

**Patient and Public Involvement – Quarterly Report: Quarter 4: January to March December 2018**

SERVICE	PARTICIPANTS	METHODS USED	RECRUITMENT	ROLE	IMPACT
<p><b>Engagement on the One Croydon I statements</b></p> <p>(to ensure that the current I statements are applicable to a whole population approach)</p>	<p>Various population groups have been involved in the work.</p> <p>However, the focus is on:</p> <ul style="list-style-type: none"> <li>- Mental health service users</li> <li>- Children and young people</li> <li>- Parents and carers of young children</li> </ul>	<p>Focus Groups</p> <p>Participatory Rapid Appraisal</p> <p>Please see <b>appendix 1</b> for the engagement approach document</p>	<p>Local Authority commissioners</p> <p>Public Health Commissioners</p> <p>Community and Voluntary sector organisations and forums</p> <p>Healthwatch Croydon</p>	<p>The work of One Croydon Alliance is currently guided by five I statements which were developed after engagement with older people.</p> <p>The purpose of this work is to test and agree a series of I statements that reflect the health and social care ambitions of Croydon residents.</p>	<p>This work is currently on-going and focuses on ensuring the current I statements are relevant for a whole population approach.</p> <p>Once the I statements are agreed it is intended that a series of outcomes are developed to support the statements.</p> <p>Please see <b>appendix 2</b> for May 2018 update.</p>
<p><b>Health Help Now / IAPT promotion – Whitgift Shopping Centre</b></p> <p>(digital roadshow to promote Health Help Now and the Croydon IAPT service)</p>	<p>Opportunistic outreach over 3 days in the Whitgift shopping centre</p>	<p>1 minute promotional film of Health Help Now shown on a loop within the shopping centre</p> <p>Outreach within the Whitgift Shopping Centre 12<sup>th</sup> -14<sup>th</sup> March 2018</p>	<p>Through DFP-TV (independent company)</p>	<p>The 3-day promotional event was designed to promote Health Help Now and IAPT services are part of the CCGs on-going support for self-care and long term condition management.</p>	<p>Metrics which tracked the number of Help Health Now downloads and social media engagements did not show any spikes during the 3 day period or in the following two week period.</p> <p>This approach was not as effective as we had hoped and it is not recommended that this approach is repeated.</p>

<p><b>Patient and Public Forum run jointly with Healthwatch Croydon</b></p> <p>(PPE event to focus on 5 planned care services to discuss service transformation with Croydon residents)</p>	<p>Over 40 members of the public and Healthwatch Croydon volunteers</p>	<p>Evening discussion group workshop with representatives from the CCG, One Croydon and Healthwatch Croydon</p>	<p>CCG Health Network database</p> <p>PPG Networks</p> <p>Community and Voluntary sector organisations and forums</p> <p>Patient forums and patient reps</p> <p>Healthwatch Croydon</p>	<p>To discuss the following service transformations:</p> <ul style="list-style-type: none"> <li>• ENT</li> <li>• Anti-coagulation services</li> <li>• Dermatology</li> <li>• Diabetes</li> <li>• Muscular-Skeletal and Trauma and Orthopaedic services</li> </ul> <p>and input into the development of new models of care for these services. And to encourage people to join working groups to support the reprocurement of these services.</p>	<p>As a result of the meeting the following actions have been undertaken:</p> <ul style="list-style-type: none"> <li>- There has been an increase in the number of diabetes patient representatives involved in the steering group which will redesign the new models of care</li> <li>- Further engagement will take place around the anti-coagulation reprocurement to ensure that patient representatives are able to influence the service specification and support the development of key performance indicators</li> <li>- Patient leads from the Dermatology working group have re-grouped to review and refine the amended service model</li> </ul>
<p><b>Procurement training for patient representatives</b></p>	<p>18 participants</p> <p>2 x Asian British 1 x Black British 15 x White British</p> <p>8 x Male</p>	<p>Training session with senior commissioner and procurement expert from SBS</p>	<p>Patient forums and patient reps</p> <p>Healthwatch Croydon</p>	<p>To support the CCG and partners with future procurements by training to become active members of</p>	<p>Several attendees have indicated that they would like to take part in further more in-depth procurement training and become part of a pool of local patient representatives who will take part in future</p>

