



Sunderland
Clinical Commissioning Group

ANNUAL INVOLVEMENT AND ENGAGEMENT REPORT 2018-19

Involving People – Activity, Project and Action Plan for Sunderland CCG



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1. Introduction

This is NHS Sunderland Clinical Commissioning Group (the CCG) Annual Involvement and Engagement Report 2018/19. It details the how the CCG involved people, patients, carers, stakeholders, and the Voluntary Community Sector (VCS) between April 2018 and March 2019.

The report is structured around the following domains identified in NHS England publication: Patient and public participation in commissioning health and care (April 2017):

- Involve the public in governance;
- Explain public involvement in commissioning plans/business plans;
- Demonstrate public involvement in annual reports;
- Promote and publicise public involvement;
- Access, plan and take action to involve;
- Feedback and evaluate;
- Implement assurance and improvement systems;
- Advance equality and reduce health inequalities;
- Provide support for effective involvement;
- Hold providers to account.

These domains formed the basis for the CCG's 'Involving People Project and Action Plan' (IPPAP). Each domain includes a series of the CCG's specific actions, which are reported upon regularly. These actions have been designed in order to ensure a robust strategy, planning, and accountability in order to provide focus on priority areas.

1.1 Involving People – Accountability and meetings

The IPPAP is reviewed by the Communication and Engagement steering group (CESG) and to the Quality and Safety Committee (QSC) to ensure progress is being made against each of the identified actions.

Through the QSC, the report is also taken to Governing Body (GB) for assurance (<https://www.sunderlandccg.nhs.uk/corporate/governance/>). The dates the IPPAP have been taken to these meetings are included in the below table:

CESG	QSC	GB
<ul style="list-style-type: none">• 9 August 2018• 29 August 2018• 10 October 2018• 22 November 2018• 9 January 2019	<ul style="list-style-type: none">• 12 June 2018• 7 August 2018• 13 November 2018• 11 December 2018• 12 February 2019	<ul style="list-style-type: none">• 24 July 2018• 25 September 2018• 27 November 2018• 29 January 2019• 26 March 2019

1.2 Legal and policy context

1.2.1 Communications and engagement objectives

- To meet NHS legal duties for engagement, equality duties and best practice engagement and communications;
- To best understand patient experience and service needs from a patient perspective.

1.2.2 Legal duties

Section 242 of the NHS Act 2006 (as amended by the Act 2012) requires NHS organisations to involve and consult patients and the public in:

- The planning and provision of services
- The development and consideration of proposals for changes in the way services are provided

Section 244 of the NHS Act 2006 requires NHS organisations to consult relevant Overview and Scrutiny Committees (OSC) on any proposals for a substantial development of the health service in the area of the Local Authority, or a substantial variation in the provision of services.

1.2.3 The NHS Constitution

NHS Constitution gives the following rights and pledges to patients:

“You have the right to be involved, directly or through representatives, in the planning of healthcare services, the development and consideration of proposals for changes in the way those services are provided, and in decisions to be made affecting the operation of those services.”

“The NHS commits to provide convenient, easy access to services within the waiting times set out in the Handbook to the NHS Constitution (pledge)”;

“The NHS commits to make decisions in a clear and transparent way, so that patients and the public can understand how services are planned and delivered (pledge)”

“You have the right to receive care and treatment that is appropriate to you, meets your needs and reflects your preferences.”

1.2.4 Equality and Diversity

Information will be provided in different formats and languages if requested. NECS will liaise with local advocates and groups as appropriate.

As part of the engagement activity, respondents will be asked to provide their demographic information, including: gender; whether this was the gender assigned at birth, sexual orientation; age; postcode; and ethnicity.

1.3 Structure of the Annual Involvement and Engagement Report

This report will include an annual summary of information presented through the IPPAP reports. This will be broken down into the following Involving People sections:

- Regional Involvement and Engagement Activities;
- Sunderland Activity Updates;
- Sunderland Project updates;
- Sunderland Action plan updates.

A list of abbreviations are included at the end of this report. This report will also direct people to further information and reports on the CCG and partner organisation website. This report will also direct the reader to other sections within the report.

If you require this document in another format such as large print, easy-read, braille, audio, or a different language please contact NHS Sunderland CCG on 0191 5128484 or email SUNCCG.sccg@nhs.net

2. Regional Involvement and Engagement Activity

2.1 Integrated care system for the North East and Cumbria

A regional Communications and Engagement delivery group was established to support the co-ordination of communications with staff and partners around the developing Integrated Care System and associated work programmes. This group has representation from NHS communications leads from providers, NHS England, and commissioners via the North of England Commissioning Support.

A network of communications and patient and public involvement leads from partner organisations (NHS providers, CCGs, NHSE, NECS, local authorities) in the North East and North Cumbria has been meeting regularly throughout the development and delivery of the regional transformation agenda to ensure access to all existing communication and engagement processes across the area and to rapidly address any issues that may arise.

NHS communications teams are now working as a network, and with local authority teams, to engage in dialogue about the future NHS with stakeholders, staff and the public. The shared ambition is to celebrate the wider success of the NHS across the North East and North Cumbria – focussing on some of the excellent work already being delivered including innovation with new models of care, digital transformation (telehealth and telecare and other), integration, primary care hubs, and community services.

Partners include 12 Clinical Commissioning Groups, 12 unitary local authorities, 2 county councils with districts and 13 provider trusts, NHS England, NHS Improvement, Health Education England, Public Health England, and North of England Commissioning Support.

2.2 PPI / PPV network in the North East and North Cumbria

Over 40 NHS staff working in patient and public engagement, involvement and patient experience attended a new network for the region in November 2018, January 2019, and March 2019. The event aimed to develop how professionals can work more closely together in line with the developing ICS. This network is for Patient and Public Involvement (PPI) and Patient and Public Voice (PPV). Areas covered at this network included:

- Patient experience for both Trusts and Commissioners
- Commissioner's Improvement and assessment framework (IAF) (in relation to PPI / PPV)
- Developing a vision for PPI / PPV for our emerging ICS for the region

2.3 Non-executive and lay member community network for the North East and North Cumbria

Work began in 2018 to establish a non-executive and lay-member community network with representation from providers and CCGs across the North East and North Cumbria. This was following a successful funding bid to NHS Improvement and NHSE.

The network aims to:

- To strengthen the patient voice across commissioner and provider organisations
- To develop change agents who will influence the wider system on tackling health inequalities
- To understand and influence system change/transformation and develop a critical friend role to ensure we adopt a strategic approach to engagement

An action plan was developed in 2019 included a facilitated joint provider / commissioner workshop to gain consensus and to agree the function, purpose and form of the network.

3. Sunderland Activity updates

3.1 Improvement Assessment Framework

3.1.1 National context

In April 2017 NHS England published revised statutory guidance for Clinical Commissioning Groups (CCGs) and NHS England (NHSE) commissioners on [Patient and Public Participation in Commissioning Health and Care](#). It sets out ten key actions and links to the [Guide to annual reporting on the legal duty to involve patients and the public in commissioning](#).

Following this, NHSE developed a new approach to the assessment of engagement as part of its statutory annual assessment of CCG performance via the improvement and assessment framework (IAF) process.

This assessment relates to the following five domains, which are identified in NHSE publication: Patient and public participation in commissioning health and care (April 2017). These are the same domains which Sunderland CCG structures the Involving People Project and Action Plan (IPPAP) report on:

Domain	NHSE– Patient and Public Participation in commissioning health and care Domain	No. of criteria for assessment
A	1. Involve the public in governance 7. Implement assurance and improvement systems 10. Hold providers to account	4 good 4 outstanding
B	3. Demonstrate public involvement in Annual Reports	5 good 1 outstanding
C	2. Explain public involvement in commissioning plans 4. Promote and publicise public involvement 5. Assess, plan and take action to involve 9. Provide support for effective engagement	7 good 4 outstanding
D	6. Feedback and evaluate	3 good 3 outstanding
E	8. Advance equality and reduce health inequality	4 good 3 outstanding

3.1.2 2017/18 IAF

The assessment in 2017/18 was a desktop review of CCG corporate annual reports, websites and documents and information published on their websites. The initial annual assessments took place during July 2017 and were based on the content of 2016/17 annual reports and information available on the website at the time of the assessment.

