Annual report on patient and public participation

1 April 2017 – 31 March 2018
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David Jenkins
Lay member for Patient and Public Involvement (PPI) and vice chair of the NHS Dorset CCG Governing Body

I am pleased to welcome you to NHS Dorset Clinical Commissioning Group’s second Public Participation and Involvement annual report.

Public participation and involvement are vital and continuing foundations to our decision-making processes. During 2017/18 a number of major milestones were achieved including the conclusion of the Clinical Services Review formal consultation process, for which we received Best Practice accreditation from the Consultation Institute. The outcomes of this consultation significantly influenced the CCG decision-making on the review.

Together with the other NHS organisations and local authorities in Dorset, we have established revised engagement and participation arrangements to inform the work of the developing Dorset Sustainability and Transformation Partnership (STP), and the embryonic Integrated Care System.

These include a newly established STP Public Engagement Group, under an independent chair, Ian Gall, to build on the learning from the CCG’s previous, and successful, Patient, (Carer) and Public Engagement Group (PPEG). The PPEG ran throughout the three years of the Clinical Services Review, and I would like to thank all the dedicated volunteer members who contributed so well to the work of the review.

We are now developing a stronger voice for GP practice participation groups across Dorset, and are working closely with the chairs of these groups and with practice managers so as to build a Dorset-wide network to support patient and public voices at local level.

I anticipate an equally active and fruitful year ahead as we continue to develop partnership working across the public health and care system in Dorset.

I hope you enjoy reading this annual report and do please stay involved.
NHS Dorset Clinical Commissioning Group is committed to putting the views of local people at the heart of the NHS and to making sure that they are involved in the planning of local services. Participation helps us to understand people’s needs, improve access to services and reduce inequalities in health. To ensure this happens we have a tried and tested process for public participation and engagement. This process was developed in line with national guidance, good practice and our duty to involve. It includes a number of stages to promote a continuous cycle of meaningful engagement: audience analysis, representation, gathering insight, communication planning, engagement/consultation on proposed changes and equality impact assessment. The process is reviewed regularly to take account of changes to policy and national guidance and is available on our website: www.dorsetsvision.nhs.uk, or you can take a look at our engagement process on p5.
New developments in our engagement process

Alongside our engagement process we have a recognised structure to make public participation happen throughout the CCG.

During 2017/18, we made some changes to our engagement and participation structure. This was due to the end of the Clinical Services Review (CSR) public consultation and a move to promote closer working relationships among nine partner NHS and local authority organisations across Dorset.

Dorset is one of 44 areas in England that has a Sustainability and Transformation Plan (STP). The STP sets out what we intend to do to improve the health of people living in Dorset over the next five years by closing any gaps in health and wellbeing, care and quality, and finance and efficiency.

Dorset has also been named as one of eight STPs that will become an Integrated Care System (ICS) during 201/19. The ICS will help GPs, hospitals, community care and social care, and physical and mental health services to work more closely together by removing organisational boundaries that could act as barriers.

The main change to our engagement structure was the creation of a new STP Patient Engagement Group (STP PEG).

This new group was designed by colleagues from all NHS organisations (including hospitals, community and mental health services and the CCG), local authorities and Public Health Dorset. It also drew on experience and learning provided by the very successful Patient, (Carer) and Public Engagement Group (PPEG). PPEG ran for three years throughout the CSR and until the CCG Governing Body made its decisions on the future of hospital and community services in September last year.

Building on this, STP PEG meets every two months and is made up of 25 local people with a wealth of life experience and expertise from across Dorset’s geography, demography and diversity. It is chaired by Ian Gall, who is also a GP Public Participation Group chair in North Dorset. Ian was appointed following an open selection process.

The role of the group is not to carry out the extensive public engagement work required across Dorset, but to provide advice, guidance and challenge to inform this work.

The group meets regularly, providing feedback on a various things including a new public health website, a new health and care signposting service and emerging plans for dementia services.

Members have also produced a checklist for local staff to ensure that they put people at the centre of local services. Please see diagram on p7.