	<p>10 x Female The majority of the attendees were over 60.</p> <p>A session at Croydon College is planned in May to recruit a younger cohort to help support the CCGs procurement work in the future.</p>			the procurement process.	procurement activities as panel members.
<p><b>Diabetes Event</b>  (Open space workshop to re-set the diabetes model of care pathway review and development)</p>	<p>Forty seven people attended the event. There was a mix of staff, clinicians, providers and Croydon residents.</p> <p>Seven patient representatives attended the meeting.</p>	Open Space forum for commissioners, providers and patient leads	<p>Local Authority commissioners</p> <p>Public Health Commissioners</p> <p>Community and Voluntary sector organisations and forums</p> <p>Healthwatch Croydon</p>	To work with the CCG, GP's and providers to develop diabetes services that focus on prevention, self-care, increasing the rate of people diagnosed with diabetes and better self-management of diabetes once diagnosed.	<p>As a result of the meeting a diabetes network has been developed to help drive the development of more accessible and preventative services for pre-diabetes and diabetes services in Croydon.</p> <p>The diabetes network includes patient leads and voluntary and community sector groups who will support the CCG in gathering local intelligence on the best initiatives and interventions that will work across Croydon's diverse communities</p>
<p><b>NHSE Consultation on medicines of low value</b></p>	Not applicable	On-line consultation	<p>CCG Health Network database</p> <p>PPG Networks</p>	To comment on the proposals	Information on the consultation and links to patient focused events were distributed to Croydon residents through websites

<p>(National consultation on the proposal to no longer routinely prescribe a number of medicines which are not clinically effective and/or can be purchased over the counter)</p>			<p>Community and Voluntary sector organisations and forums</p> <p>Patient forums and patient reps</p> <p>Healthwatch Croydon</p>		<p>(CCGs and other partners) and social media feeds.</p>
<p><b>Planned Care Transformation – Patient Leads</b></p> <p>(On-going re-design of care pathways and re-procurement)</p> <p>The following planned care service working groups were held in this quarter:</p> <ul style="list-style-type: none"> <li>• Dermatology</li> <li>• Diabetes</li> <li>• Digestive Diseases</li> <li>• Muscular-Skeletal and Trauma and Orthopaedic services</li> </ul>	<p>5 x patient leads for Dermatology.</p> <p>1 x female 4 x male</p> <p>2 x Asian British 3 x White British</p> <p>7 x patient leads for Diabetes.</p> <p>5 x male 2 x female</p> <p>4 x Asian British 1 x African Caribbean 2 x White British</p> <p>3 x patient leads for Digestive Diseases</p> <p>1 x Male 2 x Female</p>	<p>Monthly working groups comprising patient representatives, clinicians, commissioners and providers across active planned care programmes.</p>	<p>CCG Health Network database</p> <p>PPG Networks</p> <p>Community and Voluntary sector organisations and forums</p> <p>Patient forums and patient reps</p> <p>Healthwatch Croydon</p>	<p>To represent patient experience and intelligence to the working groups and apply that learning to the on-going development of new service delivery models.</p> <p>To be an integral part of working groups making recommendations for service transformation to the Local Transformation Board.</p> <p>To oversee progression of the planned care transformation programme, to</p>	<p>Three of the services are being prepared for procurement and the patient leads will sit on the procurement panels.</p>

