

Patient and Public Involvement – Quarterly Report - Quarter 3: October to December 2018

Area of work	Participants	Partners	Recruitment and Methods	Purpose	Impact
<p>Mental Health – Adults</p> <p>World Mental Health Day, 10 October 2018 – performances</p>	<p>195 people came to view the 4 performances.</p> <p>Two sessions were held at the David Lean Theatre and showed the film, “So You Think I’m Crazy”.</p> <p>The other two sessions were live performances of the “So You Think I’m Crazy” play.</p>	<p>London Borough of Croydon</p> <p>SLaM</p>	<p>London Borough of Croydon networks</p> <p>Community and Voluntary sector organisations networks</p> <p>CCG networks</p>	<p>To raise awareness of mental health issues and local Community and Voluntary sector support and services available for service users and carers</p>	<p>Two sessions were held at the David Lean Theatre and showed the film, “So You Think I’m Crazy”. The other 2 performances were theatre productions at Matthews Yard.</p> <p>Participants had the opportunity to ask questions to a panel made up of local councillors, SLaM and CCG commissioners.</p> <p>All feedback received has been fed into the Mental Health transformation programme.</p>
<p>Mental Health – Adults</p> <p>Talking Therapies Insight Focus Groups</p>	<p>4 x 90 minute focus groups were held. The groups were made up of the following targeted populations:</p> <ul style="list-style-type: none"> • Male 65+ • Women 65+ • Men aged 18-30 	<p>SLaM</p>	<p>Targeted recruitment through a specialist agency</p>	<p>To provide insight into marketing materials to increase the referral rates and take up of the Croydon Talking Therapy service.</p>	<p>A full draft report has been produced which outlines the findings from the focus groups.</p> <p>There were significant issues identified with the current marketing of the service as well as barriers to access.</p>

	<ul style="list-style-type: none"> Men aged 31-50 <p>Their make-up covered a range of socio-economic groups and a diversity of ethnicities - although the older people's groups had lower levels of diversity than the male groups.</p>				Further targeted materials have been produced for testing. Discussions are being held with the provider about the way the service is currently accessed and further insight work is being undertaken with GPs.
<p>Mental Health – Adults</p> <p>BME Grassroots mental health workshop follow up – 14 November 2018</p>	Approximately 75 people attended from a range of community, voluntary groups and individuals from the BME community	SLaM Croydon Council	Through CCG, SLaM, CVS and Local Authority contacts Twitter	A half day workshop to support the CCG and SLaM to re-design community, primary care and crisis mental health services in Croydon	<p>Please see appendix one for the raw data collated at the event.</p> <p>Participants heard about further developments since the July workshop. There was then a discussion on the content and specific work streams.</p> <p>The participants clearly expressed that due to Croydon's diverse communities and neighbourhoods if a neighbourhood model was going to be at the heart of the transformation then further work needed to be done to localise the offer. It was agreed that smaller working groups would be drawn</p>

					together from CVS providers and service users to lead the development of the model in networks.
Mental Health – Adults SLaM event to discuss the Changing Lives Strategy	Approximately 30 service users and CVS representatives attended the event. The service users present were less ethnically diverse and older than the Croydon demographic profile	SLaM	Through SLaM	To discuss and input into SLaM’s Changing Lives Strategy	SLaM will be reporting on the event later in the New Year.
Planned Care transformation programme Anti-coagulation provider assessment	2 x service users are part of the assessment panel for the new Anti-coagulation services.	CCG	CCG patient representatives	The patient representatives are supporting the assessment of the joint provider integrated bid.	This work is a part of the planned care services transformation work. The patient representatives have been part of the evaluation panel with a specific responsibility for assessing patient experience and quality elements of the assessment framework. A final assessment panel meeting will be held in early January 2019.
Prostate Cancer event	Over 70 people attended the event – the majority were over 50.	Croydon Patient Participation Group Network	Through CCG networks PPG Networks	To raise awareness of Prostate cancer	The event provided an opportunity to speak to Croydon residents that the