The assessments were undertaken by the national NHSE Public Participation team and outcome highlighted to regional and local office colleagues.

All CCGs were RAG (Red, Amber, Green) rated following this assessment and the outcome was published by NHSE in autumn 2017 and formed part of the 2017/18 annual CCG assessment.

For the 2017/18 assessment, Sunderland CCG was awarded a 'requires improvement' (amber) rating.

3.1.3 2018/19 IAF

Following a review of the 2017/18 process, the national advisory group highlighted a need to refine the assessment approach, but the framework, criteria and methodology would remain the same as in 2017/18. This enabled CCG's to benchmark themselves from the previous years' assessment.

However rather than the national team undertaking a website assessment, CCGs themselves were required to undertake a self-assessment as opposed to the national team undertaking a desktop review. The self-assessment allowed CCGs to submit up to three links to evidence for each individual criterion. Evidence which could be included in the assessment included:

- [2017 / 18 Annual report](#)
- Evidence that relates to documents produced before the assessment period (for example, Constitutions and Engagement Strategies) providing they are both relevant and relate to the 2018/19 financial year.
- All other evidence must be published after 1 April 2018

3.1.4 Sunderland CCG approach for the 2018/19 IAF

For the 2018/19 assessment, Sunderland CCG set up a working group to identify and challenge evidence for each criterion. Evidence was shared with the following groups between November 2018 and March 2019

- Equality and Diversity group
- Lay members
- Communications and Engagement Steering Group (CESG)
- Quality and Safety Committee (QSC)
- Governing Body (GB)

Voluntary Community Sector Organisations (VCSOs) were also contacted and invited to evaluate the evidence identified. In addition, conversations were held with South Tyneside CCG in relation to [Path to Excellence](#) evidence.

A large volume of work went into redesigning the website for Sunderland CCG, including assessing documents, text, and the accessibility of information on the website (see [3.2 Website development](#)).

3.2 Website development

Following on from the 2017/18 IAF Amber rating assessment, Sunderland CCG established a website working group to discuss what improvements were needed for the CCG's website. The CCG took the opportunity to review its website in detail to ensure relevant and appropriate information was included and easily accessible for members of the public, and for future IAF assessments.

Three new website designs were circulated to CCG and North of England Commissioning Support Unit (NECSU) staff for their views and feedback. Following feedback, a new design was developed and circulated to CCG staff, the Equality and Diversity Group, Healthnet and Healthwatch. Taking into account feedback from these groups, the website design was finalised.

Testing of the new website took place in October 2018 with VCSOs, General Practitioners (GPs), service users and members of the public. People were asked to test the new website and provide further feedback. This was mostly positive and comments around the functionality, and the quality of new search engine functions. The feedback was taken on board and the relevant changes implemented.

The new website went live in January 2019: www.sunderlandccg.nhs.uk.

Further engagement continued on the new website with CCG staff, the Equality and Diversity Group, VCSOs, and members of the public. This engagement collects people's thoughts and views on the new website and identifies any further improvements which may be needed.

A webpage was created 'New Website – you said, we did', which includes contact details for people to let us know their thoughts on the new website: <https://www.sunderlandccg.nhs.uk/get-involved/other-ways-to-get-involved/ccg-new-website-re-development-you-said-we-did/>. This was further promoted through all staff emails, emails to stakeholders and VCSOs, the Equality and Diversity Group, MyNHS, and through social media throughout.

3.3 Equality and Diversity Group

The CCG works closely with partners and people who have an interest in equality, diversity, and inclusion issues, and who are able to represent the views of different communities in Sunderland. In 2018, the Equality and Diversity group met on the following dates, and discussed the following agenda items:

Meeting date	Agenda items
2 May 2018	<ul style="list-style-type: none">• Action log• Equality and Diversity objectives workshop• Website feedback• Any other business
1 August 2018	<ul style="list-style-type: none">• Action log• Urgent care consultation• Any other business
7 November 2018	<ul style="list-style-type: none">• Action log• Urgent care criteria• IAF• Social isolation and loneliness research• Engaging new members for the Equality and Diversity group• Any other business
6 February 2019	<ul style="list-style-type: none">• Action log• Terms of reference• Urgent care outcome• IAF• Sunderland CCG new website• Website compliance template for Equality and Diversity• Equality action plan• Any other business

At the February 2019 meeting, the Equality and Diversity group agreed to change their name to the 'Equality, Diversity, and Inclusion Network' (EDIN). The Network will now be more inclusive and accessible to members, and include a virtual network through the use of email and private social media pages. This will enable VCSO and partner organisations to be part of EDIN, without physically attending meetings.

In order to reflect these changes, the [Terms of Reference](#) was updated.

More information about EDIN can be found by going to:

<https://www.sunderlandccg.nhs.uk/corporate/equality-and-diversity/equality-diversity-and-inclusion-network/>

3.4 Sunderland Health Forum

3.4.1 The Sunderland Health Forum prior to 2018

The Sunderland Health Forum (SHF) is a public meeting where local residents from Sunderland can gather to listen and share their interests in health. Prior to 2018, the SHF were held four times a year with both daytime and evening meetings (8 meetings annually), using the same agenda to cater to different audiences. The meetings lasted two hours and were structured sessions with presentations and some engagement or interactive activities with attendees.

Sunderland CCG aimed to use these public meetings as a time to share information on what health initiatives are being developed and to gather public opinion in order to help improve the delivery of service changes.

Although attendance at the SHF increased in 2017 / 18, attendance was predominantly dominated by VCSOs and people from stakeholder organisations. The SHF struggled to attract members of the general public to attend.

The IPPAP and former Patient Public Involvement (PPI) reports identified attendance at the SHF as a risk, and as not being an effective vehicle for open public involvement. It was felt the two-hour structured sessions were not enticing for members of the public to attend.

3.4.2 Sunderland Health Forum – Engagement

Sunderland CCG wanted to do some public engagement to find out what members of the public wanted through a public event. An online survey was created which asked people to tell us when they would be interested in attending a public event, what they would like to do at these events, and what they would like to find out about. The survey was open between August and September 2018, and in total 53 people responded. A results report was published on Sunderland CCG website: [Sunderland Health Events – Public feedback on options for future events.](#)

3.4.3 Sunderland Health Events – 2019/20

Following on from the public engagement activity, an options paper for Sunderland Health Events was developed. The CESG identified their preferred options, which was agreed at QSC on 12 February 2019. For 2019/20, Sunderland CCG will proceed as follows:

- All Sunderland CCG public events to be branded as Sunderland Health Events (SHE).
- **A stall at the Active Sunderland Big Community Sports Festival:** Sunderland Council hold this event annually, on five Wednesdays during the summer holiday period (one in each of the five localities), with a sixth main event. The event would be used to disseminate CCG information, to distribute

surveys, to promote CCG engagement / consultation activities, and for interactive engagement activities (e.g. token voting).

- **A stand-alone drop-in indoor event in Central Sunderland:** A four hour drop-in style event will be held in October 2019, on a weekday, between 3 – 7pm, to enable stakeholders and members of the public to attend. The event will include presentations, leaflets, information, and signposting, healthy activities, and quick engagement activities.