	<p>3 x White British</p> <p>2 x patient leads for MSK</p> <p>1 x Male 1 x Female</p> <p>2 x White British</p>			<p>ensure patient, carer and public voices have informed and influenced the development of the programme.</p>	
<p><b>Grass Roots programme (South-west London Health and Care partnership)</b></p>	<p>1 x South West London Health and Care Partnership Grass Roots events were held this quarter.</p> <p>Approximately 75 people took part.</p> <p>The event focused on preventing diabetes in BME populations</p>	<p>Health and well-being event in central Croydon</p>	<p>Through Healthwatch Croydon / SWL engagement team</p>	<p>To talk informally with Croydon residents who do not normally engage with the CCG about local healthcare services</p>	<p>As a result of the event several actions were followed up where people had not been made aware of diabetes education programme when newly diagnosed. These issues are now resolved.</p> <p>Participants have been invited to keep in touch through the Diabetes network and a further event is planned for the autumn.</p>

**Planned PPI April – June 2018**

<b>SERVICE AREA</b>	<b>PATIENT AND PUBLIC PARTICIPATION</b>
<b>Service re-procurements</b>	<p>Evaluation training and support will be given to patient leads who will be taking part in procurement panels between May – September. The services concerned are:</p> <ul style="list-style-type: none"> <li>- ENT</li> <li>- MSK</li> <li>- Gynaecology</li> <li>- Anti-coagulation</li> </ul>
<b>Anti-coagulation event</b>	<p>A patient meeting will be held, which follows on from the meeting in September 2017. The meeting will ask patient representatives to help to develop the new service specification and key performance indicators which will lead to service improvements.</p>
<b>Patient and Public forum – Primary Care Future Vision</b>	<p>The quarterly patient and public forum is being planned for June 2018. It is likely that the forum will focus on local Primary Care transformation and how this fits with wider transformation plans with Croydon residents.</p>
<b>Forensic mental health pathway</b>	<p>A patient and provider meeting will be held in early June, which follows on from the engagement with residents at Evergreen in December 2017.</p> <p>The purpose of the meeting will be to:</p> <ul style="list-style-type: none"> <li>• feedback on the forensic re-design work done to date (e.g. Evergreen reprocurement)</li> <li>• have a conversation with services users, carers, providers and staff about service improvement and more flexible ways of working e.g. break-out days and think about how this could work locally within statutory treatment requirements</li> <li>• provide information to participants about local support services e.g. MIND, Carers Support Centre</li> <li>• provide a networking opportunity to participants and local organisations (CVS &amp; statutory) to help people think about future opportunities for housing, jobs etc.</li> </ul>

	<ul style="list-style-type: none"> <li>• raise the profile of carers support services</li> <li>• start a dialogue with carers, service users and staff around how they can work together for better outcomes</li> </ul>
<b>New Addington Healthy Living Hub engagement</b>	<p>The Local Authority are developing plans for a Healthy Living hub in New Addington which will house health, leisure and local authority services and focus on prevention and well-being in one of the most deprived parts of Croydon.</p> <p>The Local Authority lead will commission an organisation to do some pre-engagement in early July. The CCG Engagement team will support this work and use the opportunity to engage around the overall transformation programme as it will be too soon to undertake specific engagement around any potential changes to service locations.</p>
<b>PPG Awareness Week</b>	<p>PPG Awareness week will be the first week of June. The engagement team are supporting the development and dissemination of materials and will be supporting individual PPGs with their plans and events throughout the week across Croydon.</p>
<b>Carers Week</b>	<p>Carers support week takes place in June. The communications and engagement team are supporting through social media initially in the run up to the week. And will also be supporting the Croydon Carers Support Centre with events throughout the week.</p>
<b>Thrive London Mental Health Workshop</b>	<p>The Engagement team will support THRIVE London will run a public workshop focusing on promoting good mental health.</p> <p>The CCG and the Local Authority will have an opportunity to present the work around local Mental Health transformation and outcomes to get engagement around these local ideas/plans.</p>
<b>Continued development of population wide I statements</b>	<p>This work is on-going and will continue throughout the next reporting period.</p>

