidence. Details available via: Amrinder.sehgal@wandsworthccg.nhs.uk</p> <p>Funding for the self-management service for the next 12 months was agreed by the Delivery Group.</p>		<p>empowered to manage their own conditions.</p>
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<p>To deliver a bespoke service to third sector and community organisations</p>	<p>Worked with: - Katherine Lowe Settlement - Wandsworth Mind - Haven Lodge</p>	<p>- 25 people attended a bespoke self-management workshop at KLS - 30 people attended a Diabetes talk at Wandsworth Mind - 7 people were in attendance at a hub drop-in session at Haven Lodge</p>	<ul style="list-style-type: none"> • Written Feedback collected demonstrating the workshop enabled them to think in a self-management approach • Mind requested further workshops and a full New Beginnings course • Haven lodge requested our short course 	<p>To offer all new organisations in our network all of our services and work together to ensure our service is meeting their needs.</p>	<p>To work with more -LGBT groups -Male only community groups -Church groups -Sheltered Housing</p>
<p>Many thanks to you all – what a great talk – look forward to working with you all in the future.</p> <p>Chris</p>					

PPI activities in service areas and evidence of their impact for 2016-17

<p>To ensure our self-management courses are accessible for BME Communities</p>	<p>Worked closely with WCEN to co-deliver courses</p>	<p>Co-delivered courses for - The Hindu Society Centre – 25 people signed up, 17 course completers - Shree Ganapathy – 12 people signed up, 10 course completers</p>	<ul style="list-style-type: none"> Both groups requested another full course 	<p>To work with WCEN to deliver courses for ore BME community groups within the WCEN network</p>	<p>-To deliver 6 full courses for these groups</p>
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This course is excellent. I learn so many different thing about the health. It will be helpful in future. Even for GP I understood how to explain our problem. The book is given by you is very nice. Thank you very much for this EPP

Mail Note created on 25/11/2016 09:55 by Nison Dalabdas
 Course was very interesting & effective. So far I feel very healthy. It will help me certainly if I fall ill.

I am becoming more confident in whatever I am doing. Have found making an action plan is very good. I found the course very good and encouraging

This course is excellent. I learn so many different thing about the health. It will be helpful in future. Even for GP I understood how to explain our problem. The book is given by you is very nice. Thank you very much for this EPP

Really empowered me to take responsibility for my health and do things to help lessen the effects.

Course is very good and it should be helpful to every elderly. It will give a lot benefit

PPI activities in service areas and evidence of their impact for 2016-17

1.3. Service Area: Expert Patient Programme Objective: Training of People with Long Term Conditions to enhance Self-Management and enhance prevention and early intervention and reduce unnecessary use of Emergency and Acute services.				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact/What difference it made.	Evidence	Activities	Desired Outcomes
EPP Reunion – we run 2 reunions per year and have had great success with these. We use the reunions to get feedback from participants about the courses and also as a mechanism for following them up as well as reinforcing certain areas of the course where it can be easy to fall out of routine.	We normally allow for an activity called ‘free think’ at a reunion where people get to express the difficulties they are having with their conditions. Through this, individuals also share what tools they use to get past this and this can often help those who are struggling.	Through attending the course people have been able to better manage their pain, fatigue, increase their confidence, exercise more and learn more about having a healthy diet.	Minutes and agendas are available from Amrinder Sehgal, WSMS Service Manager. Additionally we have an action tracker which can also be made available as part of the evidence. Details available via: Amrinder.sehgal@wandsworthcg.nhs.uk	Development of future EPP reunions underway for 2017-18	Increase numbers of EPP completers.
Pre and Post course feedback -allows participants to feedback how they have found their time on the course and whether they have found it valuable. The questionnaires are handed out at the first session of the course and session 6 which is the last session of the course.	The questionnaire collects information about how participants have progressed over the course and whether attending has had any impact on their wellbeing. The questions are focused on: confidence, management of fatigue and pain and the reliance of the individual on the healthcare system - particularly GP and A&E.	Feedback from the questionnaires was excellent with evidence of economic savings. Baseline analysis from the questionnaire has shown that every person attending and completing the EPP course save the CCG 2 GP appointments and 0.2 A&E attendances.	This data was published in the reports that were submitted to both delivery group and management team as part of the bidding process to secure further funding for the Wandsworth Self-Management Service. Details available via: Amrinder.sehgal@wandsworthcg.nhs.uk	Plans for self-management and Expert Patient Programmes Courses are planned for 2017-18	More patients being trained on self-management will help strengthen evidence of reduced unnecessary use of specialist and A&E use and hospital re-admissions.
To ensure that the Diabetes Champions Programme is accessible for those with a mental health condition	Offered a Champions’ talk to Wandsworth Mind	- 30 people (staff and service users) in attendance, 3 had diabetes and at least 5	<ul style="list-style-type: none"> Mind took photos of the group for their website to promote the event in the future 	To work with Mind in their new premises to reach all	-To deliver a talk in their new premises -To encourage

PPI activities in service areas and evidence of their impact for 2016-17

		others were at high risk	<ul style="list-style-type: none"> Attendees engaged well and asked questions Everyone took either a 'Know your risk' leaflet or '15 Healthcare essentials' leaflet dependent on whether they were at risk or diagnosed Requested another talk once they have moved premises 	the new residents To offer staff and service users the chance to become a Champion in the next recruitment drive	as many people to apply to become a champion as possible
Meeting with community organisations to raise awareness of our services	Presented at The Access Association	30 people in attendance all with a long-term condition(s)	<ul style="list-style-type: none"> Every individual present took a leaflet for either EPP or The Hub 	To continue to meet with community organisations to raise awareness	To meet with all groups who are interested in our services
Engaging with community events in the Borough	Attended the health pop-up shop in Southside	Spoke to individuals who came into the shop about our services, including the Diabetes Champions		To continue to attend events in the community	To continue to attend events in the community
Critical Friends	We established the Critical Friends Group back in 2014 as part of the WSMS 5 Year Out of Hospital submission. The group has been a tremendous help to us over the last 3 years, helping us pilot our short course with their feedback and developing the Wandsworth Wellbeing Hub.	The group has helped the service pilot the short course and has provided feedback on how it could be marketed and what materials need to be changed. The group also commented that the course would be appropriate for anyone with any long term condition as an introduction to self—	These meetings are formal meetings with key stakeholders, which means they have an agenda and an accompanying set of minutes. Meeting normally take place every 2-3 months and are generally well attended with most meetings having at least 6 attendees.	Engage the group further to ensure that they have a way of influencing our existing projects as well as our new projects.	To make sure that our approach matches the expectations of patients and access to the service is optimised.