<p>Patient information session as part of Movember (Men's health month)</p>	<p>Approximately 65% of attendees were male.</p>	<p>SLaM Talking Therapy LTC therapist</p> <p>Purley Cancer Network</p>		<p>testing and local support services.</p>	<p>CCG would not normally have access to.</p> <p>Patient experience shared was included in the Grass Roots feedback report to SWL.</p> <p>A programme of further events are currently being discussed with the Network for 2019 to help support prevention and self-care work across partners.</p>
<p>Health and Care Place event</p> <p>November 2018</p>	<p>61 x Croydon residents 43 x Staff from partner organisations (CHS, SLaM, Croydon Council and CVS organisations) 39 x Stakeholders</p> <p>25 x primary school children from the Tudor Academy also participated in the event in the morning and discussed all the priorities.</p>	<p>London Borough of Croydon – Adult Social Care and Public Health</p> <p>SLaM</p> <p>Croydon Health Services</p> <p>Healthwatch Croydon</p> <p>South West London Health and Care Partnership</p>	<p>The Croydon residents were selected through a specialist agency who were briefed to recruit based on Croydon's age and ethnicity profile.</p>	<p>The purpose of the system wide event was to:</p> <ul style="list-style-type: none"> • Test partners priorities • Explore the challenges for the borough's population • To help start plan actions to meet the challenges together 	<p>Appendix 2 presents the analysis of the evaluation of the event.</p> <p>Collaborate, who facilitated the event, have produced a draft presentation based on feedback produced from the day.</p> <p>This will be available in January 2019.</p> <p>A number of ideas were generated on the day and further outreach work will be undertaken in quarter 4 to test these ideas with a wider group of Croydon residents.</p>

<p>Closure of Coulsdon Medical Practice</p> <p>Patient information and support session</p>	<p>At the request of the South Croydon Residents Associations representatives a further drop-in session was held for patients affected by the closure.</p> <p>2 patients attended.</p>	<p>South Croydon Residents Association representatives.</p>	<p>Letter to all registered patients.</p>	<p>To support patients to register at alternative GP Practices.</p>	<p>Representatives from the South Croydon Residents Association assisted in disseminating information about the closure of the practice and the sessions.</p> <p>The RA representatives also highlighted and supported more vulnerable patients to help ensure they were able to register with a new GP Practice.</p>
<p>South-west London Grass roots event</p> <p>Homestart (support for refugee and asylum seeking women who are in the late stages of pregnancy or who have given birth shortly after arrival in the UK)</p>	<p>10 x female refugee and asylum seeking women who had given birth within the last year at Croydon University Hospital.</p>	<p>Croydon University Hospital</p> <p>Healthwatch Croydon</p> <p>SWL Health and Care Partnership</p>	<p>Through Homestart organisation</p>	<p>To hear refugee and asylum seekers experiences of maternity services in Croydon.</p>	<p>The lead commissioner for Pregnancy and Maternity will be working with Homestart on the following issues, based on the women's experiences:</p> <ul style="list-style-type: none"> • Explore whether it's possible to leave an emergency hospital bag and new-born baby pack on the Labour Ward in case a baby comes early • Check with HVs and midwives that the women are getting their Healthy Start Vouchers – for the full time they are entitled to them. • Check the possibility of introducing standard dispersal letters with

					<p>mother and baby medical information.</p> <ul style="list-style-type: none"> • Look at developing a midwifery support structure for women in emergency accommodation, including drop ins and pastoral care. • Discuss the development of a peer support programme to support mothers during delivery.
<p>Winter Champions</p> <p>Volunteer opportunities for staff and patient representatives</p>	<p>6 x CCG staff</p> <p>3 x community volunteers</p> <p>2 x outreach opportunities undertaken in December</p>	CCG	Internally	To support local people to stay well a winter champion volunteer scheme has been launched.	<p>Two organisations have been visited as part of this programme in December.</p> <p>One was aimed at over 65's (Well Being You) and one was aimed at Homeless people (Shelter).</p> <p>Four more opportunities have been identified to date for January/February 2019.</p> <p>The impact of the winter champions programme will reported on in quarter 4.</p>
<p>One Croydon Service User Group</p>	<p>The core group consists of:</p> <p>11 X WB (4 x M, 7 x F)</p>	Monthly service user experience group.	Patient and CVS representatives were recruited through previous	To inform and underpin the implementation of	The SUSEG meet on a monthly basis and are members of various Project Development Groups.

	1 x BA (Female) 2 x Asian (Male) 3 x disabled		engagement events and Healthwatch Croydon contacts	the One Croydon programme. To contribute to on-going engagement in the One Croydon programme.	The focus this quarter has been on the development of the Local Voluntary Partnership programme.
Engagement guide (Internal resource pack for staff) launch	Not applicable	Not applicable	Internal	To support CCG commissioning and project management staff to undertake inclusive and effective engagement.	The internal engagement guide has been shared with a number of staff during a lunch and learn session. The feedback received will help to refine the guide which will then be distributed to all staff, and new starters to support them to understand and implement the 'Croydon Way' for engagement.