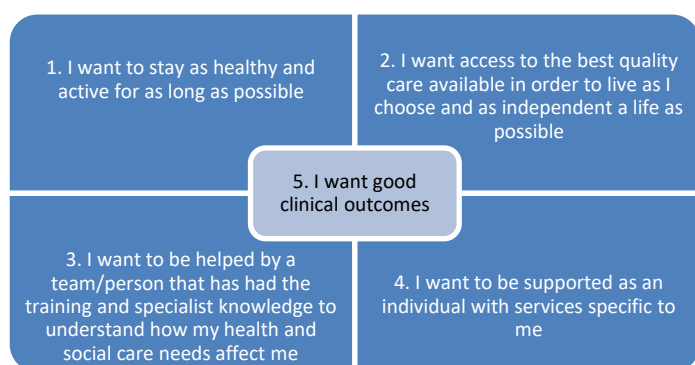
## Appendix One

### Developing whole population I statements to support the Croydon Health and Care Plan: Engagement approach

#### The current I statements

The work of One Croydon Alliance is currently guided by five I statements which were developed as a result of significant engagement with older people, carers, community and voluntary sector groups and other key stakeholders. The I statements show a real commitment to developing the work of the Alliance in order that everything it delivers will focus on those outcomes older people in Croydon said were most important to them.

The reach of One Croydon is now in the process of being extended to the whole population of Croydon, who will benefit from the ambitions of all partners to provide person centred, fully integrated health and care services.



#### Purpose of the engagement

The broadening of the outcomes based commissioning approach requires engagement with different population groups and communities within Croydon to:

- Develop the current I statements so that they resonate with the wider population's aspirations and ambitions for themselves and their families (as individuals) and communities (as a collective)
- Identify where specific populations may require amended or additional I statements to meet their aspirations for their health and well being
- Enable a wider number of Croydon residents to input into developing the overarching I statements (or similar) as part of the Croydon health and care plan development
- Develop a collective vision for Croydon residents, and the people and services who work with them. This vision will be based on their needs and wishes and what health and care outcomes are the most important to them to support them in achieving their ambitions for themselves, their communities and Croydon as a place to be.

The work will be led by the Croydon Communications and Engagement Group which includes communication and engagement professionals from South West London Health and Care Partnership, Croydon CCG, Croydon Health Services, Croydon



Council, One Croydon, South London & the Maudsley, Healthwatch Croydon and Croydon Voluntary Action.

The engagement team will work closely with partners in the public health team to ensure that the work they are doing around developing a local outcomes framework and key indicators to support that framework is mapped against any new I statements that emerge.

### **Aims of the engagement**

- That the engagement undertaken is inclusive and follows best practice
- That the findings, outcomes and any I statements, or similar, developed through the engagement have a genuine and direct impact on any Croydon Health and Care plan outcomes framework adopted
- Effective relationships are built with key interest groups to build trust, understand issues and facilitate feedback
- The engagement activity is a positive experience for those involved, and people feel their contribution is sought, valued and listened to
- The engagement process is inclusive and representative – reaching a cross section of the diverse, vibrant community that lives and works in Croydon
- Key interest groups are involved as early as possible in and throughout the engagement processes
- Regular feedback to the individuals who participated in the engagement process

### **Pre-engagement findings**

Some pre-engagement activity has been undertaken at this initial stage with:

- a group of staff from across Croydon's health and care system and the Children's Health Transformation Steering Group.
- A workshop of staff and stakeholders consisting of the programme boards and steering groups of Croydon CCG's five main programmes of work: Planned Care, Out of Hospital, Together for Health, Children's Services and Mental Health.

This early engagement has shown support for a broader programme of engagement to test the most suitable format for future outcomes for the work of the One Croydon alliance to be measured against.