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		management. The group also worked with the service to make the new Wellbeing Hub website more patient friendly and easier the access.			
					<p>Hi</p> <p>Happy new year</p> <p>Just want to let everyone know there is to be another health shop in Southside shopping centre (flyer attached)</p> <p>should you wish any information or to be involved (as you were last year in Tooting) please give me a ring on</p>

Engagement structure that supports the Individual Participation Duty				Action Plans for 2017-18	
Service Area: Mental Health Clinical Reference Group				Action Plans for 2017-18	
Objective: Service user and carer involvement in the Clinical Reference Group				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
<p>Service users and carer representatives are regular attendees at the CRG and provide input to all areas of the CRG work programme. The CRG has developed and agreed an action plan to specifically enhance PPI input. The Action Plan is regularly monitored within a separate sub-group and progress presented to CRG.</p> <p>Regular and substantive input to the CRG meeting. The action plan considers the following key themes:</p> <ul style="list-style-type: none"> Improving communication Supporting representatives Harnessing all available views 	<p>Feedback is received on all key areas of the CRG work programme. All service development sub-groups will seek to include service user and carer representation.</p>	<p>The quality of input has been improved through developing an environment where voices are heard and acted upon.</p> <p>The experience of those who have used services or those cared for have been at the centre of all programme work.</p>	<p>MH CRG notes and PPI Action Plan is held by MH Commissioning Manager (Mark Robertson) on mark.robertson@wandsworthccg.nhs.uk</p>	<p>Service user representation with the Mental Health CRG is ongoing for 2017-18</p>	<p>Improved mental health services and better integration of care between IAPT and community services.</p>
<p>MH IAPT Procurement</p> <p>Regular attendance of service users and carers at procurement working group. Taking a full part in development of specification and</p>	<p>Key questions on what needed to be included within service specification and the key areas to consider as part of the evaluation of forthcoming tenders. This</p>	<p>Feedback informed the development of the service specification for IAPT services.</p> <p>The feedback ensures that</p>	<p>Available through MH Commissioning Manager (Mark Robertson) on</p>	<p>Ongoing 2017-18</p>	<p>Reduction of unnecessary hospital readmission and</p>

PPI activities in service areas and evidence of their impact for 2016-17

tender process. This included joint work between commissioners and PPI representatives to engage on the development of the service specification.	includes: How access to the service could be enhanced, particular groups of people should be targeted and how, where services should be offered.	views of those who may have used or will use the service continue to inform service delivery of mental and IAPT services.	mark.robertson@wandsworthccg.nhs.uk		improvement of IAPT services provided in the community.
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Engagement structure that supports the Individual Participation Duty				Action Plans for 2017-18	
Service Area: Older People's Mental Health Services					
Objective: Redesign of Older People's Specialist Mental Health Services					
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
Engagement sessions with people with dementia and/or older people with complex functional mental health needs, their carers and families were asked for their experiences of OPMH specialist services in October 2016.	Carers felt that whilst the Memory Assessment service and Behaviour and Communication support service had high quality interventions that the Community Mental Health functions could be better in terms of access, expectations and timeliness.	The engagement feedback has influenced the design of the new specialist OPMH service model being implemented from April 2016.	Engagement outcomes and draft specification available from Alison.kirby@wandsworthccg.nhs.uk.	Ongoing plans to engage service users of the new service for 2017-18	Improved mental health services for older people with dementia.
Review of non-clinical post dementia diagnosis support. People with dementia, their carers and families were involved reviewing the current provision through engagement sessions with specific forums and groups operating within the dementia pathway between August and September 2016.	Based on involvement and feedback it was determined that the new service should provide everyone in Wandsworth who has had a diagnosis of dementia with a named navigator. The navigator would need to deliver a minimum of a quarterly review to monitor risks and identify new needs. The key principles from these sessions were that there should always be someone to	The new service model has been redesigned to deliver the key principle of a named navigator and from April 2016, people using these services will receive more proactive, personalised and timely support.	Service review document and new service model specification available from Alison.kirby@wandsworthccg.nhs.uk	Ongoing	

PPI activities in service areas and evidence of their impact for 2016-17

	navigate to, unless they are on the caseload of OPCMHT or go into 24 hour care.				
Community Resilience (CR) project to provide social inclusion and wellbeing activities in the community for older people. <u>Tai Chi for people with dementia, participation feedback</u>	An informal session at an older people's day centre involved in the CR project, identified that dementia training for volunteers needed to be more accessible and offer social inclusion opportunities.	Increase in volunteer's confidence, accessibility of the centre for the people with dementia that now receive more person centred experiences as a result of volunteers undertaking targeted training. Tai Chi participants are more relaxed, more flexible, have improved breathing and felt happier which made them smile and feel involved.		Ongoing	Improved wellbeing.

Engagement structure that supports the Individual Participation Duty				Action Plans for 2017-18	
Service Area: Learning Disabilities CRG. The CRG was established as a way forward from the LD Partnership Board, which now provide a clearer reporting channel through CCG governance structure. Objective: To ensure that people with LD and their carers have a voice					
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
Regular attendance of service users and carers at the CRG meetings. Service users are supported to have their say at the meeting by the project manager from Wandsworth Learning Difficulties Network (WLDN).	Service users and carers provide regular input into the discussions, for example service users' issues around hate crime, experience of using hospital, problems with using public transport are taken forward.	Service users report that their experience of the CRG meetings was generally positive and they felt valued. Similarly, carers also feel they have the opportunity to have their say. Service users and carers are an integral part of the LD CRG. Issues are discussed and resolved e.g. hate crime - this was taken forward with a view of having police representative	ToR available from: Tarlochan.ghale@wandsworthccg.nhs.uk	Engagement activities aligned with the operating plan for 2017-18 for the delivery of local action plans and the roll out of care treatment reviews in line with	

PPI activities in service areas and evidence of their impact for 2016-17

		<p>attending the meetings, problems at St. Georges taken forward by the acute liaison nurses at the acute trust.</p> <p>An 'open meeting' held in November 2016 included other carers to ask questions from the panel.</p>		policy.	
<p>Learning Disabilities CRG</p> <p>To ensure that people with LD and their carers have a voice</p> <p>The CRG was established as a way forward from the LD Partnership Board, which now provide a clearer reporting channel through CCG governance structure</p>	<ul style="list-style-type: none"> • Service users report that their experience of the CRG meetings was generally positive and they felt valued • carers also feel they have the opportunity to have their say 	<ul style="list-style-type: none"> • Regular attendance of service users and carers at the CRG meetings. • Service users are supported to have their say at the meeting by the project manager from Wandsworth Learning Difficulties Network (WLDN). • Service users and carers provide regular input into the discussions, for example service users issues around hate crime, experience of using hospital, problems with using public transport are taken forward. 	<p>LD CRG mins of meetings</p> <p>ToR</p>	<p>Review of role and priorities of CRG 2016-17:</p> <p>Arranging an event inviting SU/ carers/ members of the CRG to discuss moving forward.</p> <p>Looking at 3 main areas:</p> <ul style="list-style-type: none"> • Addressing Health Inequalities • "Keeping Healthy and 	<ul style="list-style-type: none"> • Feedback from event and questionnaire will inform the next LD strategy (2016-2020) • LD CRG will have a workplan of its priorities