Planned PPE January – March 2019

SERVICE AREA	PATIENT AND PUBLIC PARTICIPATION
Planned Care – Provider assessments against the assurance framework	Evaluation training and support will be given to patient leads who will be taking part in procurement/assessment panels for direct awards between October and December 2019. The services concerned at this stage include: <ul style="list-style-type: none"> - ENT services - Anti-coagulation

Mental Health - Adults	<p>As a follow up to the 2 workshops held in July and November participants will be invited to work in more detail on the transformation plans.</p> <p>Talking Therapies - Materials based on the insight work, held in quarter 3, will be produced and further evaluated amongst the target groups (Males aged 18-40) and older people from BME groups.</p>
Expert Patient Programme course	<p>The first Expert Patient Programme course will be run in January/February 2019.</p>
Croydon Health and Care Place plan outreach	<p>Engagement will be held with targeted groups based on the outputs of the event in November. Given the priorities selected the engagement will focus on the following groups:</p> <ul style="list-style-type: none"> • Children and young people • Carers (including carers for people with dementia) • Working age adults • People with LTC • People and carers with autism
Mental Health - Children and Young People (SWL)	<p>A local cluster of schools has been established in Croydon and participating schools have undertaken an audit to determine the baseline / starting point and to support the development of a cluster-wide action plan for enhancing resilience of children and young people.</p> <p>Engagement is required to support the cluster to understand local position, plans and scope for influence, support to develop skills, expertise and more detailed programme of engagement within schools and at cluster level.</p>
SWL Winter Champions	<p>The SWL Health and Care Partnership winter champions programme will continue focusing on the following groups:</p> <ul style="list-style-type: none"> • Older people • People with long-term health conditions • Parents of under 4s • Pregnant women

	<ul style="list-style-type: none"> • People with mental health issues • BME groups • Carers
IAF ratings for PPE (NHSE)	<p>An internal audit has taken place of materials on the CCG website, ahead of the assessment to be undertaken by NHSE, likely to be undertaken in January/February 2019.</p> <p>Additional reports, materials and videos are being finalised to upload onto the website.</p>
Community Leadership Programme	<p>Funding has been agreed for the Community Leadership programme which will support the recruitment, training and on-going development of a wide and diverse group of patient representatives. The representatives will ensure that the patient and public voice is embedded internally, through involvement in programme boards and steering groups.</p> <p>It is intended that this programme will begin in quarter 4.</p>

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Appendix One – Feedback from the BME Mental Health Workshop follow up – 14 November 2018

Feedback Mental Health Grassroots event 14th November 2018 – Braithwaite Hall

Introduction

Unlike the first event in July 2018 (a seminar) this follow on event was organised to build on the feedback, previously collated and now themed to develop these further. After presentations from Paulette Lewis (Lay Member Patient & Public Involvement) and Marlon Brown (Head of Integrated Mental Health Services) stakeholders worked in small groups, overseen by a facilitator for thirty minutes. During observations, participants were fully engaged coming up with a variety of proposals, about how to improve the new model, so it best meets the need of BME communities.

Workshop Event

Seven themes were introduced:

- (1) Signposting
- (2) Developing the team
- (3) Partnership
- (4) Raising awareness
- (5) Supporting self-care
- (6) Social Prescribing
- (7) Developing Quality Improvement Expertise

Signposting

Issues

- The mental health system is complex and difficult to navigate
- Disparity between service user's expectations and professional rationale - inappropriate referrals
- Waiting times too long
- Poor service user experiences
- Wasted resources – unsuitable appointments
- Lack of support for carers – left to deal with the brunt of issues experienced by service user's
- Not enough support for carers
- A disjoint in mental health services – leads to confusion and difficulties with navigation

Recommendations

- Develop a simple to use guide (road map) of services for common mental health conditions
- Ensure right referral first time, to improve efficiency within the system
- Referrer accountability – must refer again if the original referral was unsuitable
- Upskill GP's to refer
- Train Home Coordinators to become 'Experts' at signposting
- Promote new community services to alleviate the pressure within the system
- Introduce a 24hr helpline – to reduce pressure on A&E departments
- Recruit and train 'Navigation Champions', like Personal Independence Coordinator to support service users with navigation
- Translate publicity material into other languages, Makaton and Braille
- Recruit volunteers to provide conversational translation support
- Develop the role of community hubs; visibility (signage), a designated referrer, experts on community services who hold regular and frequent drop ins
- Link community hubs to GP practices for governance, assurance and safeguarding