Comments about the current I statements include:

- Recognition that the I statements were developed with communities of older people, need for this to be further developed with all age groups and populations to truly reflect the needs of Croydon communities
- The applicability of the five I statements developed in discussions with residents aged over 65 to children and young people in particular, as well as other population groups
- The medical model health-centric nature of the current I statements
- The wording of the five I statements which are considered too 'management speak'

- That the current I statements do not take into account many existing ones, including those developed with children and young people in Every Child Matters, for example. (2003)
- That the I statements are too narrow and that broader overarching domains e.g. quality of life, being active (physically and socially) should be developed to give context to the I statements
- The need for statements that also include a desire for people to not need any contact with health or care services to manage their own health
- There was some negative reaction to the term 'I want' which begins all the statements
- Concerns that the I statements will become prescriptive

### **Methodology – Participatory Rapid Appraisal (phase 1): Mid-February to March 2018**

I statements, by their very nature, are individualised and yet the engagement will be a collective process to develop an outcomes framework for Croydon. Given this, it is suggested, where possible, a Participatory Rapid Appraisal (PRA) approach is used with the specific population groups of children and young people, families and people experiencing mental health issues. This does not mean that other population groups will be excluded from this process, merely that it can be difficult for other groups to commit the time for the process. PRA methods are a consensus based means to gather the views and feedback of residents and other stakeholders, in order to generate local intelligence and can provide qualitative understanding of people's values, motivations, and reactions.

The methods used will include focused population meetings to generate themes and aspirations residents have for their own health and well-being and that of others, focus group discussions to sort and prioritise themes and outcomes, based on a word cloud analysis. The word cloud will provide an illustration of the dominant topics to illustrate prevalent themes. Community group interviews will be used to identify any cross cutting themes around race, ethnicity and carers, for example.

### **Survey (to be developed after initial PRA sessions – phase 2): March 2018**

A wider survey will be developed, based on the results of the PRA sessions detailed above, to broaden the engagement out to residents who would prefer to respond in this way so that we can reach a wider group of people.

### **Potential questions**

I statements can appear to be abstract concepts to some people and rather than present the five existing I statements to wider population groups for testing it is recommended that, in the initial stages, the PRA would concentrate on very broad questions such as:

- What keeps me feeling well (or good about myself and where I live)?
- What stops me from feeling well (or good about myself and where I live)?
- What do I need to keep me well (or good about myself and where I live)?
- How can I support myself, my family and friends to feel good?
- How can other people or organisations help me to stay feeling well?
- If I have a health or social care need what needs to happen for me to? Find the help and support that I need?

- What support would help me to feel more confident in managing my health or care needs?
- What do people and/or local services need to do better and/or differently to help us to meet our aspirations?

Dominant themes which emerge at the PRA stage will then form the basis of the survey.

### Population groups and methods

Population Group	Methods	Key stakeholders	Leads
<b>Phase 1</b> (mid-Feb to mid-March)			
Children and Young People	PRA – What matters to me – (based on existing strategy of Children’s Services Transformation team) - <i>priority setting exercise</i>  What I want Croydon to be/mean to me - <i>visioning exercise</i>	Croydon Council (Children’s Services Transformation team) Parents in Partnership Croydon Voluntary Action Local schools Children’s Centre	NHS Croydon CCG Engagement team Croydon Council (Children’s Services Transformation team)
Families	PRA - What matters to me and my family <i>priority setting exercise</i> What type of place do me and my family want to live in <i>visioning exercise</i>	(Children’s Services Transformation team) Parents in Partnership Croydon Voluntary Action Local schools Children’s Centre Healthwatch Croydon	Croydon Council (Children’s Services Transformation) Best Start team
BAME Communities	PRA - Community group interviews – focus on ensuring generic populations based aspirations take into account any particular needs of BAME groups (including impact	BAME Forum Asian Elders Forum Croydon Voluntary Action	NHS Croydon CCG Engagement team Croydon Council engagement leads