PPI activities in service areas and evidence of their impact for 2016-17

				<p>Happy”</p> <ul style="list-style-type: none"> • An inclusive and accessible community “Enjoying life” • Good quality housing “having a good home” <p>Sending out access to health questionnaire</p>	
<p>Personal Health Budgets (PHB) The aim of a personal health budget is to give individuals with long term health conditions and disabilities more choice and control over the money spent on meeting their health care and wellbeing needs.</p>	<p>The CCG have approved of five out of six applications for PHB.</p>	<p>The approved cases have achieved enhanced health care and greater choice, flexibility and control over the health care and support they receive</p>	<p>Individual support plans. Mins of meetings Presentation at Wandsworth Carers Centre on PHB 2/03/2016</p>		

PPI activities in service areas and evidence of their impact for 2016-17

<p>The individual is at the centre of the planning of a PHB.</p> <p>The CCG approached the Community Learning Disability Health Team to identify individuals who would benefit from PHB</p>					
<p>Eye questionnaire To gather information from service users about the experiences of having their eye sight tested, what they felt would help eye testing a better experience, about their sight, when they last had their sight tested and questions around the wearing of glasses</p>	<p>From the respondents:</p> <ul style="list-style-type: none"> • Majority of respondents had had their eye sight tested • The respondents were happy with how the tests were carried out- they were given extra time, clear explanations, and were allowed to take someone in with them whilst having the tests • Some concern from a supported living accommodation where staff reported that they had no 	<ul style="list-style-type: none"> • People will continue to have their eyes tested regularly • Eye conditions are picked up early and treated • 	<p>Analysis of questionnaire</p>		

PPI activities in service areas and evidence of their impact for 2016-17

	previous records of the clients having had eye tests but also clients reported that didn't know if they had had an eye test				
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Engagement structure that supports the Individual Participation Duty					Action Plans for 2017-18	
Service Area: Enhanced Care Pathway					Activities	Desired Outcomes
Engagement Activity	Summary of Feedback	Impact	Evidence			
A patient/carer satisfaction questionnaire will be sent out to all ECP 500 patients that consent to be contacted to give feedback. The questionnaire will be a focussed set of questions around the Health & Social Care Coordinators (H&SCC).	Currently being completed.	Finding will be discussed at the monthly mobilisation meeting to look at how the model needs to evolve and respond to the feedback N/A	New questionnaire for 17/17 to focus on a different professional group e.g. community nurses  My Wandsworth Shared Care Plan.doc  ECP PPI Evidence 1.docx		More detailed feedback on how role of community nurses.	
A subset of the ECP 500 patients/carers who have consented will be interviewed. The interview will be conducted over the telephone and gather	20 out of 20 interviews have been completed. Feedback is really positive and suggests that patient's feel supported and know who to contact.	Finding will be discussed further at the next monthly mobilisation meeting to look at how the model needs to evolve. Patient interview summary	Revise questions to focus more on community services aspect of care.		Get a more rounded view of how the ECP is working.	

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more in depth information.				
A Healthwatch representative attends the monthly PACT ECP Mobilisation meetings to provide scrutiny and challenge.	Useful feedback into meetings regarding wording, language and making things clear to the patient and carer.	Developed a front sheet to the care plan to explain clearly to the patient and carer the purpose of the document and who to contact. Care plan overview	Continue to have a Healthwatch representative at the monthly meetings.	Patient/carer perspective is obtained on all aspects of the pathway.

Engagement structure that supports the Individual Participation Duty				Action Plans for 2017-18	
Service Area: Community Adult Social Health Services (CAHS)				Action Plans for 2017-18	
Objective: Obtain patient feedback to improve older people and adult care services				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Engagement Activity	Summary of Feedback
With permission, patient/carer interviews have been conducted using a digital recorder to record the entire interview from March to October 2016. The recordings were taken back to the CCG and transcribed on to a word document.	Patients/carers were then asked further, open ended questions to describe their recent experience of care. Themes covered were: • Treatment and care • Positives and negatives • Prescriptions and medication Each patient/carer had a different experience of care.	As a result of the interviews, improvements have been made to patient pathways including: • Access and Coordination for the single point of contact for Community adult health services (CAHS) has been re-launched. • Development of an integrated care plan. • Development of intranet pages and leaflets.	W:\Delivery and Development\community service redesign\6.CAHS PATIENT SATISFACTION\Interview transcripts and summaries	Follow up activities to develop the Integrated Community Care Pathway for the Frail and Elderly.	Roll out of care pathway for 2017-18

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		<ul style="list-style-type: none"> The CCGs intranet page now contains information about the relevant community services as a quick guide for clinicians and Primary care to be kept up to date. 			
<p>Patient Experience Review Group (previously known as Critical Friends Group) – to obtain views and experiences from patients and carers. The CCG have been running the Patient Experience Review Group, attended by provider services quarterly from April 2016.</p>	<p>The meeting has provided the CCG and provider staff with an insight in to the patients’ experience, as well as the practicalities of patient pathways and delivering these in Wandsworth.</p>	<p>As a result of the review group, CAHS staff and management team have reviewed their access and coordination pathway for patients to ensure the single point of contact is accessible and known to patients in the community. The group has also contributed to the design of care plans used in the community, as well as the development of a patient leaflet which is now in use by CAHS staff for distributing to patients and carers advertising the CAHS service.</p>	<p>W:\Delivery and Development\community service redesign\6.CAHS PATIENT SATISFACTION\Review Group</p>	<p>Ongoing and follow up activities</p>	<p>Rolled out and used by services in the community.</p>
<p>WHIZ event – to inform members of the public about the Enhanced Care Pathway and to ask their opinions on the model.</p>	<p>PPI and communications team hosted a stall at Southside Shopping Centre in Wandsworth and spoke to members of the public about the Enhanced Care Pathway and asked them to fill out a questionnaire. January 2016.</p> <p>The public were asked demographic</p>	<p>The results of the event are due to be analysed in more detail but will inform the development of the Enhanced Care Pathway.</p>	<p>W:\Delivery and Development\community service redesign\6.CAHS PATIENT SATISFACTION\WHIZ</p>	<p>Follow up activities to promote and continue to inform patients and the public be promoted through the general communications</p>	

PPI activities in service areas and evidence of their impact for 2016-17

	<p>questions about themselves (age, borough of residence, LTCs) and then a series of questions about care they have received previously (discharge plans, key workers, coordinated care, involvement in care planning).</p> <p>Many of the members of the public that were asked had previously been admitted to hospital, had discharge summaries and a key worker assigned but were not involved in their care planning.</p>			<p>of the CCG including the monthly newsletter.</p>	
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PPI activities in service areas and evidence of their impact for 2016-17

