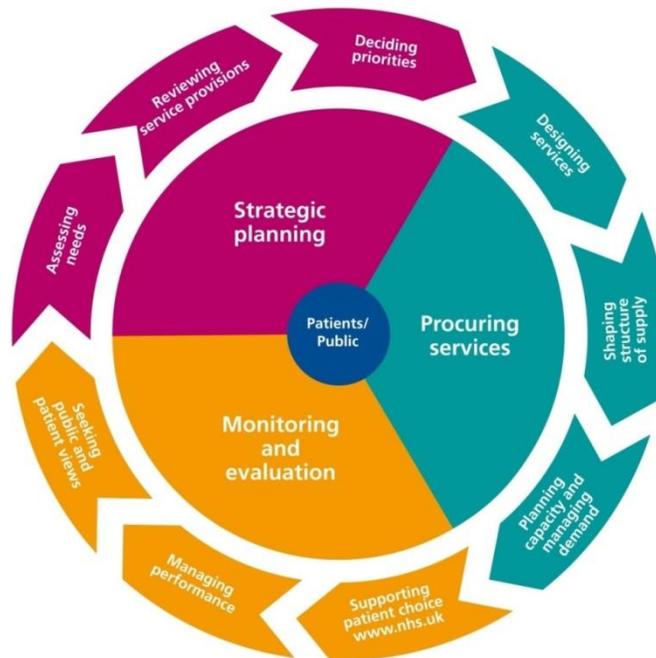


## Engagement in CCG Delivery Plans Template

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](http://www.ic.nhs.uk/commissioning)

<b>Name of Delivery Plan:</b>	
<b>CCG Lead Officer:</b>	Amanda Needham
<b>Date of EEC Review:</b>	6 August 2020
<b>Please give of summary of the engagement which has already been undertaken<sup>1</sup></b>	
<p><b>Implementation of the Enhanced Health in Care Home (EHCH) framework;</b></p> <p>Virtual multi-disciplinary team (MDT) meeting held 24/7/20. (case study video)</p> <p>Present: CCG, RDaSH and The Laurels Care Home Manager.</p> <p>Propose of the meeting was to discuss phase one of the roll out of the Enhance Health in Care Home framework and the MDT approach to improving resident care, enhanced support for care homes and to reduce duplication in service delivery. Key talking points for the MDT were;</p>	

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

- 'What's Working Well?
- Impact on resident care
- Review and discuss lessons learnt
- Future plans

### **What has been the impact of this engagement?**

- Opportunity to review the implementation of the EHCH and analyse impact of MDT working on resident care and care planning.
- Integrated approach to how we shape the MDT's going forward into phase two and three
- Improved resident care and care plans reviewed by MDT not in isolation.
- Care plans are now more robust and consistent approach to including proactive care, managing crisis and EOL
- Relationships between the MDT attendees has been strengthened and the MDT model has created a community of learning and support for care homes

### **What, if anything, has changed as a result?**

- Care plan reviews and home rounds now include multi-agency and multi-disciplinary teams which gives a holistic view of the resident's needs.
- Previous model was at risk of being task focused and reviews did not always apply a strength based proactive approach.
- Care planning and reviews were reactive particularly during a crisis for the resident. Agencies were invited into care plan reviews and home rounds on an adhoc basis, as and when needed.
- The move to MDT has seen an increase in integrated working which has reduced duplication
- Lessons learnt have been fed back to the other localities to improve the delivery of the MDT's in other areas

### **How have these changes been communicated back to stakeholders?**

- Stakeholders took part in the MDT meeting and have fed-back the findings to their teams
- Case study video will be shared with other localities and at PCN Directors meeting prior to their phased roll out
- Impact on resident care has been shared with PCN Directors
- Case study shared with Deputy Chief Nurse and Quality Lead for Care Homes

### **What further engagement is planned and when?**

- Process to be repeated once the EHCH is embedded October 2020
- Resident voice to be capture in the MDT and the impact of this investigated at the October 2020 engagement exercise

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

- Further review of the impact of MDT's to include resident fed back and also GP's
- As a follow up to the meeting once the performance data, and impact from residents and GP's is

available this will be shared with the MDT's to triangulate and further analyse the impact of MDT working

**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 type="checkbox"/>
Race	<input checked="" type="checkbox"/>	Disability	<input checked="" type="checkbox"/>	Pregnancy and maternity	<input type="checkbox"/>
Sex	<input checked="" type="checkbox"/>	Gender Reassignment	<input type="checkbox"/>	Marriage and Civil Partnership	<input type="checkbox"/>

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

We will encourage all residents wherever possible to share their views on the impact of MDT working and the EHCH implementation

**Health Inequalities**

Have you utilised any intelligence on health inequalities? If yes please state:-

Gap analysis exercise undertaken to investigate the consistency of home rounds, care plan reviewing and MDT approach to health care in care homes across Doncaster

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

n/a

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

n/a

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

The fed-back from the engagement meeting with partners will ensure the good practice from the first phase of the roll out of the MDT approach and implementation of the EHCH framework will shape phases two and three and this will reduce the previous inequalities and deliver a consistent model to care plan reviews and MDT working across the localities.

Has complaints / experience data been used in this commissioning?

Yes

No

If Yes please provide a reference number