	on health inequalities) <i>analysis exercise</i>		
Mental Health service users	PRA - Community group interviews – possible focus on integrated services and outcomes – <i>visioning exercise</i>	SLAM Hear Us MIND Imagine Croydon Carers Support and Information Centre	NHS Croydon CCG Engagement team
Carers (of under 65s)	Focus group - to explore wider population outcomes/priorities and impact for carers. Link to Carers strategy (LBC & CCG)	Croydon Carers Centre Croydon Carers Support and Information Centre Healthwatch Croydon Croydon Council Carers Forum	NHS Croydon CCG Engagement team/ Croydon Council Carers lead
People with long term conditions	Focus Group - What does self-care really mean and how can we make it work - <i>planning for real exercise</i>	CHS GP Membership Community and voluntary sector support groups Croydon Voluntary Action Healthwatch Croydon	NHS Croydon CCG Engagement team Together for Health steering group
All Croydon (including staff from across the health and care system including community and voluntary sector)	Survey 'Feet on the Street' day <i>What will living in Croydon look and feel like in 2028</i>	Croydon Voluntary Action Healthwatch Croydon	NHS Croydon CCG Engagement team Croydon Council engagement leads
<b>Phase 2</b> (5-26 Mar)			
Working age	Survey	Croydon Employers Forum Healthwatch Croydon Croydon Council Croydon Voluntary Action CHS	NHS Croydon CCG Engagement team/Croydon Council engagement team

### Engagement working group

The Croydon Communications and Engagement group will develop a working sub-group to oversee and contribute to the development of the engagement and will be

responsible for the final draft framework for consideration by Croydon's Local Transformation Board. The working group should comprise a range of stakeholders including engagement professionals and representatives from the CCG, Local Authority and Public Health, GPs, Healthwatch Croydon and patient representatives recruited to reflect the populations involved.

The working group will be accountable to the Croydon Communications and Engagement Steering Group and ultimately to the Croydon Local Transformation Board.

### **Timeframe**

Given the short timescales for this work the majority of the PRA activity will take place from mid-February to mid-March 2018. The wider survey will be available from 5 March to 26 March 2018. A draft outcomes framework will be available for comment after Easter 2018. This is a shorter timescale than we would have wished for but is necessary in order to be able to influence the early planning of the local health and care plans.

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## Appendix Two

### Developing whole population I statements to support the Croydon Health and Care Plan: Update

The agreed purpose of engaging more widely with Croydon residents of all ages is to broadening the development of future I statements (or aspirations), out to different population groups and communities within Croydon to:

- Develop I statements so that they resonate with the wider population's aspirations and ambitions for themselves, their families and communities
- Enable a wider number of Croydon residents to input into developing the aspirations as part of the Croydon health and care plan
- Develop a collective vision for Croydon residents, and the people and services who work with them.

This update provides details on the work to up to April 2018 and the next steps needed to develop the outcomes framework.

Population Group	Organisation/Event	Wards covered	When	Main Themes
Mixed (approx. 70 people)	Big Ideas session – Residents	All	July/Sept 2017	<p><b>Prevention:</b></p> <ul style="list-style-type: none"> <li>• Staying well best</li> <li>• Support within communities (protective factors)</li> </ul> <p><b>Services:</b></p> <ul style="list-style-type: none"> <li>• More flexible access to services (location, medium)</li> <li>• Use technology better – very outdated</li> </ul> <p><b>Mental Health:</b></p> <ul style="list-style-type: none"> <li>• More focus on crisis and young people to stay well</li> </ul>
Provider staff (approx. 50 people)	Big Ideas session – Croydon staff from local authority /CHS/SLAM	All	July 2017	<p><b>Prevention:</b></p> <ul style="list-style-type: none"> <li>• Use allied health care professionals much more effectively – up skilling</li> <li>• Support communities to empower people to stay well and recover more quickly from episodes of illness</li> </ul> <p><b>Services:</b></p> <ul style="list-style-type: none"> <li>• Better use of specialist nurses for long term conditions and pharmacists for self-care</li> <li>• Need to improve technology (internally and externally)</li> </ul>