Activity in various service areas for 2017-18 and action plans for 2017-18

Engagement structure that supports the Individual and Participation Duties.				Action Plans for 2017-18	
Service Area: Improving Access to Psychological Therapies (IAPT) Objective: Engagement of the Wandsworth Mental Health Interest Group on the procurement of IAPT and digital mental health services					
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
<ul style="list-style-type: none"> • Are there any groups that you believe should be prioritised for IAPT services? • Where would you like to see IAPT services located? • How can we make it easier to use the IAPT service? • Are there any other things that we need to do to improve services? 	<ul style="list-style-type: none"> • Improve engagement of Black and Minority Ethnic to digital mental health support service • Access and waiting times are the main areas of concerns. People in an acute state of anxiety and depression will not want to wait for 6 weeks to access treatment Commissioners should consider advice and self-help for people who are waiting for treatment • Consider local access and treatment targets for access and treatment in addition to national targets such as waiting time to access treatment before 6 weeks. 	The outcome of the engagement is introduction of new IAPT waiting targets of 95% access treatment within 12 weeks and outcome payment linked to access for people.	Service specification will be available after completion of the procurement in October 2016. Information is available from Lola.Triumph@Wandsworthccg.nhs.uk	Roll out activities within the year and continue to engage service users to gain feedback on their experience of services.	
Engagement of the Wandsworth Black and Minority Ethnic Group on the procurement of IAPT and digital mental health service on 3 December 2016	<ul style="list-style-type: none"> • Are there any groups that you believe should be prioritised for IAPT services? • Where would you like to see IAPT services located? • How can we make it easier to use the IAPT service? • Are there any other things we need to do to improve the service 	The new provider will be expected to provide therapies in other languages, especially the top two to five non English languages spoken by people accessing the IAPT service.	Service specification will be available after completion of the procurement in October 2016.		

PPI activities in service areas and evidence of their impact for 2016-17

	<ul style="list-style-type: none"> • Language is a concern as many people don't know what IAPT means and when translated, IAPT may mean different things to different people. • There needs to be more incentives such as training a wider range of people to become IAPT therapists and to increase employment opportunities from within the community. The recruitment process needs to reflect the community which is being served. 				
<p>Improving Access to Psychological Therapies (IAPT).</p> <p>Engagement of carers at the Wandsworth Carers Centre on the procurement of IAPT and digital mental health service on 30 November 2016</p>	<ul style="list-style-type: none"> • How accessible is it to people whose first language isn't English, with a hearing impairment or a learning disability? • Marketing and promotion is important 	<p>The provider will be required to develop a communication and marketing strategy. In addition, an annual community engagement and action plan will be required as part of the contract.</p> <p>As a result IAPT service will be rebranded as the Wandsworth Talking Therapy Service.</p>	<p>Service specification will be available after completion of the procurement.</p>		

Activity in various service areas for 2017-18 and action plans for 2017-18

PPI activities in service areas and evidence of their impact for 2016-17

Engagement structure that supports the Individual and Participation Duties at Wandsworth CCG.				Action Plans for 2017-18	
Service Area: Personal Health Budget programmes					
Objective: Implementation of Wandsworth Personal Health Budget Programme on 14 January 2016					
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
<p>Feedback forms handed out at Road Shows and WHIZ Events:</p> <ul style="list-style-type: none"> • Do you agree that people should be given personal health budgets to give them more control over their own healthcare? • Which groups do you think we should offer personal health budgets? • Do you agree that the CCG should use health funding in this way? 	<ul style="list-style-type: none"> • The top three groups that were prioritised by the public for personal health budgets are: older people, children with significant health needs and adult with learning disabilities, autism, and mental health with behaviour that challenges. Some participants recommended vulnerable people and carers when asked to suggest other groups. • Significant number of participants did not agree (nationally acceptable) that the CCG should use personal health budget for non-health related expenditure such as holidays, church attendance and washing machines. • Significant number of people felt that older people, children with significant complex health needs, adult with learning disabilities and people with long term conditions could use their PHB for such items. 	<p>In 2016, the Wandsworth CCG personal health budget programme will prioritise adults with learning disabilities. There is an ongoing engagement programme in 2016/17 to consult on the other areas of priority.</p>	<p>The Wandsworth CCG Personal Health Budget Policy is available at http://www.wandsworthccg.nhs.uk/aboutus/OurBoard/Wandsworth%20Board%20Papers/10-02-2016/Attach%2005%20-%20PHB%20Policy%20-%2005%20%2016%20V8%20(revised%20080216).pdf</p>	<p>Wandsworth CCG personal health budget website page will be developed and updated regularly to keep stakeholders informed.</p>	
<p>Personal health budget – future engagement</p>				<p>Future engagement of carers of people with learning disabilities on the implementation of PHB on 2 March 2016.</p>	<p>The purpose of the engagement is to use feedback from carers to shape the PHB 'Local Offer' for people with learning disabilities.</p>

PPI activities in service areas and evidence of their impact for 2016-17

Collective Duties - Engagement and Participation Activities in various services of Wandsworth CCG.				Action Plans for 2017-18	
Service Area: Embedding Patient and Public Involvement and Engagement Team Objective: Embedding PPI and Engagement across Wandsworth CCG's corporate functions and the culture of the organisation.					
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
Support the development of the ² Patient and Public Involvement Reference Group	11 Clinical reference groups have patient representatives or critical friends groups to provide input on the patient voice into the work of the CRG.	<p>Patient representative and critical friends' groups work closely with the Commissioning Managers and Clinical Leads to ensure that ongoing work including reports to the board and management team have the patient voice embedded in them.</p> <p>Members were able to comment on strategic issues including the Southwest London Issues Paper, Transforming Primary Care, Commissioning Intentions and Operating Plans. The group was also able to comment on specific Clinical Reference Groups such as the Diabetes CRG, End of Life Care CRG and the Respiratory CRG.</p>	<p>The annual PPI action plan of each Clinical Reference Group are discussed with clinical leads, monitored and submitted to the PPI Reference Group.</p> <p>Reports are discussed and minutes of the bi monthly meetings are available from the PPI Team.</p>	<p>Group reviewing their Terms of Reference to inform priorities and actions for 2017-18.</p> <p>Support PPI activities aligned with the priorities of the CCG operating plans within the changes in Southwest London partnership, the transformation programmes in</p>	

² PPI Reference Group are represented by patient representatives from Wandsworth CCG's Stakeholder partners including Healthwatch, Wandsworth Carer's Alliance, Public Health, Local Authority Adult and Social Care and Patient Representatives from Localities Patient Forum and Clinical Reference Groups. They act as critical friends and as sounding group for the Commissioners and Service Managers about patient and local people's expertise and perspective into service changes and improvements.

PPI activities in service areas and evidence of their impact for 2016-17

				General Practices and the development of integrated care pathways.	
³ Thinking Partners Group	A network of voluntary and community groups meet every two months to promote equality and diversity and support the development of innovative projects to address health inequalities.	Provides a network of voluntary and community groups to act as a sounding board for the CCG in the co-production, service improvements and commissioning of services. This group has increasingly matured within the CCG in ensuring that services are addressing the local people's needs.	Minutes of Thinking Partners Group meetings are available from the PPI Team through chan.maher@wandsworthccg.nhs.uk	Ongoing	
Men's Health Forum	Work under development to engage men better in prevention and early intervention programmes.	Health promotion activities undertaken on mental health, prostate cancer screening and the Self-Management Programmes	Reports on the work of this group are available from chan.maher@wandsworthccg.nhs.uk		
Seldom Heard Grant Scheme Projects and Health Inequalities Project	The Seldom Heard Grant Scheme is now in its fourth year. The small grants are provided to seldom heard groups and communities to support their engagement with the CCG and local health services. The seldom heard grants for 2016-17 were focused on supporting innovative	12 seldom heard groups were successful in their applications and are providing activities ranging from tailored physical exercise for the frail and elderly, healthy eating classes, health and wellbeing groups in community centres, gardening group to support the people who have had stroke, befriending groups to address isolation,	Reports available from the PPI Team through chan.maher@wandsworthccg.nhs.uk	Develop the role of the Community Development Coordinator, to support the health inequalities projects further	

³ Thinking Partners Groups are non CCG staff who have expertise with equalities and diversity and are representative of voluntary and community organisations and are willing to work with the CCG to develop and promote equality and diversity within the work of the CCG. They also provide a network of critical friends for the CCG to engage with seldom heard groups and communities to improve access and co-design and tailor community services.

