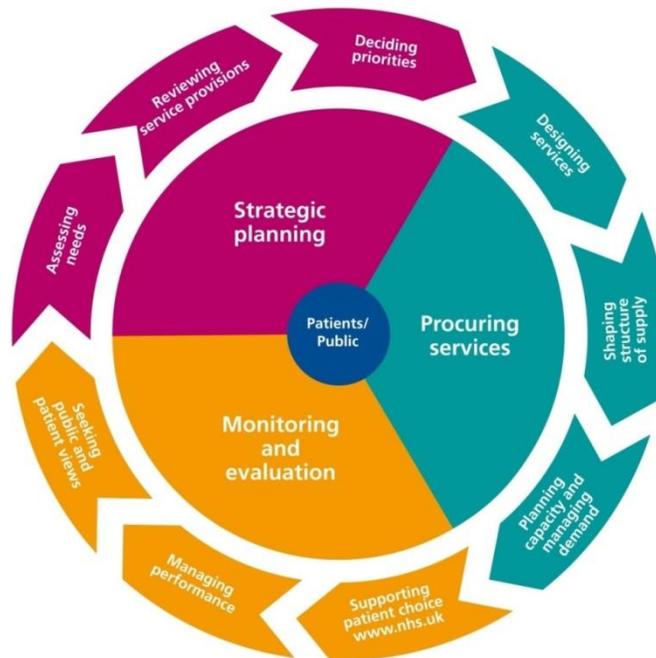


Engagement in CCG Delivery Plans Template

This template is designed to help you take into account all the elements of the commissioning cycle, as captured in the diagram below:



Courtesy of The NHS Information Centre for health and social care. Full diagram available at: www.ic.nhs.uk/commissioning

Name of Delivery Plan:	Primary Care (Living Well)
CCG Lead Officer:	Carolyn Ogle
Date of EEC Review:	5 December 2019 (last review was 6 June 2019)
Please give of summary of the engagement which has already been undertaken¹	
<p>Stakeholder engagement</p> <ul style="list-style-type: none"> • Monthly meetings with practice managers • Provider Engagement meetings • TARGET 4-6 sessions • Care Navigation Super Users Group • Primary Care Events • Locality Meetings • LMC/LPC/PCD monthly meetings 	

¹ This can be with staff, members of the public, service users, patients, carers or any other group of stakeholders

- Practice visits

Public engagement

- Practice merger Sheikh and Ransome practice
- The Village Group PPG
- PPG Forum
- Development of a new PPG toolkit, developed with several members of the public/PPG members
- Primary Care Communication and Engagement Strategy – built on the back of the last 18 months of engagement activities with patients and members of the public
- Primary Care branding and communications campaign – built on the back of feedback from key pieces of engagement activity
- Healthwatch support for primary care strategy engagement regarding access to primary medical care – local engagement with more than 1,500 patients
- National GP survey – with representation from patients registered at local practices in Doncaster

What, if anything, has changed as a result?

Stakeholder engagement

- Implementation plan for the estates strategy shared through locality meetings. Practice managers kept up to date on issues affecting them. Particular focus on registration issues which was an issue raised at practice visits.
- Practice visits with Director of Strategy and Delivery concluded practices felt this was beneficial and that they are being listened to by the senior team.
- Primary Care Information Group established to highlight variance between practices and improve quality, proactive care service specification delivery support to ensure quality of service provision and achievement of requirements. Data quality team and RDASH meetings with practices to address a number of IT issues face to face.
- Provider Engagement Group has been reinvigorated to focus earlier in the process about commissioning including direction of travel for commissioning enhanced services through PCNs and future practice visits in light of emerging quality and performance framework.
- LMC/LPC/PCD meetings have enabled discussion of areas of responsibility and unlocking barriers to specific issues. Separate meeting held with Local Optical Committee with planned care lead to ensure wider primary care focus. Also representation on Oral Health Advisory Group chaired by DMBC to make linkages with dental services.
- Primary care events have focused on CCG support to the development of primary care networks and have been positively evaluated to ensure that CCG priorities are understood and role PCNs can play particularly in integrated neighbourhood development

Public Engagement

- Largely has been to raise awareness of future direction of travel particularly about access and the move to online consultations plus strategic direction for primary care including PCNs, workforce and estates.
- The Ransome practice through its plans to merge with Dr Sheikh's practice have engaged with their patients to clarify the benefits of the merger, any differences in delivery and to provide assurances about the future of the practice this is part of the requirements to support the merger. This has reassured patients and given them the opportunity to ask questions about the merger and what this means for them. Two engagement events were held, in addition to posters, leaflets and a direct letter sent to each registered patient.
- The public facing communications campaign has resulted in a new brand for primary care, to be

used on presentations and letter heads and all materials. It has identified six campaign themes between October and March.