BME groups (9)	Mental Health Focus Group	All	2 x sessions Oct/Nov 2017	<p><b>Culture:</b></p> <ul style="list-style-type: none"> <li>Services need to better understand the cultural perceptions around mental illness for BME communities – ‘keeping it my business’ is common reaction to people talking about mental health needs.</li> </ul> <p><b>Mental Health:</b></p> <ul style="list-style-type: none"> <li>Equality in decision making – hindered by age and past experience.</li> </ul>
BME Older Adults (approx. 30 people)	Mental Health Grass Roots event (ASKI)	All	Nov 2017	<p><b>Mental Health</b></p> <ul style="list-style-type: none"> <li>Should be an aspiration that no young person ever has to wait to reach a crisis before they are offered support</li> <li>Support for more mental health services in the community, such as a drop in centre.</li> <li>Have specialist mental health services in GP practices</li> </ul>
Parents/Older People (approx. 20 people)	Outreach – Coulsdon Library	Coulsdon	Jan 2018	<p><b>Children and Young People:</b></p> <ul style="list-style-type: none"> <li>Everybody wants the best for their children, sometimes we need support to help them achieve their best – this should be done in a way that doesn’t threaten the parents key autonomy</li> <li>Children are everyone’s business and it should be a joint effort of communities to raise them well</li> </ul> <p><b>Older people:</b></p> <ul style="list-style-type: none"> <li>Earned the right to be treated as individuals</li> <li>Just because we are older doesn’t mean we want to disappear. Older peoples contribution to communities and supporting their grandchildren should be respected</li> </ul>
Parents/Older People (approx. 12)	Outreach – Norbury Library	Norbury	Jan 2018	<p><b>Children and Young People:</b></p> <ul style="list-style-type: none"> <li>Even when a child is very unwell parents may still know best, hospital staff should respect this and listen to the parents, who know their child best</li> <li>Schools should do more work with the NHS about how to look after themselves and their families, it worked for smoking – getting children to nag their parents</li> </ul> <p><b>Older people and services:</b></p>

				<ul style="list-style-type: none"> <li>• I keep getting asked to see the Doctor as I have diabetes but I want to stay well without the Dr.</li> <li>• It feels like Drs have an interest in keeping you sick – once you are diagnosed with something they just keep making you go to endless appointments</li> </ul>
Parents/Older People (approx. 20 people)	Outreach – Coulsdon Library	Thornton Heath	Jan 2018	<p><b>Mental Health:</b></p> <ul style="list-style-type: none"> <li>• Young people’s mental health services are too reactive, young people have to be past the point of crisis before they get services</li> <li>• Why can’t we have mental health workers specially trained for children, in schools so that mental well-being is part of normal life</li> </ul>
Parent 2 Parent (support groups for parents of children with Type 1 diabetes)	Group meeting	All	Jan 2018	<p><b>Prevention:</b></p> <ul style="list-style-type: none"> <li>• Need access to modern technology to help our children stay well. There are lots of new helpful devices that can monitor children overnight without parents having to wake them. Why can’t the NHS help us to help our children by supplying them to all diabetic children</li> </ul> <p><b>Transition:</b></p> <ul style="list-style-type: none"> <li>• There must be a much smoother transition between children’s and adult services – parents get stuck in a no man’s land when they don’t know what is going on with their child’s health</li> </ul> <p><b>Equal partnership:</b></p> <ul style="list-style-type: none"> <li>• We must be treated as real partners in the care of our children and ourselves</li> </ul>
Clinicians, VCS, Croydon residents (approx. 40 people)	Diabetes re-design event	All	Jan 2018	<p><b>Access:</b></p> <ul style="list-style-type: none"> <li>• Ease of access to services – from self-referral to education and psychological support to screening sessions in community venues and ‘one stop shop’ appointments for routine checks.</li> </ul> <p><b>Wider Community:</b></p> <ul style="list-style-type: none"> <li>• Peer support and mentoring drawn from our communities.</li> <li>• We need to involve a wide range of professionals,</li> </ul>