We also set up an STP engagement leads group, which brings together professionals from the nine partnership organisations...
It’s clear from conversations I’ve had with STP Leads and Partners that our contribution and views are actively encouraged and welcome and we are seen as an important part of the team that is working together to shape Dorset’s health.

We have all joined this group because we want to contribute and help to make a difference. We act as a sounding board, to provide a sense check and it’s not about us liking a plan, but does it make sense and do we understand how they got to this place.

We know that we can’t change the past, but we can influence the future, so we look at proposals and advise on what is good, what could be better and areas that should be considered from the public perspective.

When an STP programme asks for something to be considered by the PEG there is also clear commitment that they should respond to that feedback, thereby completing the engagement cycle. ‘You said – we did.’

Ian Gall
PEG Chair

For further information, guidance or support contact communications@dorsetccg.nhs.uk
that make up the ICS in Dorset. The group meets monthly to see how we can draw on each other’s experience and resources, and avoid duplication and ‘consultation fatigue’ among local people.

At leadership level, David Jenkins continued as the lay representative for patient and public engagement on our Governing Body (GB). David is also the Deputy Chair of the GB and his role is to ensure that public engagement is given due priority.

To reach a wider range of people, we continued to support a Health Involvement Network (HIN), which is a database of people interested in helping to improve health services in Dorset. We constantly update and refresh the membership so that it continues to represent a wide range of interests and viewpoints.

HIN members are sent our regular newsletter, ‘Feedback’, to keep them up-to-date with the work of the CCG, explain how people’s views have informed change and promote forthcoming opportunities for involvement.

Over the past year, we have invested in a new secure electronic database system which is helping us to manage communications with our HIN members. It enables us to identify our stakeholders easily and keep our records up-to-date. In line with new data protection rules, we will be contacting everyone on the database to make sure they are happy with the information we have stored about them.

In addition to the HIN, there is an established Supporting Stronger Voices (SSV) forum, which represents around 200 organisations from across the county. These include patient and carer representatives from a range of...
condition-specific groups; chairs of (GP) practice participation groups; chairs of hospital leagues of friends; Young People’s Involvement Groups; Dorset Race Equality Council (DREC) involvement group and the Dorset LGBT network.

Supporting Stronger Voices meets every six months and the agenda is drawn up with members. The key objectives of the forum are to provide:

- Information and support to empower people in their role.
- Feedback on how people’s views are informing change. Last year this included feedback of the responses to the CSR public consultation.

Putting local people at the centre of our discussions

It starts with the person.

**Equality and Diversity**
How are you giving consideration to all 9 protected characteristics and Dorset’s geography and demography?

**Patient, Public and Staff Involvement**
How are you actively involving and informing local people in planning your services?

**Access**
How are you thinking about ‘when’, ‘where’, ‘how’ and ‘whether’ people need to travel to health and care services?

**Partnerships**
How are you working with other health, care and voluntary organisations and planning for continuity of care?

**Information Technology (IT)**
How are you considering the use of digital technology in planning people’s care?

**Physical and Mental Health**
How are you ensuring that both physical and mental health needs are considered in planning your services?

**Prevention and Education**
How will your plan support people with their self-management and help keep them well?
Patient experience insight

> Last year saw the introduction of a new NHS England Improvement Assessment Framework (IAF) indicator, ‘Compliance with statutory guidance on patient and public participation in commissioning health and care’.

Dorset CCG achieved ‘good’ in every area, with many actions rated as outstanding.

One of the areas for improvement, both nationally and locally, was to develop more coordinated working between quality, engagement and equality teams across Dorset’s Integrated Care System.

Dorset CCG is taking part in two system-wide projects to try to strengthen both the patient and public voice in health and social care.

We are one of six areas in England working with the King’s Fund as part of an action learning project to see how we can use insight and feedback from patients and the public to drive improvements in our area.

We have also been working with Wessex Voices (a network of local Healthwatch organisations supported by NHS England), and in March 2018 arranged a workshop with them with the following aims:

- To bring together engagement and communications, equalities and quality leads from across the system.
- To explore how to share the gathering, analysis and use or insight/feedback data across the health and care system to maximise the opportunity for feedback from patients, carers and the public to be at the heart of sustainable transformation.
- To focus on improving the experience for patients, carers and the public.
- To develop proposals for working together.