- Use complaints and patient experience feedback to improve services provided by hubs
- Increase workforce to meet the demand for services
- increase the level of support provided to carers to keep them well, financial, psychological and emotional
- Include carers in discussions about the person they care for

(1) Developing the team

Recommendations

- Include service user's in the recruitment process
- Get the buy in from GP's, practice managers and receptionists for social prescribing
- Appoint a volunteer mental health expert in each team who can act as a link between the community and professionals
- Include MDT service reviews, action plans, and patient choice in treatment plans
- Appoint navigators to provide ongoing support, e.g. substance misuse, housing and welfare benefits to service user's
- Provide funding to utilise community assets for non-clinical interventions.

(2) Partnerships

Suggestion that the following points requires answers before a partnership is formed.

- Who defines the partnership; skills, capacity, structure, terms of reference?
- Must be realistic about what the partnership can achieve
- Is the primary function, the responsibility for delivering non-clinical interventions, or scoping and recruiting new organisations into the structure?

A Partnerships the community want to see

Strong leadership which embraces:

- Equality including the most diverse communities
- Compliance with the Equality Act 2010
- Community centred
- Accountable – outcome based

Recommendations

- Recruit members
- Identify gaps in service provision
- Get the buy in from providers to either adapt or provide alternative services if duplications have been identified from the analysis
- Create forum for partnership representation to the CCG
- Larger partners to lend their expertise, knowledge and resources to prevent the closure of smaller organisations
- Roll out mental health first aid training for all partners.

(3) Raising Awareness

Recommendations

- Start with research to develop key campaign messages to engage seldom heard and diverse communities, looking at stigma to challenge negative stereotypes
- Account for those who may not identify as a 'Carer' or someone with a mental health condition in campaign messages
- Campaigns need to be sustained and properly funded
- Utilise the voluntary and community sector's knowledge of communities and service user's experiences to design campaigns
- Recruit Mental Health Ambassadors to increase the reach into diverse communities
- Align outreach engagement with regular workshops and seminars to assess impact
- Develop consistency between accessing online and in person services.

(4) Supporting self-care

Recommendations

- Mobilise churches to actively engage individuals and encourage friendships
- Organise tea afternoons – organisations take turns to host afternoon tea
- Fund mobile gyms so the housebound can participate in gentle exercises
- Work with the Local Authorities to provide more allotment spaces
- Utilise libraries - drop ins, advice and guidance, volunteer recruitment and job clubs
- Understanding the importance of individual's cultural preferences, language, behaviour and values
- Work with local businesses to donate self-care freebies and reduced offers services
- Intergenerational work - create opportunities for the younger population to support the elderly e.g. school's IT project, gardening
- Advocacy and volunteering – create a programme where retired individuals can give back to the community
- Mobile outreach – use an information bus to get information to the isolated about community offers
- Leaflet drops
- Promote friendships and peer to peer support.

(5) Social Prescribing

The term needs to be defined – a suggestion:

'The ability to access different hubs or community organisations to engage in various activities which may help me to keep well'.

Recommendations

- Community activities, including sports
- Develop social prescribing in each GP network
- Work with Public Health to disseminate information about what is available in the borough
- Training - mental health first aid
- Publicising services available in the community
- Learning from each another and other organisations
- Posters, website and apps.

(6) Developing Quality Improvement Expertise

Broken down into different aspects:

Non-clinical interventions

- GP surgery intervention
- Schools/education
- Workshop/churches

Online platform

- Ongoing work to weave all the experts into one portal

Training

- Interpersonal skills
- Mental health first aid
- Cultural awareness/competence

Multi-Disciplinary Team – equity

- There needs to be equity between GP's and all partners. GP's should not hold all the power.
- Highlight 19-25 year olds, LD and SEN - make sure that they get the right help

Putting the person first

- How do we move away from target driven services?
- Might not always be able to solve issues
- Volunteers used to increase capacity

- Training to ensure consistency in service delivery
Who is advocating
- Need to address destabilization and offer practical assistance to reduce relapses.
- Language barrier Interpreting translation or support from an 'Accountable Other'
- Considering the aspect of familiarity, the hubs should be staffed with individuals who reflect communities in Croydon. Creating an environment where people see others like themselves will help to develop trust
A question to consider:
- Does the person require practical support, to assist with attending appointment e.g., housing, social services or welfare appointments?