PPI activities in service areas and evidence of their impact for 2016-17

	activities that are aimed at reducing health inequalities.	communication training with health professionals to support people with communication difficulties as a result of stroke and aphasia.		and evaluate their outcomes.	
Learning Lunches		The learning Lunches are held an hour before the Thinking Partners Group meetings. It has provided a platform for Seldom Heard Communities to showcase their work to CCG staff and commissioners. People commented that the achievements of the seldom heard groups supported by the grant scheme is very good value for money in terms of prevention and early intervention and supports the communities to look after themselves.	Presentations were provided by: <ul style="list-style-type: none"> • Local group, Connect, who are working with people with communication difficulties as a result of stroke and neurological conditions. • Furzedown Project, Benefits of Physical Activities to older people and people experiencing isolation. • Autumn Rose, Wellbeing Activities and Healthy Eating • Safe Ground, Support Group to families with prisoners. • Katherine Low Settlement, Female Genital Mutilation. 		
Youth Health Jury	The Youth Health Jury continues with their monthly meetings. They are currently in a recruitment drive to gain more members. School visits as well as visits to fresher's fairs have been organised. A survey has been sent out to all current	Contact details of 72 new young people who have shown an interest in joining the Youth Health Jury have been collected. Also we have had responses to the survey that was sent out where we will be able to base future planning for the group on.	Evidence is found on sign-up sheets as well as survey responses via surveymonkey.	Continue to recruit new members. Work with commissioners as well as	Larger group with more committed members so that their views and

PPI activities in service areas and evidence of their impact for 2016-17

	<p>members of the Youth Health Jury to encourage them to give us their views on the current format of meetings. This will also allow us to construct future meetings that meet their needs.</p> <p>“ The Youth Health Jury is a group run by young people aged 16 to 24 who are working together to influence and change the way youth services are provided and run within Wandsworth. It is an opportunity for young people to play a part in improving health services in the borough as well as to meet new people and improve essential skills outside of school.</p> <p>The Youth Health Jury have also taken part in WHIZ events at the local shopping centre. They also participated in this year’s EDAY, getting involved in the group activities and represented the challenges and opinions of young people. In addition, on this day the Youth Health Jury played a role in the photography and videography of the event, gaining consent forms and learning how to operate equipment</p>	<p>The Youth Health Jury have been working towards new recruitment strategies following a large number of young people showing their interest. The monthly sessions continue to be promoted via the CCG stakeholder newsletter and the Wandsworth CCG website, and have been successful using mail chimp invites.</p>		<p>external contacts. Arrange presentations for meetings that interest the group.</p>	<p>opinions can come alive and be incorporated in the services commissioned for young people.</p>
EDAY	<p>The event was held in November 2016 and was attended by around 60 people these included</p>	<p>Senior Leaders of the CCG including the Chief Officer and the Chief Finance Officer provided the presentations and</p>	<p>Further details on EDAY are available from the PPI Team through</p>	<p>EDAY organised for 2017-18</p>	

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	<p>stakeholders and CCG staff who were given the opportunity to discuss and comment on how the CCG is developing and meeting its Equality and Diversity Objectives. Feedback and suggestions were obtained on the day about the Equality and Diversity Goals and the areas for the CCG to improve.</p>	<p>demonstrated leadership on Equality and Diversity.</p> <p>The Public Sector Equality and Diversity Duty detailing the CCG's objectives were published on the CCG website in December 2016.</p>	<p>chan.maher@wandsworthccg.nhs.uk</p>		
<p>Wandsworth Health Information Zones (WHIZ) Road shows</p>	<p>We use the WHIZ events to promote major service improvement programmes including the development of the Integrated Community Care Pathway for Older People and obtain people's feedback on their views about the model.</p> <p>A feedback form to obtain views about the Personal Health Budget was also distributed at the WHIZ events.</p>	<p>300 flyers and feedback forms were distributed at the events held at the Southside Shopping Centre, Wandsworth.</p>		<p>Ongoing WHIZ held at Community Centres in deprived areas of the borough.</p>	
<p>Customer Relationship Management System</p>	<p>This provides an opportunity for wider reach to the local population in terms of engaging them with the local health services, providing information, obtaining feedback and used as a channel for providing updates about service improvement programmes and changes in the local health service.</p>	<p>We also have generated 274 new sign ups during the last six months of 2016, totalling our contacts database to just under 5,000. These contacts will receive our electronic newsletter, flyers or any relevant information on services and changes happening within Wandsworth local health services.</p>	<p>Information about our Customer Relationship Management database is available from chan.maher@wandsworthccg.nhs.uk</p>	<p>Ongoing</p>	

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Collective Duties- Engagement and Participation Activities in various services of Wandsworth CCG.				Action Plans for 2017-18	
Service Area: Diabetes					
Objective: Stakeholder engagement with the Diabetes Clinical Reference Group					
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
<p>Regular attendance at CRG meetings by Wandsworth Diabetes Patients Group participate in discussions and give their perspectives on issues discussed.</p> <p>We worked with the Wandsworth Diabetes Patients Group to develop guidelines for standardising use of glucose meters for patients to self-test blood glucose.</p>	<p>Patients felt strongly that they should have a choice of all meters and strips available in the market. The prescribing advisor explained that the cost of test stripes were very high as these were not standardised for use in all meters. A process to evaluate meters was established and Wandsworth Diabetes Patients Group members were asked to evaluate a range of meters to assess</p>	<p>From the results of this exercise guidelines were developed to ensure standardised use of meters across the health economy. These are now used in all general practices and by diabetes specialist nurses in the acute and community services.</p>		<p>Ongoing for 2017-18</p>	<p>Roll out of redesigned diabetes service that is fully informed by service users will be accessibly available.</p>