3.4.4 SHE during 2018/19

Sunderland CCG substantially engages with residents, patients, carers, and stakeholders, and reports upon activities through the IPPAP to the CESG, QSC, and to GB. For 2018/19, the following SHE took place:

- [Sunderland Urgent Care Events](#)
 - Launch Event, 9 May 2018
 - Washington day-time event, 15 May 2018
 - Coalfields day-time event, 24 May 2018
 - Sunderland West day-time event, 7 June 2018
 - Sunderland North day-time event, 13 June 2018
 - Sunderland East day-time event, 18 June 2018
 - Saturday event, 23 June 2018
 - Durham Event, 2 July 2018
 - Washington evening event, 12 July 2018
 - South Tyneside event, 16 July 2018
 - Sunderland West evening event, 19 July 2018
 - Sunderland East evening event, 7 August 2018
 - Coalfields evening event, 8 August 2018
 - Sunderland North evening event, 28 August 2018
- [Sunderland Urgent Care, Travel and Transport events](#)
 - 23 May 2018
 - 6 August 2018
- Sunderland Urgent Care Online events
 - 21 June 2018
 - 28 June 2018
- [Sunderland Urgent Care Feedback Events](#)
 - Monday 22 October
 - Tuesday 23 October
- Learning disability event, 21 May 2018
- MCP Alliance market engagement event, 5 June 2018
- Maternity event, 29 September 2018
- Digital technologies – March 2019

3.5 Communications and engagement strategy

An updated communications and engagement strategy was produced in 2018, which combines the previously separate engagement and communication strategies into one document. The plan was signed off in March 2019, and can be found here:

<https://www.sunderlandccg.nhs.uk/wp-content/uploads/2019/04/Communications-and-engagement-strategy-2019-2020.pdf>.

This strategy is a high level strategy which ensures Sunderland CCG has a clear plan in place to meet legal duties to engage and consult the public and pledges set out in the NHS constitution. Individual consultation and engagement projects undertaken by the CCG will still have separate individual tailored plans produced

4. Sunderland Project Updates

4.1 All Together Better Alliance

<https://www.sunderlandccg.nhs.uk/get-involved/multi-specialty-community-provider-mcp-model/engagement-activity/>

www.atbsunderland.org.uk.

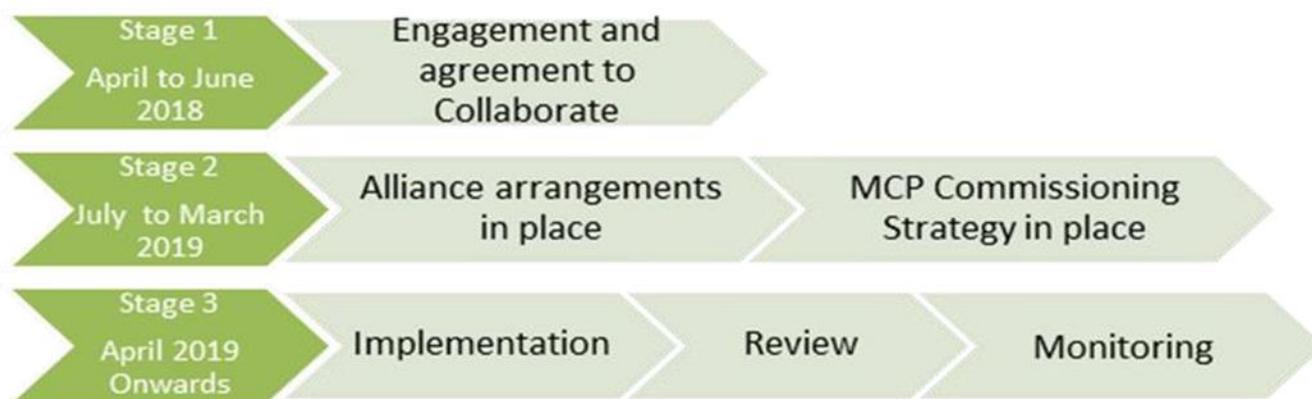
As part of NHS England's (NHSE) new models of care programme, All Together Better (ATB) has played a key role in making services more integrated, person-centred and efficient. In 2015 Sunderland was awarded 'vanguard status' which provided additional funding to deliver the Sunderland vision – to transform care out of hospital through increased integration of services and more person-centred care. The ATB Sunderland vanguard programme ran between 2015 and December 2017.

Between November and December 2017, engagement activity took place, which focused on gathering feedback from the public, patients, carers, and stakeholders representing the public on plans presented in the prospectus for a Multispecialty Community Provider (MCP).

In February 2018 NHS Sunderland Clinical commissioning Group (CCG) made the decision to secure an MCP collaboration business model, via an alliance approach, with the aim to have this in place by April 2019. The intention is for this approach to focus on "person centred proactive and coordinated care which will support appropriate use of health and care services, will improve patient and carer experience and outcomes, ensuring people will live longer with better quality of life".

Following the CCG Governing Body (GB) decision to secure the MCP using an alliance approach, a Shadow Board made up of the founding partners of ATB has provided the input and ideas on the development of the alliance model for Sunderland. The membership includes representation from: Sunderland CCG; Sunderland City Council; City Hospitals Sunderland Foundation Trust (CHSFT); South Tyneside Foundation Trust (STFT); Northumberland Tyne and Wear Foundation Trust (NTWFT); and Sunderland General Practice Alliance.

Since March 2018 the MCP Shadow Board has been overseeing the development of the alliance approach, whilst undertaking engagement with wider stakeholders throughout the process. The Board has proposed the alliance be formally known as the 'All Together Better Alliance' (ATBA). The development and implementation of the ATBA arrangements is taking a phased approach over three key stages:



The CCG has undertaken significant engagement work with contracted and non-contracted providers in order to collect thoughts and opinion on the proposals. The views received are overwhelmingly supportive of the approach, influencing and shaping the proposed governance of the ATBA.

Following an engagement event in June 2018 the MCP Shadow Board members developed outline proposals for the ATBA. The proposals commit providers into the alliance way of working, supporting collaboration between all stakeholders, ensuring clinical leadership at all levels, with quality and safety at the heart of transformation, whilst also delivering sustainability.

The range of services included under the ATBA are categorised as ‘Out of Hospital Services’, and include: Mental Health; Learning disabilities; Autism, Urgent care; Intermediate Care; Urgent Care; Enhanced primary and community care; and General Practice.

4.1 The Path to Excellence

<https://pathtoexcellence.org.uk>

Sunderland CCG has continued the partnership with NHS South Tyneside CCG, STFT, and CHSFT on the Path to Excellence programme, which is a five-year transformation programme of hospital healthcare provision across South Tyneside and Sunderland.

The below illustration provides a timeline for the Path to Excellence programme since it began in September 2016.

September 2016	<ul style="list-style-type: none"> Engagement with stakeholders starts
October 2016 - February 2017	<ul style="list-style-type: none"> Phase one Listening and publication of an issues document
February - June 2017	<ul style="list-style-type: none"> Solutions development
July - October 2017	<ul style="list-style-type: none"> Phase one consultation
December 2017 - January 2018	<ul style="list-style-type: none"> Phase one consultation feedback
February 2018	<ul style="list-style-type: none"> Decision making
November 2017 - April 2019	<ul style="list-style-type: none"> Phase two Listening and solutions development
July 2018	<ul style="list-style-type: none"> Draft case for change issues document published
September 2018 - February 2019	<ul style="list-style-type: none"> Continued listening and stakeholder involvement
March 2019	<ul style="list-style-type: none"> Updated draft case for change and issues document published
Late Summer 2019	<ul style="list-style-type: none"> Phase 2 consultation

4.1.1 Phase One

<https://pathtoexcellence.org.uk/phase-1-archived-content/>

The formal consultation for Phase One of the Path to Excellence programme took place from 5 July until 15 October 2017. The consultation gathered public views around the different ways NHS services could be arranged in South Tyneside and Sunderland, looking specifically at:

- Stroke services, specifically hospital (acute) care and hospital-based rehabilitation services;
- Maternity services (obstetrics) covering hospital based birthing facilities;
- Women's healthcare (gynaecology) services covering inpatient surgery where patients would need an overnight hospital stay;
- Children and young people's healthcare services (urgent and emergency paediatrics).

