

## FORWARD PLAN – 2015/16

SERVICE	PATIENT AND PUBLIC INVOLVEMENT
ANTI-COAGULATION	There are plans to hold a patient event in November with the aim of informing patients that the anticoagulation service will eventually and totally transfer to Boots UK Ltd as of 31 <sup>st</sup> December 2015 and address any concerns.
COMMUNITY PHARMACY DOMICILIARY MEDICINE REVIEW SERVICE	A bid for funding has been submitted to the National Institute for Health Research for more detailed evaluation of this service including interviews of service users and GPs which will then be used to refine the service. The outcome of this bid will be known in November 2015.
CHILD AND ADOLESCENT MENTAL HEALTH SERVICE	On-going 1:2:1 interviews, outreach, open-ended questions, seminars, workshops, survey monkey, listening to stories / experiences of young people, data analysis and going to meet young people to engage Looked After Children, unaccompanied minors, young carers, those with enduring mental health issues, parents with children with complex needs, service users, children and young people more generally, minority communities and young people that identify as lesbian, gay, bi-sexual or trans-gender.

<p><b>CHILDREN'S ASTHMA SERVICE</b></p>	<p>A south west London children and young peoples' networking event is planned for October involving service users and people with LTCs covering all six Clinical Development Groups.</p> <p>Locally, and at sector level, the aim is to hold focus group meetings, particularly for seldom heard groups such as young people to inform the development of a sector-wide pathway.</p>
<p><b>DIABETES</b></p>	<p>On-going engagement planned with South Asian community following review of report on our previous engagement with this community by Diabetes Steering Group – likely focus will be education around self-care and management, weight management and physical exercise to a level appropriate and relevant to religious / cultural needs.</p>
<p><b>DIRECT ACCESS DIAGNOSTICS</b></p>	<p>It is planned to continue to involve the patient participant in all aspects of the Steering Group agenda and actions.</p>
<p><b>DIRECT ACCESS PROCTOLOGY</b></p>	<p>The forward plan is to improve the quality of patient information about the new Direct Access Proctology clinic, and to seek feedback from patients using it, about their experience.</p> <p>It was agreed at the joint CCG/CHS Project Steering Group held in August</p>

	<p>2015 that CHS would liaise with relevant patient contacts to support a patient representative or patient group member to review the patient information sheets for the procedures to be carried out at the new Direct Access Proctology clinic. The CHS Project Manager is taking this forward.</p> <p>It was also agreed that a patient participant would be invited to the next Steering Group meeting.</p> <p>CHS Steering Group members indicated that the Transforming Cancer Services Team (TCST) Help Centre could be approached to identify potential patient participants or the Cancer Support Centre. The CHS Project Manager is also taking this forward.</p> <p>CHS is seeking feedback from all patients attending the new DA Proctology clinic, and has designed a short survey for this purpose.</p>
<p><b>EQUALITY DELIVERY SYSTEM</b></p>	<p>November event planned to establish external stakeholder panel involving local patients and the public to assess how the CCG has performed since April 2014 with regard to commissioning services that meet the needs of Croydon's diverse communities in order to achieve better health outcomes and improved patient access.</p>
<p><b>END OF LIFE CARE (EoLC)</b></p>	<p>Planning to work with end of life doulas (informed volunteers / champions) and hold a series of one off events such as death cafes involving members of the public to raise awareness of EoLC and undertake community recruitment to build complement of doulas. This will also involve the participation of local voluntary and community groups to engage their</p>

	<p>networks eg Age UK. The next national Dying Matters week will also be promoted in May 2016.</p>
<p><b>FEMALE GENITAL MUTILATION (FGM) PROJECT</b></p>	<p>The FGM Project will ensure that women, children and communities affected by FGM in Croydon are given a voice in the future planning and implementation of support and prevention services via the following: -</p> <ul style="list-style-type: none"> <li>- Health and culture support group for women affected by FGM co-facilitated by an FGM survivor. Experiences of local services will be gathered and used to improve delivery and planning. As well as offer recommendations for use in services locally and plans for the future in this area.</li> <li>- Recruitment of trained community FGM champions via support group and local perineal clinic and professional network to ensure voices in the broader community inform the project going forward and there is a two way cascade.</li> <li>- Engagement of established FGM group at Croydon College to ensure that young people's voices are heard and embedded into prevention messages, projects and plans going forward.</li> <li>- Plans for an FGM awareness raising campaign that will include borough wide publicity as well as community activities and presence (stalls, sessions, conference, film screening )</li> </ul>