The insight gathered at this event will be analysed and used to help develop mechanisms for ensuring that patient experience is captured in a form that enables it to be fed into the commission – planning and buying – of services.

This is one of our priorities for the year 2018/19.
Diverse groups and how we work with stakeholders and local people

We mainly work with ‘gatekeeper’ organisations which represent the interests of people in diverse, potentially excluded and disadvantaged groups and can offer us access to them. Examples of these include Dorset Race Equality Council, LGBT Advisory Group and self-advocacy organisations for people with learning disabilities such as Poole Forum, Bournemouth People First and People First Dorset.

Following the CSR public consultation, we continue to hold regular bi-monthly meetings with Healthwatch Dorset officers and maintained strong working relationships with the two Bournemouth and Poole Council of Voluntary Services; Dorset Community Association; Volunteer Centre Dorset, and with the Dorset Association of Parish and Town Councils (DAPTO) to reach into rural communities.

We use well established networks, for example the Dorset STP/ICS Communications Group, to communicate with NHS and public sector staff because we recognise that the public sector is one of the main employers in Dorset and that staff are residents as well as employees, with a wealth of views and experience to contribute to our conversations.
Providing professional support for public participation

Professional responsibility for leading, planning and delivering activity sits with the Engagement and Communications (E&C) team, which is part of the Engagement and Development Directorate. The team combines a range of skills and experience across four areas of:

- Stakeholder insight.
- Patient and public engagement.
- Media and publications.
- Marketing and digital.

This enables us to create more communication and engagement tools in-house, which means we can be more responsive and cost-effective by reducing the amount of work that has to be outsourced.

The CCG encourages the view that engagement and good communications are part of everyone’s job.

The E&C team supports and trains staff and GP leaders so that they can feel confident to deliver key messages and engage with a range of audiences and stakeholders. A really good example of this is our Flexible Friends: a group of staff from all grades and departments throughout the organisation who volunteer to support engagement/consultation events. They can take learning and experience back into their own teams and increase awareness of the value of public engagement.

We work with service delivery teams across the CCG to ensure that the views of local people are taken into account at a formative stage of development. Last year this included supporting engagement and patient/public participation in the following services:

- Dementia.
- Maternity (Better Births).
- Community services for children.
- Cancer services.
- Integrated urgent and emergency care.
- Improved access to general practice.
- Providing engagement support for primary care transformation plans across 13 localities in Dorset.
Assurance: making sure we do what we say we will do

> Within the CCG, assurance is provided by regular update reports to the executive team and Governing Body. Each year we review and refresh the Engagement and Communications Framework to take account of new operating priorities, different ways of working and any additional responsibilities.

Externally, all engagement is reviewed by the three local authorities for Dorset, Bournemouth and Poole through their respective Health Overview Scrutiny Committees (HOSCs), and Joint Health Scrutiny Committees (JHSC) – which is set up in the case of proposals which affect people in all three council and neighbouring catchment areas, for example the CSR.

Engagement staff are members of the Consultation Institute, a not-for-profit organisation which sets best practice standards for participation and consultation. Visit www.consultationinstitute.org for more information.

We also work closely with NHS England’s national and regional communications and engagement teams to ensure that we stick to national guidance and to share and learn from best practice across the country.

Reporting arrangements for the new STP PEG and STP engagement group are being developed through the health and care system leadership teams.
Local mums, partners and NHS staff were invited to ‘walk in each other’s shoes’ in an innovative way of capturing views to re-shape local maternity services.

Mixed groups took part in the Whose Shoes board game in which they exchanged life experiences and personal stories of pregnancy, birth and maternity services.

This approach encourages everyone to think about their own experiences, share thoughts about what was good and what could have been better in a safe and comfortable environment. All thoughts are collected, themed and shown in picture format.

To enable as many people to take part as possible, babies and children were welcomed. We set up a crèche to help keep them distracted while mums and partners took part.

The Whose Shoes event was held as part of Dorset’s response to the Implementing Better Births resource pack, published by NHS England in March 2017.