- Campaigns held so far have been on PCNs access and choice with a particular focus on extended access and promotion of the different roles in primary care which will support the delivery of the primary care strategy to ensure that patients think beyond the GP.
- The campaign has been built on the back of the last 18 months' worth of events and engagement activities, as well as focussing on feedback from the latest engagement activities led by Healthwatch Doncaster.
- So far, as a result of the campaigns, high level reach figures are as follows:
- More than 90,000 people reached on Facebook alone – people that have read the messages, liked, shared or commented
- Care Navigator video viewed in full (3 minutes) more than 12,000 times

How have these changes been communicated back to stakeholders?

Face to face, minutes of meetings along with follow up calls after meetings – stakeholders and public
Branding materials in surgeries. Videos on social media by care navigators – stakeholders and public

What further engagement is planned and when?

Further campaigns are planned on:

- self-care
- making the right choice/choosing the right service,
- digital options and primary care infrastructure
- making the best use of primary care buildings and estates.

The next primary care event is to be held in February which will recognise nursing staff through the nurse awards and there will be a pride of primary care award.

The event also is planned to showcase communication and engagement tools including the development of the PPG toolkit and the emerging move to trialing community participation groups – ensuring patients are at the heart of the shaping, designing, delivery and evaluation of services in all PCNs across Doncaster.

Do you have any further comments regarding your approach to engagement and involvement or how this can be improved?

The support of the communications and engagement team has been invaluable in ensuring the higher profile of primary care and its contribution to delivery of the local health agenda as well as providing support to practices and the Federation in ensuring communications and engagement has a focus.

Improvements still need to be made in a more timely manner in ensuring communications and engagement including equality and quality impact assessments are done in advance of presentation at either PCCC or Executive Committee.

Equality and Diversity

Which of the nine protected characteristics have you engaged with:

Age	<input checked="" type="checkbox"/>	Religion or Belief	<input checked="" type="checkbox"/>	Sexual Orientation	<input checked="" type="checkbox"/>
Race	<input checked="" type="checkbox"/>	Disability	<input checked="" type="checkbox"/>	Pregnancy and maternity	<input checked="" type="checkbox"/>
Sex	<input checked="" type="checkbox"/>	Gender Reassignment	<input checked="" type="checkbox"/>	Marriage and Civil Partnership	<input checked="" type="checkbox"/>

What type of engagement will you undertake to ensure all protected characteristics are engaged:

Engagement activities over the last 6 months have been targeted to ensure that we meet the needs and requirements of all aspects of our local communities in Doncaster. The recent Healthwatch survey and engagement activities ensured representation from all protected groups – including shares of the survey with virtual networks, as well as attendance at face to face forums such as focus groups, Health Ambassadors network and PPG network.

All campaign materials can be available in alternative formats should people request.

Health Inequalities

Have you utilised the a) 'Population Health Management Heat Map'	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
NHS RightCare Pack Health Inequalities	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

Illustrate your benchmarking against the Heat Map and NHS RightCare Pack.

As part of service development and review, the Heat Map and NHS RightCare pack is used as a standard to ensure our services meet the needs of local communities in Doncaster.

Earlier this year, a new service was set up for some of our most vulnerable people in Doncaster – those that are homeless or sleep rough. A new drop in centre was established and rolled out at Changing Lives Doncaster meaning that people, registered or not, can access health and care services in an environment they feel safe in.

What type of engagement involved members of the communities that face health inequalities?

- Face to face – with patients and individuals who use the centre at Changing Lives – a shared venture with Primary Care Doncaster
- Healthwatch engagement survey for primary care – face to face and virtual

What is the outcome of this engagement and what improvements have been made to reduce health inequalities?

Development of a new health facility for some of our most vulnerable people
Development of a new primary care campaign with materials available in alternative formats
Using new channels – such as Facebook advertising, which is adaptable to ensure the language can be changed to suit different audiences.