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	for ease of use and quality of display of test results.				
<p>Diabetes Re-design - Project key stakeholder engagement event held on 13th August 2016.</p> <p>The programme manager for diabetes attended Wandsworth Diabetes Patients Group meetings between May to August 2016 to discuss the project aims and the purpose of the stakeholder engagement event planned.</p>	<p>Patients Group members were invited to the stakeholder engagement workshop and asked to contribute their views and ideas on improving diabetes services and participate in discussions on developing a new model of diabetes care.</p>	<p>The ideas and views gathered at the stakeholder event and a paper submitted by the Wandsworth Diabetes Patient Group to the Diabetes CRG will be used to develop service specifications for the new diabetes pathway and model of care. The paper is available from leena.sevak@wandsworthccg.nhs.uk</p>	<p>The first draft of the specifications is written and further consultation is sought from members of the Diabetes CRG, including the patient representatives. This work is in progress and the final version is to be completed by end of March 2016.</p> <p>Specifications are available from Leena Sevak on leena.sevak@wandsworthccg.nhs.uk</p>	<p>In Progress for 2017-18</p>	
<p>Wandsworth Diabetes Champion Project. A poster campaign launched to recruit diabetes champions from the community to help provide information about the project and signposting people to relevant services in the community.</p>	<p>Those who applied to become champions were given further information about the project, asked to complete a DBS check and invited to a volunteer training programme over two days. Information about causes of diabetes,</p>	<p>Currently there are seven active Wandsworth Diabetes Champions who between them have been involved in the following activities since July 2016:</p> <ul style="list-style-type: none"> • Diabetes Stall, Southside Centre in July 2016 with over 300 people visited stall in 2 days. • Battersea Locality Road Show (July 2016 – over 30 people visited the stall. 	<p>The main impact of a Diabetes Champion is to raise awareness of the risk factors for diabetes, prevention of diabetes and distribution of</p>	<p>Ongoing and in progress</p>	<p>Accessible and diabetes services and increased health literacy for people</p>

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<p>Community members who visited the stall were asked to complete an application form to gauge their interest in becoming diabetes champions.</p>	<p>risk factors and services available for patients was provided. The training was provided by Diabetes UK, Public Health and locality manager.</p>	<ul style="list-style-type: none"> • Diabetes Refresh Workshop – August 2016 – over 50 people visited the stall. • Roehampton Festival – August 2016 – approximately 200 people visited the stall. • Wandle Locality Road Show – September 2016 – about 30-40 people visited the stall. • Stall at Tooting Market for champions launch – September 2016 – approximately 100 visited the stall. • St Andrew’s Church – September 2016 – about 30 people visited the stall. 	<p>literatures on management of diabetes as well as giving information about local services.</p>		<p>with diabetes.</p>
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<p>Collective Duties- Engagement and Participation Activities in various services of Wandsworth CCG.</p>				<p>Action Plans for 2017-18</p>	
<p>Service Area: Children Adolescent Mental Health Services Objective: Transformation of Child Adolescent Mental Health Services (CAMHS)</p>					
<p>Engagement Activity</p>	<p>Summary of Feedback</p>	<p>Impact</p>	<p>Evidence</p>	<p>Activities</p>	<p>Desired Outcomes</p>
<p>September 2014 - Conference at Wandsworth town hall involved decision makers and representation from local schools across Wandsworth. The conference had several sessions on mental health where children were asked for their views on mental health services and how mental health services should be designed in the future.</p>	<p>Views of young people were that services should be based in a variety of settings in the community.</p>	<p>The outcomes of the conference were that views of children and young people were fed back into the CAMHS Commissioner and Commissioning Partnership which resulted in the CAMHS Transformation Plan.</p>	<p>Participation report attached as an appendix to the CAMHS Transformation Plan. This is available with john.beckles@wandsworthccg.nhs.uk</p>	<p>Delivery of Participation Plans for 2017-18</p>	<p>Increased engagement of parents in the delivery of CAMHS.</p>

PPI activities in service areas and evidence of their impact for 2016-17

<p>Redesign of Children's Therapy Services. Regular attendance at project group by parents, CCG staff attending parents' evenings, CCG staff providing briefings at governor meetings, parent surveys and workshops.</p>	<p>Parents felt that young people were let down as service was patchy. Constant staff absences were reported and the service did not meet parent expectations.</p>	<p>The work with parents has influenced the work and has created new ways of designing solutions</p>	<p>Service re-design plan available with john.beckles@wandsworthccg.nhs.uk</p>	<p>Ongoing Feedback from parents about children therapy services 2017-18</p>	
<p>CAMHS participation worker was appointed in January 2016.</p>	<p>The work of the participation worker was to ascertain the views of children and young people on mental health services and how they should be commissioned in the future.</p>	<p>Participation lead has produced a report on the views of children and young people and how they feel that CAMHS should be commissioned.</p>	<p>Participation report attached as an appendix to the CAMHS transformation plan available through john.beckles@wandsworthccg.nhs.uk</p>		
<p>Personal Health Budgets. Parents meetings been held to determine the process for administering PHB.</p>	<p>Parents were asked their views on how PHB should be developed.</p>	<p>Parents were positive about PHB, keen to engage and happy with the support given by staff.</p>	<p>Parent groups have taken place and others have been planned with the interim nurse assessor.</p>		

PPI activities in service areas and evidence of their impact for 2016-17

Collective Duties- Engagement and Participation Activities in various services of Wandsworth CCG.				Action Plans for 2017-18	
Service Area: Respiratory Clinical Reference Group (CRG)				Action Plans for 2017-18	
Objective: Review and Plan PPI Activities within the CRG				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
PPI is a standing agenda item for CRG meetings which occur every 8 weeks.	Work is currently business as usual however, so there are limited opportunities for PPI except on patient feedback of current services. PPI will be planned for any transformational new service.	PPI has become a mainstream part of CRG activities and this will contribute to updating service specifications and service improvements.	Agenda and minutes are available from Kwan.ku@wandsworthccg.nhs.uk	Ongoing for 2017-18	
Provider updates services. This includes activity and patient satisfaction surveys. Questions asked are: Are services accessible? Is there sufficient capacity? What is the patient experience and how can this be improved? Are there new regulations/guidance that need to be incorporated in the service?	<p>Provider updates is a standing agenda CRG agenda item – involving pulmonary rehab team, respiratory nurses, smoking cessation team.</p> <p>Patients are generally satisfied with the service and could benefit from services.</p>	This will feed into ongoing work on updating service specifications and developing a tier 3 services.	Agenda and minutes are available from Kwan.ku@wandsworthccg.nhs.uk		

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<p>A Lung Function Questionnaire (LFQ) project engaging with smoking patients and the training of Smoking Cessation Advisors (CSA) in (Battersea) involving Public Health, GP practices. People are asked to complete self-assessment of their COPD risk.</p> <p>A web page has been initiated at: LFQ: http://www.wandsworthccg.nhs.uk/newsAndPublications/News/Pages/Determine-your-risk-of-COPD-and-take-the-LFQ.aspx. There have been tweets on CCG twitter page on this project.</p>	<p>LFQ audit was launched on 22/12/15 with Battersea practices. It involves engagement with people on smoking cessation clinics.</p> <p>This is a patient-choice questionnaire for patients to assess their own risk of having COPD then self-referring for testing.</p>	<p>Practices have returned baseline data to enable comparison when the project ends. This will indicate uptake and the effectiveness of the LFQ.</p> <p>The project is active and CSAs and will have impact of raising awareness of COPD as many patients do not believe that their symptoms are significant; encouraging people to stop smoking; and increase in the number of COPD register. Results will inform Public Health and the CCG if this pilot should be extended to other practices and the wider health economy.</p>	<p>Project will end on 15/6/17 and a report will be produced. Project documents and baseline audits are available from Kwan.ku@wandsworthccg.nhs.uk</p>	<p>Follow up activities for 2017-18</p>	
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PPI activities in service areas and evidence of their impact for 2016-17