We set up a Local Maternity System (LMS), with health and care organisations working together with local people to make recommendations for improvement by 2020/21.

So far the views of about 600 people have been gathered and used to inform plans.
I found the Whose Shoes event really inspiring – it was amazing to see so many mums and professionals coming together and spending their valuable time trying to improve services for women. Hearing from mums and professionals at the same time gave us all lots to think about. I took the twins with me, who enjoyed trying to eat the board games, but it helped to keep me focussed on why we were all there. I’ve been so impressed by how committed all of the professionals are to improving the maternity experience for parents, with so much time and effort being put into the Better Births project.

> Rachel Filmer
Maternity Representative

As a mum I was warmly welcomed and my views were encouraged and noted down, which made me feel heard and valued, and my eight-month-old son loved all the cuddles he got round the table! I felt included in the ideas and suggestions of all these positive, friendly and committed health professionals. There was genuine willingness and determination to make things better for mums, babies and families in Dorset.

> Trucie Mitchell
Maternity Representative
> Children and young people are being put at the centre of a review into physical health services provided in the community.

Working with health and care professionals, children and young people have helped design the look of promotional materials for the Be Heard review to help encourage their peers to share their views and experiences of services.

The review includes primary and community care as well as hospital services for 0-25 year-olds.

The first stage is to find out what is being done well and what could be done better, and we kicked off this process by talking to young people and collecting their views. Together, with our graphic design graduate, we created an eye-catching, colourful and relevant identity for the review. This has been used on a range of promotional materials, inviting people to have their say.

A view seeking survey was developed for
Supporting Dorset CCG with the design of the young people’s review has been a refreshing and enjoyable experience. The young people I work with have fully engaged in the process of developing the engagement with the aim of making it more appealing and accessible to their peers. All too often organisations consider young people too late, but during this young people have been at the heart of it from the start.

> Terry Husher, Participation Youth Worker Bournemouth Early Help for Young People

For further information visit www.dorsetsvision.nhs/BeHeard.
One of the Dorset Cancer Partnership’s main ambitions is to engage cancer patients and carers into helping shape the future of cancer services in Dorset. The Dorset Cancer Patient & Carer Group is an independent voice for people affected by cancer and the existing members have been highly committed to the group for many years. The group is currently charging forward with a recruitment drive to enlist new cancer patient representatives to provide their views and feedback on behalf of all cancer patients in Dorset.

In November 2017, an expression of interest workshop was held for patients and carers interested in becoming part of the Dorset Cancer Patient & Carer Group. The attendees learned about what being a member of the group entails and about opportunities to get involved. They also discussed the qualities needed in a good patient representative and how they can help to make a big difference to cancer services.

Our last expression of interest workshop was on 21 March, followed by a training session for the new recruits in mid-April. More expression of interest workshops and training sessions will be held throughout the year. Our existing group members are keen to offer a warm and friendly welcome and provide the new members with the support and training required to carry out this vital role.

The group offers a range of opportunities to get involved, such as:

- Providing feedback on patient information and services, e.g. completing patient questionnaires.
- Becoming a Dorset Cancer Patient & Carer Group representative.
- Becoming a member of steering groups for cancer services.
Support and training for public and patient participation

- We support our patient, carer and public representatives in a variety of ways.

We set up our Supporting Stronger Voices forum to bring all representatives together several times a year, providing the opportunity to network and support each other, provide feedback and information and/or training as appropriate to support them in their roles, e.g. training on social media, including the use of Twitter.

Our public engagement team are readily available to provide ongoing support, answer queries, and provide information.

The Chair of our STP Public Engagement Group, our Maternity Voices Representatives and Lay Representatives on our Governing Body and other committees that have defined role descriptions have regular 1:1 monitoring meetings and are remunerated in line with national guidance.

Dorset Cancer Partnership Patient Group members are provided with a one-day training session to support them in their roles.
GP practice Public Participation Groups (PPGs) are vitally important in enabling patients to be involved in influencing the way that their own local health services are delivered. That’s why, in line with our engagement and communications framework, our team is working with GP practices to help them grow and strengthen their groups.