Following on from the Phase One public consultation, in February 2018 at a meeting in common of Sunderland CCG and South Tyneside CCG, the following decision was made about the three key vulnerable hospital services:

- All acute strokes are directed to Sunderland Royal Hospital, with the consolidation of all inpatient stroke care at Sunderland (running temporarily since December 2016 due to service vulnerability);
- Development of a free-standing midwifery-led unit (FMLU), known as a birthing centre, at South Tyneside District Hospital
- Medically-led obstetric unit at Sunderland Royal Hospital
- Gynaecology care requiring an overnight hospital stay carried out at Sunderland Royal Hospital
- Care for minor gynaecology conditions, including day case surgery and out-patients' clinics, will continue at South Tyneside District Hospital
- The development of a nurse-led paediatric minor injury and illness facility at South Tyneside District Hospital – open 8am to 10pm – and 24/7 paediatric emergency department at Sunderland Royal as the most sustainable long-term model (option 2)*

* As it will take a period of time to develop a nurse-led paediatric minor injury and illness facility, implementation in the short-term includes the development of a daytime paediatric emergency department at South Tyneside District Hospital and 24/7 paediatric emergency department at Sunderland Royal Hospital (option 1).

4.1.2 Phase two

<https://pathtoexcellence.org.uk/phase-two/>

The Path to Excellence Phase Two is the final part of the clinical transformation of local hospital services, and involves the following key areas of hospital-based care and thinking about potential solutions for the future:

- Emergency care and acute medicine – the care provided when patients arrive at the Emergency Department or need emergency admission to hospital
- Emergency surgery – the care provided when patients are admitted to hospital as an emergency and require an immediate operation

- Planned care (including surgery and outpatients) – the care provided when patients are referred to hospital by their GP for a test, scan, treatment or operation.

A number of engagement activities were held in 2018 / 19 for this phase:

<p>December 2017 - January 2018 - Staff survey: A survey was designed to capture the views from frontline staff in South Tyneside and Sunderland on the challenges and difficulties they currently face in everyday service delivery and to seek their ideas on how to further improve the quality of patient care. In total, 710 members of staff responded to the questionnaire, with 580 completing the majority of the questionnaire.</p>
<p>March 2018 – staff engagement workshops: Staff engagement workshops took place over three days to ask staff what they thought were the important issues around making improvements to services, and what were their hopes and aspirations for the programme. In total, 198 staff participated in the three events.</p>
<p>May – June 2018 – Patient experience surveys: Two patient experience surveys were designed to help inform the clinical service review process for Phase Two of Path to Excellence. The surveys were designed to capture the experiences of individuals who had accessed emergency care services or planned surgery and outpatient care at either STFT or CHSFT within the last two years. Overall, 1020 responses were received to the two surveys.</p>
<p>July 2018 – staff engagement workshops: Staff engagement workshops took place over three days where staff carried out an evaluation appraisal of a long list of ideas against the hurdle criteria. In total, 200 members of staff participated in the three events.</p>
<p>September 2018 - Thematic review for evaluation criteria: a thematic review was undertaken of all insight reports produced following engagement with members of the public, patients, staff and stakeholders. This activity identified a list of general themes that people said they want from future services.</p>
<p>September – October 2018 – Draft case for change engagement survey and roadshow: Following publication of the Case for Change, a ten week period of public engagement took place from 13 October to 21 December 2018. During this ten week period, engagement teams went out in the community to speak to patients using local hospitals and healthcare services as well as attending a series of key stakeholder meetings. Individuals were invited to complete a short survey designed to capture their thoughts and opinion. In total, 1030 people completed the survey.</p>
<p>December 2018 – Public listening panel: Four organisations / interest groups presented evidence which was broadcasted live on social media, contributing to the Path to Excellence programme. These organisations / interest groups include: South Tyneside ward councillor, Sunderland carers centre, Save South Tyneside Hospital and Keep our NHS Public Sunderland Campaigners; and Healthwatch South Tyneside. In total, there were 1,700 views through social media with 35 shares.</p>
<p>December 2018 - March 2019 – Getting views on draft desirable evaluation criteria:</p>

Staff and stakeholders were invited to share their thoughts on the draft desirable evaluation criteria identified through the September 2018 thematic review through an online survey and stakeholder events.

March 2019 - Drop in Roadshow: Engagement actively sought the views from staff, patient groups and wider stakeholders on what is important to local people when accessing hospital care. Working together with Healthwatch south Tyneside and Healthwatch Sunderland, 28 roadshow events were held at various locations, including shopping centres, supermarkets, primary care centres and hospital outpatients across the two areas.

4.2 Urgent Care

<https://www.sunderlandccg.nhs.uk/get-involved/urgent-care-services/>

4.2.1 Background to consultation

NHS Sunderland CCG public consultation on urgent care took place between 9 May and 2 September 2018. The proposal presented for consultation was:

- **Changing where people would go for minor illnesses and injuries:** The urgent care centres (walk-in centres) at Bunny Hill Primary Care Centre, Houghton Primary Care Centre and Washington Primary Care Centre will be replaced with better access to GP appointments, predominantly for minor illnesses.
- **Introduction of an Urgent Treatment Centre:** The urgent care centre at Pallion Health Centre will change to an Urgent Treatment Centre in-line with national policy. This will focus on minor injuries.
- **Changing the way people get urgent GP appointments:** Groups of GP practices are working together to provide the Sunderland Extended Access Service to offer urgent appointments on evenings, weekends, and bank holidays currently in five locations across the city.
- **A new improved integrated NHS 111 service:** An improved NHS 111 service starting in the North East in October 2018. Patients can use NHS 111 to get advice over the phone from a GP, nurse, consultant, or other healthcare professional. If needed, individuals may be booked an appointment with the most appropriate service.
- **Supporting more people to look after themselves:** By giving people information about their own healthcare needs, this will help people develop the knowledge, skills, and confidence to manage minor healthcare issues themselves.
- **Improved Recovery at Home service:** housebound patients and those very vulnerable patients with complex needs will be supported to remain at home. The Recovery at Home team responds quickly to provide intensive support to those who need more help while they are getting back to normal after a short-term illness or injury in their own home, a care home or on discharge from hospital. The improved

Recovery at Home service will provide some visits on behalf of practices. This will increase GP capacity as it will free up GPs to provide additional appointments to patients.

The CCG used five key principles to develop the proposal. These principles were developed to meet national guidance, taking account of feedback from the public and working with their key partners, and were:

1. Be safe, sustainable and provide responsive, high quality care.
2. Help people to increase self-care (looking after yourself) through access to appropriate clinical advice.
3. Ensure appropriate access to treatment as close to home as possible.
4. Simplify access by improving integration (making sure everything is joined up) across health and social care and reducing duplication of services.
5. Meet national requirements (have an Urgent Treatment Centre, use the improved NHS 111 service, and have GP appointments available evenings and weekends).

The CCG also stated that the proposal meets the national requirements set by NHSE and it has been reviewed by doctors, nurses, and healthcare professionals in Sunderland.

4.2.2 VCSO training event

In February 2018, NHS Sunderland CCG held a training and feedback event for the Voluntary Community Sector (VCS). The CCG held this event to discuss the urgent care consultation, and to gather input on any suggestions the CCG need to take into account when involving Voluntary Community Sector Organisations (VCSOs) in taking part in consultation activities. NHS Sunderland CCG wanted to co-create the process of engaging with VCSO service users.

As a result of this co-creation event, NHS Sunderland CCG implemented the following changes when working with VCSOs to collect service users thoughts for the consultation:

- Provision of easy read equality and diversity questions.
- Developing materials and templates to help collect the views from people who are not able to take part in group discussions.
- Increasing the financial contribution made by NHS Sunderland CCG to VCSOs, to help cover the costs incurred for holding focus groups or interviews.
- Making sure VCSOs receive their financial contribution in a timely manner.
- Printing materials on behalf of VCSOs to reduce the costs for them.
- Offering to run focus groups and interviews on behalf of VCSOs.
- Offering training and support for VCSOs to hold their own focus groups or interviews.