Collective Duties- Engagement and Participation Activities in various services of Wandsworth CCG.				Action Plans for 2017-18	
Service Area: Cardiovascular Disease (CVD) Clinical Reference Group (CRG)					
Objective: Review and planning of current PPI activities within the CVD CRG.					
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
<p>This is a standing agenda item for CRG meetings which occur every 8 weeks.</p> <p>What opportunities are there to involve PPI in our activities?</p>	<p>This CRG has only recently reconvened and is not currently at fully capacity. At present work is business as usual and there are limited opportunities for PPI. The group is planning some events but is restricted by funding and resources.</p>	<p>PPI will contribute to updating service specifications and service improvements. The CRG are looking at developing a critical friends group but there is currently no funding for this. Review of the current anticoagulation service is underway and there may be an opportunity for PPI.</p>	<p>Agenda and minutes are available from Kwan.ku@wandsworthccg.nhs.uk</p>	<p>Development of Critical Friends Groups in 2017-18 to ensure PPI is embedded within the work on CVD.</p>	<p>Critical Friends Group meeting regularly with defined terms of reference.</p>
<p>Provider update on current services including patient satisfaction surveys and demographic information on services users (e.g. breakdown of minority ethnic groups).</p>	<p>Service User opinions expressed in the patient surveys aimed to understand patients experience and how this can be improved. Ongoing feedback contributes to improving services, widening access and updating of service specification, e.g. the CRG are looking at increasing exercise and rehabilitation services available as this was identified as an area of need by carers.</p>	<p>This will feed into ongoing work updating service specifications and developing services.</p>	<p>Agenda and minutes are available from Kwan.ku@wandsworthccg.nhs.uk</p>		

PPI activities in service areas and evidence of their impact for 2016-17

Collective Duties- Engagement and Participation Activities in various services of Wandsworth CCG.				Action Plans for 2017-18	
Service Area: Stroke Objective: Ensure that patients and service users and carers are key to the Stroke Clinical Reference Group's Operations.					
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
Regular attendance and involvement of patient representatives and carers at the Clinical Reference Group (CRG) meetings.	The patient representatives provide regular input and recommendations on the patient perspectives at CRG meetings and operations.	<p>This provides input into the development/updating of service specifications, evaluations and future planning. For example, the on-going recommendation from a particular patient representative ensures that neurological conditions issues are always part of discussions.</p> <p>The services are currently ongoing, but recommendations have been made for service improvements and increasing access to exercise therapy. However, there is currently limited budget for the services.</p>	Existing service specifications have not been updated and are available from Kwan.ku@wandsworthccg.nhs.uk	Follow up activities for 2017-18 to be developed.	
A visit was made and there was an event at Thrive which is a service that provides horticultural therapy for stroke rehabilitation.	A CRG representative met with and interviewed service users and potential service users to understand the impact that the service has had on attendees at the Thrive open day held on 15/12/15.	<p>This was the end of the first programme and demonstrated the impact that the programme had on the physical and social wellbeing of patients. For two patients there was a marked improvement in their mobility and confidence.</p> <p>A recommendation to continue with the service, to publicise it more and to assess how we can support the patient after the</p>	A video has been produced and an article appeared in the SW Londoner you can view http://www.swlondoner.co.uk/battersea-park-gardening-programme-helps-stroke-victims-blossom-during-recovery/		

PPI activities in service areas and evidence of their impact for 2016-17

		programme ends.		
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Collective Duties- Engagement and Participation Activities in various services of Wandsworth CCG.				Action Plans for 2017-18	
Service Area: 111, Urgent care, and Out of Hours Objective: integrated procurement, Specification design, tender process design and evaluation				Activities	Desired Outcomes
Engagement Activity	Summary of Feedback	Impact	Evidence		
Procurement of integrated Urgent Care Service	2 patient representatives were involved in developing the IUC specification and full procurement process involving specification design, tender questions design, scoring and appointment of IUC provider.	Question asked in tender documentation	Question: Bidder to describe the systems and processes to gather patient feedback. This must include reference to the following: i. Systems and processes proposed to evaluate and report patient feedback; ii. How use of patient feedback drives improvements in patient experience and iii. Illustrate by the use of a flow diagram, the process for gathering patient feedback, complaints and patient satisfaction.		
SWL Integrated Urgent Care Patient Participation Group	The purpose of the Integrated Urgent Care (IUC) Patient Partnership Group (PPG) is to enable South West London patients to effectively input in the provision,	Patients have been recruited across SWL. In Wandsworth we have used the CRM tool and Locality Patient Participation Groups for recruitment. 4 members attend from Wandsworth. First meeting held in January 2016.	Terms of reference.  SWL IUC Patient Participation Group	The SWL IUC PPG will be meeting quarterly through the term of the	To feed into commissioning intentions and service developm

PPI activities in service areas and evidence of their impact for 2016-17

	monitoring and commissioning of local IUC services, in line with the commissioning cycle			contract.	ents
SWL Integrated Urgent Care Clinical Quality Review Group	Patient representation on clinical quality review group.	Provider reports on feedback on patient experience which are gathered in a number of ways: on-line surveys; postal questionnaires, telephone surveys, questionnaires at treatment centres, complements received and complaints received.	Embedded within SWL IUC Quality Reports.  Enc 4 - SWL IUC - Quality Report - Dec	This will be reported on a quarterly basis.	
Vocare (IUC provider) attending locality patient groups	Please cross reference with localities team as mentioned in their feedback.				
NHS 111 and Out of Hours Integrated procurement – Specification design, tender process design and evaluation	Patient representative's attendance of programme board meetings, workshops and moderation meetings. Patient and Public input into section of tender documentation.	Ongoing feedback on tender process once tender documentation and specification had been agreed. Patient representatives have participated from the beginning in developing the service specification, evaluation criteria, tendering and interviewing processes.	Specification available: Jatinder Bhuhi, Commissioning Manager. Jatinder.bhuhi@wandsworthccg.nhs.uk		
'Stay Well this Winter' Leaflets providing information on alternatives to patients using A&E.	Thinking partners and community groups were asked to review leaflets in the languages being produced.	Feedback was given in the style of language used. 12,000 leaflets produced in a number of languages: Somali, Arabic, Romanian, Polish, French, Lithuanian, Tamil, Bulgarian, Spanish, Urdu, Portuguese, Bulgarian	The majority of leaflets have been sent to SGH for A&E staff to give out. Will await feedback.	Distribution of leaflets 2016 and to monitor impact of	