PPGs allow patients to contribute their views and to support their practices in a variety of ways. This could be through making suggestions for improvements to services and the practice environment, taking part in patient surveys, running health promotion events, supporting the running of flu clinics and producing newsletters.

In 2017/18, and in response to requests from PPG members, we ran four PPG networking conferences, two in each side of the county. These widely publicised events proved popular, and attracted approximately 120 people from across the county. The events received great feedback and provided opportunities for patient groups to come together, exchange ideas and learn from one another. We also supported the delivery of an equally popular Wessex Voices PPG conference in February 2018 where PPG members learnt about the structure of the NHS and participated in a variety of workshops.

We have designed and developed a single identity for PPGs which practices across the county, and their groups are embracing. The ‘Have You Heard’ artwork has been incorporated into a wide range of promotional materials including posters, leaflets, z-cards and pull-up banners. These can be ordered free of charge by practices and PPGs, and have attracted a number of positive responses.

Responding to requests from practices and PPGs, our team is now working on developing materials which will help groups manage their meetings as well as electronic displays for practices to use on their waiting room TVs.

There are now two dedicated officers who work directly with our Primary Care team to identify practices across the county who need help in establishing effective PPGs. These officers will support practice recruitment events and will work to enable PPG representatives to network in their localities, enabling them to share information, learn from one another, and arrange events.

Our work with Dorset’s GP practice PPGs is still in its early stages. We will continue to work closely with them in the forthcoming year to develop a more robust PPG network, and, with it, wider opportunities for local people to get involved with the NHS.

Anyone wishing to get involved with or learn more about their own PPG can talk to staff at their GP practice.
It’s good to finally have a cohesive PPG promotional pack for all GP Surgeries to use and patients to recognise.

> Carlisle House Medical Practice, Poole

The materials look very promising. They are clear, easy to read and will get the message across.

> Nicky Chivers,
Practice Manager, Bere Regis Practice

A very useful and varied PPG promotional pack. Really quite exciting.

> Amy McGowan,
Patient Services Manager, Tollerford Practice

Primary Care Engagement

> In line with the General Practice Forward View and other national guidance, the CCG’s Primary Care Strategy aims to deliver improved GP services across Dorset’s 13 localities. These locality transformation plans have targeted a number of areas, including Improving Access to GP services (IAGPS) streamlining back office and IT systems, supporting high-risk patients in order to prevent hospital admissions, and workforce planning.

We have been working with our Primary Care Team to ensure that we identify and engage with key members of local communities about these changes, and have supported the delivery of several locality engagement events and collated feedback from participants to inform the developing plans.
How local voices influenced commissioning decisions

Clinical Services Review

The Clinical Services Review was launched at the end of 2014 and proposed widespread changes to Dorset’s three acute hospitals and 13 community hospitals.

Following extensive pre-consultation engagement during 2015/16, a formal public consultation was launched on 1 December 2016 and ran for three months until 28 February 2017.

We asked for people’s views in a wide range of ways, the details of which can be found in last year’s annual report.

All responses were read, coded by theme and analysed by Opinion Research Services (ORS) during March to June 2017.

Headline findings were presented to various audiences, such as the CCG’s Governing Body, Clinical Reference Group, the Patient and Public Engagement Group (PPEG), Supporting Stronger Voices forum and Clinical Working Groups, as well as at PPG networking events. They were made available to NHS and local authority staff.

You said, we did...

Concerns about transport and travel times

CCG commissioned additional work from Dorset County Council and SWASFT to review non-emergency and emergency travel times.

Concerns about quality and safety

We re-examined our approach to clinical risk and re-assessed/updated the CSR Equality Impact Assessment involving PPEG/people with protected characteristics.

Concerns about health and wellbeing

CCG asked Public Health Dorset to review the impact of proposals, especially on people in rural areas.