Appendix two – Croydon Health and Care Place Event evaluation feedback

Croydon health and care plan event – Tuesday 20th November 2018

166 attendees at the event. Of the 99 participants who completed the feedback form:

- 97% felt the event was valuable
- 98% felt their contribution was listened to
- 58% felt confident that the priorities will make a positive difference to health and care in Croydon
- 72% felt they know more about the health and care partnership than they did before the event

There were 166 participants. The majority stayed for the entire event, other than the school children. The participant make up was as follows:

- Croydon residents - 61
- Staff from partner organisations (CHS, SLAM etc.) – 43
- Stakeholders – 39 (Did all our speakers sign in?)
- 23 children from Tudor Academy primary school (attended morning only)

Primary school children from the Tudor Academy participated in the event in the morning and discussed all the priorities on separate tables facilitated by the Head Teacher, the Manager of Healthwatch Croydon and 2 CCG volunteers.

There were a total of 99 completed evaluation forms. This is a higher than anticipated number of completed forms and this was because the facilitator made space in the agenda for participants to complete the form before finishing the day ahead of time.

Scoring for whether people felt the event was valuable

Score	5	4	3	2	1
No of people selecting this score	47	45	3	0	0
Total					95
Average score	97% said the event was valuable				4.4/5

Scoring for whether people felt their contribution was listened to

Score	5	4	3	2	1
Number of people selecting this score	51	45	1	1	0
Total					98
Average score	98% felt their contribution was listened to				4.5/5

Scoring for whether people felt confident the priorities would make a difference

Score	5	4	3	2	1
Number of people selecting this score	15	41	37	3	1
Total					97
Average score	58% felt confident the priorities would make a difference	A further 38% weren't sure whether they would, this was mainly reported due to perception of lack of public sector funding available			3.6/5

72% of participants responded that they know more about local health and care priorities than they did before the event.

Summary of comments about the health and care place event

Participant's comments suggested that the main value of the event focused on networking, meeting people in a different context, especially for staff and residents.

"Taking time out to think and reflect on how to improve services in Croydon and if there are any changes we can make ourselves." Health care professional

"Valuable to get professionals and residents together" - Stakeholder

"It is an excellent idea to have people from diverse backgrounds (age, ethnicity etc.) to meet together to discuss what they believe to be the problems" – Stakeholder – Councillor

"I was pleasantly surprised at today's event. Was an amazing opportunity to network and meet other mental health professionals" – Health and social care professional

There was also a sense of optimism and pride in Croydon expressed:

"It was an opportunity to both hear what is currently happening and to have a voice which will hopefully shape future services" – Health and social care worker

"This is the first event that I feel has and will make a difference to Croydon residents" – Health and social care professional

"I learnt a lot about services, issues people face, and also felt more proud of my borough" – Croydon resident.

The main reason stated for why respondents did not feel confident that the priorities outlined at the event will make a positive difference to health and social care services in Croydon were focused on finance.

"Not sure there is sufficient funding and feel this is a paper exercise only" – Croydon resident

“Great ideas but budget cuts and difficulties remain on how these suggestions are managed and funded” Croydon resident

“It seems like everything comes back down to money. That is a problem that is not currently being tackled” Health care professional

However, there was some optimism that there was enough momentum to progress some of the ideas discussed during the day.

“Because it has already started to work. I am totally confident that some of the joint ideas will become adopted in the future” - Stakeholder

“Some very good ideas came out of the discussions which will cost little or nothing to implement” - Stakeholder

“Everybody carefully thought about our contributions, and since Croydon is already such a caring borough I am sure everything will be taken into consideration” – Croydon resident

People said they wanted to see the following changes in Croydon:

(These comments are in addition to those presented as part of the “Here’s a thought” feedback)

- More funding in schools regarding children's social and mental health
- More self-referral services
- More cooperation between services. After hospital stay and surgery there is virtually no follow up or aftercare.
- Teach more on prescribing socialising to all GP's it will be beneficial to clients
- Use technology more and don't wait for the patient to come to you/you go to the patient
- It needs more online promotions - also more young people could volunteer in regards to hoping with mental health e.g. support groups, phone lines
- Allow vegans to be involved at all stages, to educate commissioners, decision-makers, providers and dispel myths and show the way sign post etc. We need to do more of the good stuff!
- Having tokens for gas/electricity (like food bank) to help to give to families who need help financially for heating.
- Yes - life coaching services for: young people and people wanting to get back into employment