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	SGH A& E was asked demographic breakdown of patients.	and English. These are based on users coming to St. George's Hospital. Better awareness of using the 111 service, walk-in centres, pharmacy etc. instead of using A&E as first option.		leaflets after.	
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Collective Duties- Engagement and Participation Activities in various services of Wandsworth CCG.				Action Plans for 2017-18	
Service Area: Cancer Services				Action Plans for 2017-18	
Objective: Listening to Cancer patients share their experience of treatment and care at the St. George's				Action Plans for 2017-18	
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes
<p>Voice – the St Georges Hospital cancer patient and carer user group.</p> <p>Listening event – all cancer patients and carers were invited to a listening event to share their experiences of cancer treatment and care at St George's.</p>	<p>Participants were asked to consider the three topics during facilitated table discussions. They were outpatient services; care between hospital and home; emotional support services. Health professionals from the relevant services were invited to facilitate the discussions.</p> <p>The participants found sharing experiences with other patients really valuable. Equally important, was being heard by health professionals on a more</p>	<p>Two GPs and the Commissioning Redesign Manager attended the event and reported that the feedback from the participants has informed their practice.</p> <p>An example of an action resulting from the listening event was to trial buzzers in a clinic to give patients more freedom to leave the clinic during their wait for their</p>	<p>Report available from: Jatinder Bhui, Commissioning Manager on: Jatinder.bhui@wandsworthccg.nhs.uk</p>	<p>The National Cancer Patient Survey report is scheduled to be available January/February 2016 and the results will inform an action plan for the Trust.</p>	

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	equal footing, outside of a clinical environment. This can't be captured by patient experience surveys, which were the participants' least favourite method of collecting patient experiences.	appointment.			
Health and Wellbeing Educational Events at Royal Marsden where patients invited.	Attendance of health and well-being events – sharing of information related to physical and physo-social needs. Feedback on events organised. Further information available from Natalie Doyle, Royal Marsden.	Increased awareness and confidence of self-care and availability of support services	Events	Number of attendees	Centre commissioned by CCG to conduct in-depth evaluation of support groups with our current members, former members and other clients from BME
			Two prostate events	<ul style="list-style-type: none"> 76 attendees (38 patients, 38 carers) Also 67 attendees to Prehab Seminars 	
			GynaeOnc: One Event	<ul style="list-style-type: none"> 66 attendees (52 patients, 14 carers) 	
			Breast: Four Events	1270 patients invited <ul style="list-style-type: none"> 179 patients, 75 carers attended 	
			COLLABORATIVE (RM, RBH, C&W) EVENTS 2016:		

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			Lung: Three Events	717 patients invited 87 attendees (54 patients, 33 carers)	communities	
			TOTAL PATIENTS ATTENDED: 323 INCLUDING PREHAB: 390 TOTAL CARERS ATTENDED: 160			

Collective Duties- Engagement and Participation Activities in various services of Wandsworth CCG.					Action Plans for 2017-18	
Service Area: End of Life Care CRG						
Objective: PPI, Carer and Seldom Heard Groups Representation at End of Life Care Services						
Engagement Activity	Summary of Feedback	Impact	Evidence	Activities	Desired Outcomes	
PPI representative attends our 6 weekly CRG meetings to ensure participation and involvement in decisions made by the CRG.	Both the CRG members and the PPI representative have commented on the benefit and wisdom of public/patient involvement in this difficult area.	Ensures a non-clinical, patient/family perspective in decision-making.	Minutes of meetings available from sue.tappenden@wandsworthccg.nhs.uk	Ongoing for 2017-18		
Wandsworth Carers Centre worker attends our		Ensures a non-clinical, patient/family perspective in		Ongoing 2017-18		

PPI activities in service areas and evidence of their impact for 2016-17

<p>6 weekly CRG meetings to ensure participation and involvement in decisions made by the CRG. They are working to identify a carer to attend too.</p>		<p>decision-making.</p>			
<p>Public awareness of a new service. Public launch of the Wandsworth End of Life Care Coordination Centre to coincide with Dying Matters week.</p>	<p>Information about the new Centre and its context within the wider EOLC system was provided. Attendees then engaged in informal discussions and networking about EOLC services in Wandsworth.</p>	<p>Raised awareness of the Centre and what it does. Also opportunity to raise awareness of other providers e.g. Marie Curie and Trinity Hospice.</p>	<p>50 members of the public attended (attendee list held by Royal Trinity Hospice). Coverage on Channel 4 news. More information can be obtained from sue.tappenden@wandsworthccg.nhs.uk</p>		
<p>Working with Seldom Heard Groups. Informal presentation by the Wandsworth LGBT group to the EOLC CRG</p>	<p>Aim was to discuss how the CRG can work more effectively to better support LGBT patients who are approaching the end of their life.</p>	<p>Identified need for staff working in EOLC to be aware of the needs and interests of the LGBT community and to enable people to talk about their sexuality – if they wish to, without judgement. EOLC should be individualised and based on expressed wishes. Importance of carer gender and that people in their 60s/70s may never have been able to be free about their sexuality.</p>	<p>Raised awareness to the CRG members. Formed relationships for further work between providers and the LGBT group around staff education. This will be ongoing. Plans for easily accessible training and education methodology. Sue Tappenden is discussing this with David Robson.</p>		
<p>Working with Seldom Heard Groups</p>	<p>Important to use existing community networks for maximum and sustained impact. EOLC advocates</p>	<p>Raised awareness amongst CRG members. Ongoing consideration of next steps.</p>	<p>Ongoing discussions for next steps in 2017-18.</p>		

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<p>CRG members met with Wandsworth Community Empowerment Network and attended their Community Engagement event.</p> <p>To discuss how the work of the CRG and providers might be taken out to the wider community.</p>	<p>should be identified and trained up within communities to take messages out to groups, leaving skills within the community and taking account of cultural traditions and expectations.</p>				
<p>Working with Seldom Heard Groups</p> <p>Informal presentation by the Community Learning Disability Team.</p>	<p>To understand more about their services and needs of their client group and their carers/families. Importance of care providers being aware of the LD Team and vice versa to ensure maximum support for people with LD and their carers/families.</p>	<p>New links between team members for the benefit of patients have been created. Awareness of resources available to support people with a LD</p>	<p>CRG minutes available from sue.tappenden@wandsworthccg.nhs.uk</p>		
<p>Working with Seldom Heard Groups.</p> <p>CRG members (plus senior team members from Royal Trinity Hospice) visited HMP Wandsworth to meet members of the Offender Healthcare team.</p> <p>To understand more about services available to prisoners and the</p>	<p>High turnover of prisoners and so EOLC is rare. Royal Trinity Hospice team provide support as needed. Nurses and GPs would benefit from some EOLC/palliative care education.</p>	<p>Plans to attend both Medical and Nursing team meetings to provide EOLC/palliative care education.</p>	<p>Information available from sue.tappenden@wandsworthccg.nhs.uk</p>		

PPI activities in service areas and evidence of their impact for 2016-17

<p>integration of palliative care provision when needed.</p>					
<p>Working with Seldom Heard Groups. CCG Commissioning Leads attended both Thinking Partners Group and PPI CRG meetings.</p>	<p>To understand how best to engage with the communities they represent to identify/educate key community leaders/advocates to develop a sustainable network of education and support around EOLC.</p>		<p>Minutes of meetings on the PPI Reference Group and Thinking Partners Group available from chan.maher@wandsworthccg.nhs.uk</p>		