4.2.3 Responses to the consultation

A number of different methods were used as part of the consultation. These included:

- A consultation survey which was completed as a face-to-face street survey with a demographically representative sample of Sunderland residents (n=406). This survey used a slight variant of the standard consultation questionnaire to reflect the methodology.
- A consultation survey (n=1,309) which was available electronically or in hard copy. As part of this, three events at local supermarket were conducted to disseminate information about the consultation and encourage survey completions (98 of the online / paper survey completions were generated through these events).
- Five focus groups in each of the CCG localities with 32 participants, broadly reflecting the population characteristics of the localities.
- Twenty-four focus groups through VCSOs with 175 people from protected characteristic groups and those most likely to be affected by the proposal. In order to ensure the consultation engaged with as many protected characteristic groups as possible, an independent contractor was commissioned to carry out additional focus groups with VCSOs. The included extra focus groups with the Lesbian, Gay, Bisexual, and Transgender (LGBT) community, maternity groups, and young people.
- Sixteen public consultation events with 173 attendees.
- Two dedicated online question and answer events, which reached 1,971 people at the live sessions.
- Social media engagement, with a reach¹ of 653,000.
- An online survey with 67 staff.
- Stakeholder submissions in written or verbal form from 57 contacts.
- Other responses, such as petitions.

4.2.4 Feedback session and accessibility

<https://www.sunderlandccg.nhs.uk/get-involved/urgent-care-services/feedback-events/>

NHS Sunderland CCG held two feedback sessions in October, where they shared the draft feedback report with members of the public and stakeholders. One of these feedback sessions was recorded live with a British sign language interpreter, and streamed on social media, ensuring it was as accessible as possible for members of the public. Furthermore, the CCG produced the executive summary of the draft feedback report as an easy read document, and audio version. People had four weeks to provide their thoughts on the draft feedback report, and the final draft report incorporated all this feedback.

4.2.5 Decision making

The CCG entered into a period of 'intelligent consideration' of all the feedback and information it received during the public consultation period to help inform their decision. This consideration included:

- The consultation feedback report
- Financial information
- Feedback from clinicians
- Modelling on the number of staff available and people currently using the services
- The Travel and Transport assessment
- The joint Equality and Health impact assessment.

The Sunderland urgent care consultation concluded with the decision to have an urgent treatment centre located at Pallion Health Centre with five Sunderland Extended Access services located throughout the city.

Changes were made to the clinical model following concerns voiced by members of the public and evidence identified through the joint equality and health impact assessment. As a result, minor injuries services will also be available at the Sunderland Extended Access services at Houghton Primary Care Centre and Washington Primary Care Centre as well as at the urgent treatment centre in Pallion.

At the GB meeting held on 29 January, the decision was made based on the review and consideration of all the clinical evidence and feedback from a process of public consultation. This GB meeting was recorded and streamed live through social media to make it accessible as possible. To see this meeting, go to:

https://www.youtube.com/watch?time_continue=9&v=ReZWq3pqmJg

The clinical commissioning group decided that from April 2019 patients only need to call their own GP practice or 111 to access urgent healthcare. Services that will be available include:

- An integrated urgent care service (111) which has been available from October 2018.
- A Recovery at Home service which supports vulnerable patients with complex needs to remain at home. This team (which includes a GP) responds quickly to provide intensive support to those who need more help while they are getting back to normal after a short term illness or injury in their own home, a care home or on discharge from hospital.
- There will be 45,000 GP appointments per year (including an additional 14,000 from April 2019) through the Sunderland Extended Access Service. You will need to book an appointment through your GP practice and this service is

available from 6pm-8.30pm, Monday to Friday, 9am-5.30pm weekends and 10am-2pm on bank holidays. From April 2019 this will be at five locations in Sunderland (Pallion Health Centre, Bunny Hill Primary Care Centre, Houghton Primary Care Centre, Riverview Health Centre, Washington Primary Care Centre).

- Minor injury services can be accessed at the urgent treatment centre at Pallion Health Centre (open 10am to 10pm, Monday to Friday and 8am-10pm weekends and bank holidays) and via appointment and via appointment at the Sunderland Extended Access Service in Houghton Primary Care Centre and Washington Primary Care Centre.

The changes are expected to take place from October 2019 and any changes will only take place when robust plans are in place to ensure that patient care is not affected.

4.3 Community Beds

Sunderland CCG reviewed the community bed provision, provided as part of Recovery at Home. This includes Farmborough Court and Houghton Primary Care Centre. Two surveys were designed and circulated to patients and staff. The surveys aimed to evaluate the current service, and identify what support was needed for patients to be cared for in their own home earlier. Following on from these surveys, the CCG decided to further evaluate the current service to understand what improvements can be made and to ensure the CCG are delivering.

4.4 Breast services

<https://www.sunderlandccg.nhs.uk/get-involved/you-said-we-did/breast-services-update-executive-summary/>

Following the changes to the breast services in Sunderland, service-users were asked to give their views to evaluate the new service. A survey was designed and a cohort of patients received the survey on between March and April 2018. A final analysis report was shared on 27 April. In total, 308 completed surveys were returned (40.6%). In summary, the research highlighted:

- Choice of consultation venue: A third of patients (31%) were not given the choice over where their initial consultation would be carried out, and over six out of ten respondents were not given the choice of location for a follow-up consultation appointment.
- Initial consultation: Patients found the letters they received clear, with clear directions to clinics. Patients were positive about the location of the service, and

about the service itself. Patients felt their privacy and dignity were respected while at their appointment

- **Tests and results:** Those patients who had tests at the clinic, such as mammograms, ultrasounds, other scans, and biopsies told us they understood why the tests were carried out, and that the nurse or consultant explained why the tests were being carried out. Two-thirds (65%) of patients received their test results in less than a week, with a fifth waiting between one or two weeks.
- **After diagnosis:** After patients were diagnosed, over eight out of ten (82%) said they left feeling they knew enough about the planned treatments, and over nine out of ten (91%) said they left feeling they knew enough about their condition.
- **Information:** Just over half (54%) of patients said they were provided with information to take away with them after their diagnosis. Nearly four out of ten (39%) of patients told us they did not receive this information. Six out of ten (59%) patients were not given the contact details for a Clinical Nurse Specialist when they left the clinic. Over seven out of ten (72%) respondents said they were not given information about support agencies such as Macmillan Cancer Support. Six out of ten (60%) patients they were not given information about other support centre services in their area.
- **Final thoughts on the service:** Over nine out of ten (96%) patients thought the breast service they received from Grindon Lane was either very or fairly good. When invited to make suggestions about improvements to the breast care service, the majority of patients told us that no improvements were needed. Some patients suggested the waiting area could be improved with access to refreshments and a TV.

In October 2018, some additional analysis of the survey was requested through the Quality Safety Committee (QSC). This included looking at what people who received a cancer diagnosis said, and understanding their satisfaction with the service. This analysis was incorporated into the final results report.

4.5 Pressure Ulcer Research Project (PROACT)

<https://www.sunderlandccg.nhs.uk/proact/>

Sunderland CARE Academy, a collaboration of partners from health, social care, education and the voluntary sector, launched a new research project, PROACT, to identify and reduce the amount of pressure ulcers (bed sores) in the community. PROACT aims to identify gaps in care across health and social care settings, and provide staff with the skills to make sure we prevent people suffering unnecessarily. For the launch of PROACT, health professionals were asked to pledge their commitment to sign up to the React to Red campaign to help prevent pressure ulcers. Landmarks across Sunderland and South Tyneside were lit up red to highlight the campaign, which saw a series of awareness and

educational meetings and events held across the Sunderland and South Tyneside. In addition, educational sessions were held with healthcare professionals working in care homes.

4.6 GP Engagement Activity

<https://www.sunderlandccg.nhs.uk/get-involved/gp-practice-engagement/>

Riverview Health Centre – GP merger: Two practices applied to merge in Riverview Health Centre. These are: Dr Nathan, and Dr Bhate and Dr El-Shakankery. No services changes were planned. Patients were written to inviting them to complete a survey and attend an information session. In total, 681 people completed the survey providing a response rate of 13.5%. Three people attended the information sessions. A report was produced. The proposed merger was approved at the Primary Care Commissioning committee. Posters were created for practices to display, and online information was updated. The changes took place in April 2018.