<p><b>MENTAL HEALTH</b></p>	<p>The Hear Us scheme has been running since 2014-15 to understand from a face-to-face perspective, the service user experience from in-patients in Croydon. All the workers are volunteers who have or are users of Mental Health services. The Hear – Us link worker will continue to visit each ward twice a week, does a full ward round and sees each user of the South London and Maudsley so all Croydon patients can give their perspective and views.</p> <p>The team of volunteers have clinical supervision and are / were former service users. A team leader funded by the CCG (quality premium money) recruits the team which works on a rota basis.</p> <p>This service gives us service user concerns, areas of poor practice, and issues that may not be raised as a serious incident. This is fed back to the Mental Health Lead commissioner, the monthly CQRG, and the four borough CQRG.</p>
<p><b>OUTCOMES BASED COMMISSIONING</b></p>	<p>Engagement will continue for the next three months and this will include:</p> <ul style="list-style-type: none"> <li>- Service User Engagement Specialist Group meeting monthly to provider oversight and advise on the design and delivery of patient, carer and public engagement in the next stage of the programme.</li> <li>- Focus groups targeting specific areas such as BME, LTC, carers and under 65s (55-64) to gain feedback to inform commissioning decisions</li> <li>- Further opportunities to engage with the wider public – through large events and opportunistically through community groups – to inform OBC development</li> </ul>

<p><b>PAEDIATRIC THERAPIES AND SPECIAL SCHOOL NURSING</b></p>	<p>On-going engagement with parents and carers of children and young people with special educational needs and disabilities (SEND) to co-design service provision, draft outcome indicators and comment on current service delivery. The potential impacts include improving patient experience and service quality, influencing commissioning intentions and strategy and directly involving families in designing the services they use.</p>
<p><b>PREVENTION, SELF-CARE, SELF MANAGEMENT AND SHARED DECISION MAKING</b></p>	<p>The Prevention, Self-Care and Shared Decision (PSSSD) communications and engagement working group is looking to carry out a piece of engagement work with patients and the public around PSSSD. The approach is currently being developed but will take into account urgent care and the OBC engagement work already planned for September onwards.</p> <p>Subject to the CCG's approval, the PSSSD engagement work will be designed to raise awareness of PSSSD, particularly shared decision-making, with a push to engage people in their own self-care (prevention) and self-management (managing LTCs).</p> <p>Building on existing engagement work, the approach is likely to include a survey, leaflets, in-street interviews and two or three LTC-specific focus groups. It will also link in with relevant voluntary organisations.</p> <p>It is expected that a co-design group will then be established with a mix of people with LTC and relevant commissioners (health and social care) and public health. This would be an on-going group, facilitated externally where the expertise of both sets of people (those who are experts in managing their conditions and those who commission services) is pooled/harnessed in: reviewing the strategy and business case; exploring options (eg what would</p>

	<p>a good care plan / decision making tool / signposting service look like from a patient and commissioner perspective); agreeing ways of testing with the wider public; reviewing feedback and jointly exploring solutions.</p> <p>It is expected that this piece of work will start before the end of the year, after the approach has been agreed by the PSSSD communications and engagement working group and the PSSSD Board.</p>
<p><b>SAFEGUARDING</b></p>	<p>Awareness-raising sessions concerning the Mental Capacity Act planned with Parents in Partnership, Healthwatch Board members, Hear Us and the BME Forum.</p> <p>October conference planned involving Mencap, advocacy groups, Age Concern, service-users and the Alzheimer’s Society to raise awareness of the Mental Capacity Act and participate in the Law Commission’s consultation on the Deprivation of Liberty Safeguards (using easy access materials produced by the Department of Health).</p>
<p><b>TRANSFORMING ADULT CARE SERVICES</b></p>	<p>Monthly feedback surveys will be undertaken with all patients/carers of patients using the Croydon Health Services Rapid Response, Community Matrons, District Nursing, Community Intermediate Care, Health Visitors for Older People services. National Friends and Family test survey used to obtain feedback on the care and treatment received by the patient.</p>
<p><b>URGENT CARE REPROCUREMENT</b></p>	<p>Co-design workshop in September involving local residents, service users and voluntary groups followed by wider engagement involving paper and online survey made available at points of care, public meetings to ensure geographic coverage, attendance at community meetings, deliberative events with seldom heard groups commissioned through the voluntary and</p>

	community sector ( in order to reach young people, low income households and BME community) plus wider patient and public participation through key partners and community groups such as resident associations, luncheon clubs and parent councils over the autumn to inform and shape the final model of urgent care delivery in Croydon.
<b>CARERS</b>	Focus groups planned with Mencap service users (carers of children and/or adults with a learning disability) and Crossroads' service users (mixed carers). Discussions in place with relevant BME groups.
<b>LEARNING DISABILITY COMMISSIONING TEAM</b>	Involvement in development of service specifications for Learning Disability Residential and Nursing Services, reviews of Day Opportunities and Respite Care service for people with learning disabilities, Learning Disability Partnership Boards, Carers Groups and Peer Groups, provider forum, 'Big Talk' event, workshop, 'Leisure Link' meeting, Learner Reps meeting, school council meeting, person centred approaches training and Making a Difference group meetings (weekly).
<b>SPECIAL EDUCATIONAL NEEDS &amp; DISABILITIES</b>	Focus / working group scheduled for October 2015.