				<p>including practice nurses, pharmacists and opticians – harnessing all of our expertise and make every contact count.</p> <p><b>New ways of working:</b></p> <ul style="list-style-type: none"> <li>• Longer and alternative consultations - group consultations, shared care planning motivational support.</li> </ul>
Working age adults/carers (approx. 60 people)	Grass Roots Event (Well Being You)	All	Feb 2018	<p><b>Primary care:</b></p> <ul style="list-style-type: none"> <li>• It was felt that nurses do a great job however, people preferred to see a GP as nurses are still unable to sign off prescriptions etc.</li> <li>• It was felt that primary care nurses need more responsibility and their career needs more promotion.</li> </ul> <p><b>Community:</b></p> <ul style="list-style-type: none"> <li>• Being active keeps people well, feeling that they are contributing and valuable – that’s why so many volunteers are older people.</li> </ul>
People with SEMI (approx. 35 people)	Hear Us – Mental Health Forum	All	Mar 2018	<p><b>Respect:</b></p> <ul style="list-style-type: none"> <li>• Need to treat people who have a mental health issue as a person not an illness, similar to people with cancer – it’s an illness not a person</li> </ul> <p><b>Community:</b></p> <ul style="list-style-type: none"> <li>• We have interests and dreams. Since I have been helped to do voluntary work with animals I haven’t had to go back into hospital – I’ve never been out of hospital this long, it’s because I know I have to stay well to look after the animals</li> </ul>
Mixed (approx. 200 people)	Outreach in Whitgift shopping centre	All	12-14 March 2018	<p><b>Prevention:</b></p> <ul style="list-style-type: none"> <li>• People need to take responsibility but need support to do that – it’s about working together not saying get on with it or over treating people</li> <li>• Some communities face huge barriers to being healthy – maybe some of it is their own fault but blaming them isn’t going to make it better</li> </ul>

				<ul style="list-style-type: none"> <li>Getting ill is too much hassle going to the Dr's, Hospital and all the rest of it – that's a good motivation to stay well</li> </ul>
Working age adults/carers (approx. 30 people)	Meet the change makers – joint event with Healthwatch Croydon	All	March 2018	<p><b>Services:</b></p> <ul style="list-style-type: none"> <li>Communication, communication, communication! I'm an expert at me but not at where I need to go or what I need to do to stay well</li> <li>If services were more accessible locally people might not feel the need to use them so often</li> <li>NHS need to be tougher – send people away from high cost services if they don't need it</li> </ul>

### General comments about the five current I statements

People were not generally asked to comment on the current I statements but they were available as an example of some previous work developed as part of the programme of work for residents aged over 65's living in Croydon. While the intention behind the I statements was seen as a genuine attempt to develop more responsive services, overall the observations on the current I statements suggest a more positive and ambitious series of aspirations and commitments from both residents and organisations people would be preferred.

- The current I statements were not felt to be as applicable to other population groups
- The medical model health-centric nature of the current I statements
- The wording of the five I statements which are considered too 'management speak'
- The current I statements do not take into account many existing ones, including those developed with children and young people in Every Child Matters, for example.
- The I statements are too narrow and that broader overarching domains e.g. quality of life, being active (physically and socially) should be developed to give context to the I statements
- The need for statements that also include a desire for people to not need any contact with health or care services to manage their own health
- There was some negative reaction to the term 'I want' which begins all the statements
- Concerns that the I statements will become prescriptive and not be adapted to the changing needs of Croydon residents

## **Current Gaps**

Further, more in-depth work needs to take place with specific population groups to ensure that their voices are heard. These groups are:

- Carers – especially young carers and carers of young people
- Children and Young People
- The 'walking well'
- Men – especially working age
- Vulnerable groups including people experiencing homelessness

## **Next Steps**

The next steps of the engagement will be to engage with the specific communities identified above. Once this has been completed people who have contributed to the work to date will be invited to attend a focused workshop to look develop a draft framework which covers the areas of:

- Start well
- Live well
- Age well

Ros Spinks  
1 May 2018