Victoria Road Health Centre – GP merger: Three practices applied to merge in Victoria Road Health Centre. These are: Victoria Medical Practice, Dr Thomas and Dr Bhatt. No services changes were planned. Patients were written to inviting them to complete a survey and attend an information session. In total, 1108 people completed the survey providing a response rate of 17.5%. Eight people attended the information sessions. A report was produced. The proposed merger was approved at the Primary Care Commissioning committee. Posters were created for practices to display, and online information was updated. The changes took place in April 2018.

Hylton Medical Group – GP Boundary Change: Hylton Medical Group proposed to change their patient boundary. Most of their patients live in SR1, SR2, SR3 and SR4 postcode areas with a small number living in SR5 – SR7 postcode areas and other areas. They proposed to include the SR1 – SR4 postcode areas only. This resulted in a very small number (16) of patients who would be asked to re-register with a new practice. These patients were telephoned by the practice, and offered the chance to voice any concerns they may have. 369 patients were allowed to remain on the patient list unless they move property, and remain outside of the new practice boundary. After the proposal for the boundary change was approved, all affected patients were written to letting them know the outcome. Posters were also created for practices to display, and information was updated online.

4.7 Surge evaluation

In order to evaluate the Surge / Urgent Care marketing activities, some street evaluation was carried out throughout different locations in Sunderland. The evaluation started on 3 December 2018, and ran every two weeks until the end of April 2019.

This engagement reached 227 people in total, including 74 males and 145 females, aged between 15 and 89.

Three out of ten (32%) of all people surveyed since the evaluation start remember seeing a Plasticine People advert. By the final week of the campaign, awareness had increased to half of those surveyed.

People were asked to tell us where they remember seeing these adverts. Overall, people remember seeing them on TV, in GP practices, and on Facebook.

People were asked to tell us if they had made any particular changes to how they look after themselves lately. Overall, eight out of ten (81%) of respondents told us they had.

People were then asked to tell if the changes were the result of seeing the adverts. The below changes were reported as a result of the adverts:

- Finding out what local pharmacies were open over Christmas and New Year (x3)
- Following advice to prevent or treat sunburn (x2)
- Creating a first aid kit (x2)
- Updating a first aid kit (x2)
- Finding out what GP practices were open over Christmas and New Year (x1)
- Pharmacist for advice (x1)

In addition, people told us they were not sure if the below changes were as a result of the adverts:

- Update first aid kit (x2)
- Contacted a pharmacist for advice (x1)
- Found out what GP practices were open over Christmas and New Year (x1)
- Booked an evening / weekend appointment with my GP (x1)

4.8 myCOPD & World COPD Day

<https://www.sunderlandccg.nhs.uk/campaigns/mycopd/>

NHS Sunderland CCG purchased licences for around 9,000 Chronic Obstructive Pulmonary Disease (COPD) patients in Sunderland. NECS developed a communications campaign that aims to generate patient requests for the myCOPD app and increase awareness of the app and the condition itself. The campaign consisted of bus panels, radio advertising, sponsored content, video, animation, social media, stakeholder brief, patient letter, leaflets, posters and pens.

4.9 New Consultation types

New Consultation Types' is part of the General Practice Forward View (GPFV), and a number of new technologies were identified for Sunderland (detailed below). The scheme will cover all 40 practices within Sunderland, but will begin with a number of pilot sites.

- **Telephone consultations** – increases access for patients, provides triage and consultation, provide training to GP's to offer this.
- **Online Consultations** – The system enables patients to self-care, be signposted to the relevant service and consult with their practice using a digital tool.
- Increased use of **text messaging services** – including appointment reminders, information sharing, questionnaires, patient self-care
- **Video Consultation** – offer appointments via a video consultation app and will form part of the model of digital interactions.
- **Surgery Pods** – collects vital sign information in waiting room and uploads to patient's record.
- **Active signposting** – provides patients with a first point of contact that directs them to the most appropriate help. The skills developed will support staff to ensure that patients are signposted to the most appropriate person/service within or outside of the practice.
- **Group consultations** – consideration of group consultations for specific conditions e.g. COPD, Diabetes.
- **Remote monitoring** – providing digital tools to patients to help them to self-care and monitor their health remotely. This would include the use of apps e.g. myCOPD, myHEART
- **Collaboration tool** – introduction of an extranet across GP Practices. Provides rapid access to information and a consistent approach of sharing information across all practices.
- **Advanced telephony** – introduce standardised telephony system across GP Practices. Utilise voice recording facility to push messages around online consultation.
- **Alivecor** – pocket size electrocardiogram (ECG) device launched through the Innovation Technology Tariff. Will enable GP's and nurses to take an instant one lead ECG for patients.

The CCG held roadshow awareness events between 14 and 30 March 2019 at The Bridges, Sunderland, The Hetton Centre, Coalfields, and at The Galleries, Washington to provide information and demonstrations of digital technologies, and answer any questions members of the public had.

5. Sunderland Action Plan Updates

5.1 Introduction

Sunderland Clinical Commissioning Group (CCG) identified actions for patient and public involvement and engagement activities, which were structured around domains identified in NHS England (NHSE) publication: Patient and public participation in commissioning health and care (April 2017). The following section of the report will provide the annual reporting for these actions.

5.2 IP01: Involve the public in governance

5.2.1 IP01.1: Maintain list of contacts and use PPG's as a resource to disseminate information

<https://www.sunderlandccg.nhs.uk/get-involved/other-ways-to-get-involved/find-your-patient-participation-group/>

The Involvement and Engagement Team developed a list of contacts for active Patient Participation Groups (PPGs), and used this group as a resource to disseminate information. Practice managers email details are used as the point of contact for disseminating information to PPGs. In total 43 contacts are included in this list.

5.2.2 IP01.2: Ensure lay members are represented in the Governing body

<https://www.sunderlandccg.nhs.uk/corporate/governance/>

Sunderland CCG has three lay members as part of the Governing Body (GB) as set out in the [Constitution](#);

- Lay member for audit (Chris Macklin)
- Lay member of Patient and Public Involvement (PPI) (1 April 2018 – 28 February 2019): Aileen Sullivan
- Lay member for primary care commissioning (Patricia Harle MBE)

Lay member profiles can be found by going to: <https://www.sunderlandccg.nhs.uk/about-us/meet-the-team/governing-body/>

Attendance at each of the required committees and GB by the lay members, as well as all other relevant members, is included in the CCG's annual governance statement.

5.2.3 IP01.3: Detail how the PPGs have been used as a resource to disseminate information

<https://www.sunderlandccg.nhs.uk/get-involved/other-ways-to-get-involved/find-your-patient-participation-group/>

This action follows on from action [IP01.1](#). For 2018/19, PPGs were contacted 25 times via emails for the following reasons:

- Learning disability health event
- To provide an update on Sunderland urgent care
- Invitation to take part in a focus group for Urgent care
- Invitation to take part in Path to Excellence events
- Share your views on the CCGs annual health festival;
- Attend the Sunderland maternity voices partnership event

5.3 IP02: Explain public involvement in commissioning plans / business plans

5.3.1 IP02.1: Work closely with the Project Support Team to identify engagement, consultation, and communications needs, and to integrate involvement into service commissioning

The Project Support Team regularly links with the Involvement and Engagement Team to discuss engagement support for the CCGs reform projects as and when needed. Example projects discussed include:

- Armed forces veterans and families support – (social media for remembrance day and communications developments for new General Practitioner (GP) surgery screen imagery and posters for practices)
- New single point of access for musculoskeletal (MSK) services – Newsletter
- Breast services
- Outpatient reform (patient experience search via MY NHS)
- All Together Better Alliance (ATBA) (Newsletter)
- Lung noodles information leaflet (Communications)
- Cervical cancer awareness (social media)
- Survey for new recovery at home service (via MY NHS)
- End of life information (newsletter)
- Diabetes prevention programme (newsletter, social media and communications)

5.3.2 IP02.2: Develop a process for delivering information sessions relating to GP mergers

<https://www.sunderlandccg.nhs.uk/get-involved/gp-practice-engagement/>

A GP engagement protocol was approved at the Primary Care Commissioning Committee on 31 August 2017. This protocol is now implemented for all [GP engagement activity](#).

5.3.3 IP02.3: Update QSC regarding project work

In 2018/19, the Communications and Engagement Steering Group (CESG) and the quality Safety Committee (QSC) were updated on a range of involvement, engagement, and consultation projects. These projects are discussed in more detail in section [3. Regional Involvement and Engagement Projects](#) and section [4. Involving People: Activities and Projects](#). Through the QSC, these were taken to GB.

5.4 IP03: Demonstrate public involvement in annual reports

5.4.1 IP03.1: Produce an annual report detailing all public involvement activity for Sunderland CCG

<https://www.sunderlandccg.nhs.uk/news-media/publications/annual-report/>

The North of England Commissioning Support Unit (NECSU) worked closely with Sunderland CCG to produce an Annual report for 2018/19. The final Annual Report for 2018/19 was reviewed by the CCGs Audit and Risk Committee, external auditors, and NHSE to ensure for accuracy, appropriateness and compliance with current guidance. It was presented to GB on [\[insert date\]](#), where GB was assured the Annual Report and governance statement were prepared in accordance with NHSE guidance. Finally, the final Annual Report for 2018/19 was uploaded to NHSE by [\[insert date\]](#). A Summary Annual Report for 2018/19 [\[hyperlink\]](#) has also been produced.

A link to the Annual Report and Summary Annual Report was publicised through social media on [\[insert date\]](#). The CCG's webpage for the Annual Report also includes an accessibility statement letting people know the annual report and summary document will be provided in alternative formats on request, and will also be printed and posted upon request, maximising accessibility.

5.5 IP04: Promote and publicise public involvement

5.5.1 IP04.1: Develop a Social Media Plan for how to use social media to consult, engage, and communicate with Sunderland residents

A social media plan was developed for the CCG, and received feedback from the CESG.

5.5.2 IP04.2: Monitor the frequency and reach of Sunderland CCG's social media

Since 1 April 2018, the number of Twitter followers increased from 2451 to 2882 by 31 March 2019. The average reach per day has increased from 6.9k to 9.1k over this time period. Facebook increased from 1281 connections from 1 April 2018 to 1713 connections by 31 March 2019. There were 2435 total 'likes' for Facebook between this time period.

5.5.3 IP04.3: Ensure Sunderland CCG's website includes opportunities for people to make complaints and compliments, and that these are addressed and monitored accordingly

<https://www.sunderlandccg.nhs.uk/contact-us/compliments-complaints/>

Sunderland CCG's webpage includes opportunities for people to make complains and compliments. These are monitored by NECSU.

5.5.4 IP04.4: Ensure Sunderland CCG's website includes a summary of the key local health needs and how these are being addressed

<https://www.sunderlandccg.nhs.uk/corporate/equality-and-diversity/equality-diversity-and-health-inequalities-information/>

Sunderland CCG website includes a summary of the key local health needs through the following documents:

- Health Profiles
- Public Health England – Local Health profiles
- Joint Strategic Needs Assessment
- NHS England Right Care Pack
- NHS Sunderland CCG Equality Strategy 2016-2020
- NHS Sunderland CCG EDS2 Equality Objectives and Action Plan
- NHS Sunderland CCG Disability Confident Level 2 Accreditation Certificate
- Equality Impact Assessment

5.5.5 IP04.5: Ensure Sunderland CCG's website includes links to relevant local organisations

<https://www.sunderlandccg.nhs.uk/about-us/who-we-work-with/>

The CCG has a 'who we work with' page on the website which includes links to partner organisations. Sunderland CCG's new website includes links to relevant local organisations, including:

- Healthwatch

- Sunderland Council
- Wellbeinginfo.org
- Voluntary and Community Action Sunderland (VCAS)
- City hospitals Sunderland

5.5.6 IP04.6: Hold four Sunderland Health Forum meetings annually

<https://www.sunderlandccg.nhs.uk/get-involved/shf/>

The CESG agreed to brand all public events held by Sunderland CCG as Sunderland Health Forum Events (SHE). See [3.4 Sunderland Health Forum](#) for a full list of events which took place during 2018 / 19.

5.5.7 IP04.7: Develop and maintain a protocol and system for publishing information about the Sunderland Health Forum

<https://www.sunderlandccg.nhs.uk/get-involved/shf/>

A detailed plan was developed to help plan the Sunderland Health Forum (SHF), including identifying suitable topics, speakers, and venues for the event. It also helped plan the timing for publicity.

5.5.8 IP04.8: Increase attendance at Sunderland Health Forums

<https://www.sunderlandccg.nhs.uk/get-involved/shf/>

The Involvement and Engagement team increased and improved advertising for the SHF, following the detailed plan (See [IP04.7](#)). Advertising for the SHF included increased and targeted social media posts, advertising through Sun FM, My NHS emails, PPGs, and Voluntary and Community Organisations (VCSO) (see [IP05.1](#)).

Through this activity, there was an increase in attendance at SHF. However, attendance was dominated by VCSOs and partner organisations. In February 2018, 63 people attended the two (day and evening) SHF events.

5.5.9 IP04.9: Increase the number of members of the public attending the Sunderland Health Forum

<https://www.sunderlandccg.nhs.uk/get-involved/shf/>

In February 2018, 63 people attended the two (day and evening) SHF events, however only 10 of these were members of the public. This led to the action ([IP04.10](#)) to understand what would encourage members of the public to attend a health forum event.

5.5.10 IP04.10: Conduct some market research to find out when Sunderland residents would attend a Sunderland Health Festival

<https://www.sunderlandccg.nhs.uk/get-involved/shf/>

People were invited to take part in an online survey to tell us what their thoughts on an annual SHF. More information is included in section [3.4.3 Sunderland Health Forum – Engagement](#). The information from the engagement was used to develop a plan for the SHF for 2019/20 (see [IP04.14](#)).

5.5.11 IP04.11: Increase representatives from local organisations to attend Sunderland Health forums

<https://www.sunderlandccg.nhs.uk/get-involved/shf/>

All local health organisations, GP practices, residential care homes, council, MP's, University, VCs, Healthwatch and Healthnet were regularly contacted to encourage them to attend the forum as representatives.

5.5.12 IP04.12: Develop a Sunderland CCG 'Involving People' toolkit to support Sunderland CCG to meet its statutory involvement needs

The Involving People toolkit for all CCG staff members was signed off by QSC in October 2017. The toolkit is available for staff to use on the CCG staff intranet.

5.5.13 IP04.13: Evaluate, develop, and maximize the range of mechanisms available to patients and the public to engage with the CCG

<https://www.sunderlandccg.nhs.uk/get-involved/other-ways-to-get-involved/>

The CCG uses a range of mechanisms to encourage patients and the public to engage with the CCG. This includes:

- [My NHS](#) is used to communicate information, invite people to public events, and to ask people to take part in engagement activities and surveys. In total, there are 1107 people signed up to receive communications from My NHS for Sunderland. Between 1 April 2018 and 31 March 2019, Sunderland CCG sent out 36 communications to MyNHS members. Topics include: Learning disability health event; updates on Sunderland urgent care; invitations to hold focus groups for Sunderland Urgent care consultation; invitation to take part in Path to Excellence events; asking people to share their views on the CCGs annual health festival; to attend the Sunderland maternity voices partnership event.

- A quarterly stakeholder bulletin, which is sent to GP practices, PPG groups, and people signed up to MyNHS. Throughout 2018/19, this bulletin was sent out in April 2018, September 2018, November 2018, and February 2019.

5.5.14 IP04.14: Hold one annual Sunderland Health Festival

<https://www.sunderlandccg.nhs.uk/get-involved/shf/>

An options paper for the SHF was developed based on feedback from the public engagement activity (see [IP04.10](#)). The first event will be held in 2019/20.

5.6 IP05: Access, plan and take action to involve

5.6.1 IP05.1: Monitor and develop effective relationships and feedback mechanisms with the voluntary and community sector and other appropriate stakeholders

A database of VCSOs was developed, and is continuously added to and monitored. The contacts for VCSOs in this database are regularly contacted for engagement and consultation events, to cascade information and to be approached for community asset-based focus group opportunities. There are currently 91 contacts on this register.

Between 1 April 2018 and 31 March 2019, VCSOs were contacted 30 times for the following reasons:

- Learning disability health event
- To provide an update on Sunderland urgent care
- Invitation to take part in a focus group for Urgent care
- Invitation to take part in Path to Excellence events
- Share your views on the CCGs annual health festival;
- Attend the Sunderland maternity voices partnership event

5.7 IP06: Feedback and evaluate

5.7.1 IP06.1: Develop a protocol detailing appropriate mechanisms for collecting and feeding back Patient Stories

<https://www.sunderlandccg.nhs.uk/get-involved/your-views-and-experiences/>

A protocol based on best practice was drafted and taken to the CESG on 10 October 2018. Comments were received and the plan was finalised and uploaded onto the staff intranet, and is forwarded when collecting patient stories.

5.7.2 IP06.2: Provide patient stories to the Governing body (3 annual)

<https://www.sunderlandccg.nhs.uk/get-involved/your-views-and-experiences/>

In 2018/19, two Patient Stories were taken to GB.

- 21 May 2018 – Patient story focussed on the benefits of self-care
- 25 September 2018 – Patient story focused on Veterans in Crisis Sunderland

The patient story which was planned for the March 2019 GB meeting was delayed until May 2019. However, four patient stories were identified in 2017/18, and taken to GB meetings (in July, September, November 2017, and January 2018).

5.7.3 IP06.3: Develop Sunderland CCG Internet Consultation and Engagement webpage to feedback to patients

<https://www.sunderlandccg.nhs.uk/get-involved/>

As a result of the 2017/18 Improvement and Assessment framework (IAF) (see [IP07.2](#)), Sunderland CCG established a website working group to identify what improvements were needed to the CCGs website. The CCG took the opportunity to review their website and ensure the information is included and easily accessible for future assessments.

As part of this review, the CCG involvement and engagement webpages (Get Involved) were redeveloped.

The new website went online in January 2019. Members of the public still have the opportunity to tell us what they think of the new site:

<https://www.sunderlandccg.nhs.uk/get-involved/other-ways-to-get-involved/ccg-new-website-re-development-you-said-we-did/>

5.8 IP07: Implement assurance and improvement systems

5.8.1 IP07.1: Ensure representation at the Health and Well-being Scrutiny Committee

The Health and Wellbeing Scrutiny Committee is factored into the communication methodology for consultation and engagement activities.

5.8.2 IP07.2: Improvement and Assessment Framework

A full update for the IAF can be found in section 3.1 of this report.

5.9 IP08: Advance equality and reduce health inequalities

5.9.1 IP08.1: Maintain appropriate mechanisms to support the CCG to engage with groups with protected characteristics through the Equality and Diversity group

<https://www.sunderlandccg.nhs.uk/corporate/equality-and-diversity/equality-diversity-and-inclusion-network/>

Four equality and diversity meetings were held in 2018/19. More information about this group can be found in section 3.3 of this report.

At the February meeting, the group agreed to change its name to the Equality, Diversity, and Inclusion Network (EDIN). The Network will be comprised of virtual contacts, who will take part through email and private social media webpages, and a face-to-face group, who will attend quarterly meetings. This maximises involvement in the EDIN. Virtual members will be comprised of the VCSO contacts (see [IP05.1](#)). New Terms of Reference were drafted and agreed by the group (<https://www.sunderlandccg.nhs.uk/corporate/equality-and-diversity/equality-diversity-and-health-inequalities-information/>).

5.9.2 IP08.2: Increase representation at Equality and Diversity group meetings

An attendance database was developed to monitor who attended group meetings and to identify gaps and opportunities reaching out to potential attendees. The template for this database is included in the Terms of Reference for EDIN (<https://www.sunderlandccg.nhs.uk/corporate/equality-and-diversity/equality-diversity-and-health-inequalities-information/>). Potential attendees are regularly contacted and invited to future meetings. In addition, from 2019/20, membership will include virtual contacts (see [IP08.1](#)).

5.9.3 IP08.3: Ensure Equality and Diversity is reflected through survey data collection

<https://www.sunderlandccg.nhs.uk/corporate/equality-and-diversity/mapping-who-we-engage-with/>

Equality and diversity questions are routinely incorporated into survey design. Example questions have been incorporated into the Involving People Toolkit (see [IP04.12](#)). In addition, standard questions collecting information on protected characteristic groups are included on Sunderland CCG website. The website includes the following equality and diversity questionnaires:

- [A short version](#), which collects information on the nine protected characteristic groups;

- [A longer version](#) which collects more information on disability, people who served in the armed forces, carers, and postcode information;
- [An easy-read version](#) of the equality and diversity questions.

5.9.4 IP08.4: Ensure Equality and Diversity is reflected through individual engagement activities (focus groups / interviews)

<https://www.sunderlandccg.nhs.uk/corporate/equality-and-diversity/mapping-who-we-engage-with/>

The Voluntary Community Sector (VCS) database will be used to reach out to Voluntary Community Sector Organisations (VCSO), to deliver an asset-based approach to focus-groups and interviews. This process has been factored into the planning for all involvement and engagement activities.

Sunderland CCG regularly collects equality and diversity information on people who take part in our consultation and engagement activities. This includes through surveys, focus groups, or public events. The CCG publishes information about what protected characteristic groups have been reached on its 'mapping who we engage with' webpages.

5.10 IP09: Provide support for effective involvement

5.10.1 IP09.1: Provide opportunities for continuous staff training and development in consultation and engagement

A programme of training for key members of staff was undertaken with the Consultation Institute. This included areas such as stakeholder analysis, risk assessment and undertaking formal consultations.

5.10.2 IP09.2: Organise and run a workshop event, bringing together key members of staff from NHS organisations to share consultation and engagement best practice and information

A workshop was arranged, and 14 members of staff attended.

5.11 IP10: Hold providers to account

5.11.1 IP10.1: ensure the standard contract for all provider service contracts is used

Standard contracts are used for all provider service contracts which are in-line with current national guidance.

6. Abbreviations

ATB	All Together Better
ATBA	All Together Better Alliance
CESG	Communications and Engagement Steering Group
CCG	Clinical Commissioning Group
CHSFT	City Hospitals Sunderland Foundation Trust
COPD	Chronic Obstructive Pulmonary Disease
ECG	Electrocardiogram
EDIN	Equality, Diversity, and Involvement Network
FMLU	Free-standing Midwifery-led Unit
FT	Foundation Trusts
GB	Governing Body
GP	General Practitioner
GPFV	General Practice Forward View
IAF	Improvement and Assessment Framework
ICS	Integrated Care System
IPPAP	Involving People Project and Action Plan
LGBT	Lesbian, Gay, Bisexual, and Transgender
MCP	Multispecialty Community Provider
MSK	Musculoskeletal
NECSU	North of England Clinical Commissioning Support Unit
NHS	National Health service
NHSE	NHS England
NTWFT	Northumberland Tyne and Wear Foundation Trust
OSC	Overview and Scrutiny Committee
PPGs	Patient Participation Groups
PPI	Patient and Public Involvement
PPV	Patient and Public Voice
QSC	Quality Safety Committee
RAG	Red, Amber, Green (performance monitoring rating system)
SHE	Sunderland Health Events
SHF	Sunderland Health Forum
STFT	South Tyneside Foundation Trust
VCAS	Voluntary and Community Action Sunderland
VCS	Voluntary Community Sector
VCSO	Voluntary Community Sector Organisations