Specific concerns about acute and ICS proposals

Revised proposals for North Dorset, Weymouth and Portland, Christchurch and Bournemouth and maternity and paediatrics.
20 Drop-in events attended by 1,963 people

1,004 telephone surveys

14 focus groups attended by 133 people

Written submissions: 245

Questionnaires: 18,732 returned

9 petitions

75,570 signatures
Equality Impact Assessment

Throughout the design and consultation phase we have continually tested our models of care against Equality Impact Assessments. Following consultation these were reviewed and updated to reflect some of the feedback provided during consultation and in line with best practice. In doing this, we followed a robust process which involved review by the CCG’s leads for service delivery; independent review by the Equality and Diversity Lead for Dorset HealthCare NHS Trust; and a workshop for service leads in the provider organisations.

We then arranged a second facilitated workshop for PPEG and additional invited members of the public/staff who collectively represented the nine protected characteristics. This was to ensure that the process was inclusive and realistic. The revised and updated EIA was then sent for legal review before being scrutinised by the Quality Assurance Group and publication in July 2017. The EIA can be found at bit.ly/DCCGEqualityImpactAssessment

They were then shared at two meetings of our stakeholders and members of the public in June, and with various other key audiences including the CSR Joint Health Scrutiny Committee and West Hampshire CCG and public stakeholders.

The headline responses and the full report were posted on our website.

Summary chapters and the full report were used to inform the Governing Body’s detailed deliberations and workshops held from June to August 2017 prior to the special meeting at which the CCG Governing Body made its decisions on 20 September 2017. Representatives from key stakeholder groups were invited to attend the decision-making meeting to observe the process.

Concerns about transport and travel times were consistent themes throughout the consultation responses. To address these concerns we commissioned additional work from Dorset County Council and South Western Ambulance Services Trust (SWASFT) to review non-emergency and emergency travel times. You can read the reports here (links)

As a result of this local transport authorities and the NHS have joined forces for the first time to look at ways in which transport and access to local services can be improved across Dorset.

The aim of the Integrated Transport Programme (ITP), is to help to make sure that everyone can get to the care they need and address some of the concerns regarding transport and access to healthcare were raised during the CSR.

We continue to work closely with SWASFT to monitor response times to emergency calls.

Following the CSR consultation, the CCG changed its commissioning proposals in four areas:
North Dorset

To create community hubs with beds at existing community hospitals in Sherborne and Blandford and a community hub without beds in Shaftesbury, possibly at a different site to the existing Westminster Memorial Hospital.

Concerns about:
- Travel and transport
- Access to community beds
- Rural nature of the area and isolation
- Large additional housing developments planned

The CCG Governing Body decided to maintain a community hub with beds at Shaftesbury whilst working with the local community until a sustainable model for future services is established, based on local health and care needs. This may be at a different site to the existing hospital.

An engagement reference group, bringing together community representatives and health and care professionals from North Dorset, Wiltshire and Somerset has been set up to make this a reality. It is chaired by the local Lead GP. The engagement group meets regularly and is supported by the CCG. It will consider options for community services in the area and how to engage with the wider community.

Of the three community hospitals in the locality – Weymouth Community Hospital would become a hub with beds and there would be a hub without beds at Portland. Westhaven Hospital would be neither and could close.

Concerns about:
- Increased travel times and increased distance
- The need for local services
- Ease of access for elderly, visitors and people without their own transport
- There were some calls for beds to be retained at both Portland and Westhaven hospitals

We reviewed the hospital sites at Weymouth and Portland. There are limitations to the site at Portland, including access, so we will explore an alternative site for a hub without beds.

Westhaven hospital site is too small for a community hub with beds and less accessible than Weymouth. Although Weymouth is larger, the cost of developing this site is greater than anticipated due to poor infrastructure.

We decided to maintain services at Westhaven Hospital until the community hub with beds at Weymouth Hospital is established and staff and services transferred.
A hub without community beds at Christchurch Hospital (with the use of short term care home beds) with access to a full range of services and community beds on the proposed Major Planned Hospital site either at Bournemouth or Poole.

Concerns about:
- Care and diagnostic needs
- The local care home market
- Travel times

The CCG considered access to community beds for parts of Bournemouth, Christchurch, Ferndown and West Moors; the consultation response; and the need to support some of our more deprived communities with outpatient and diagnostic services closer to home.

To commission the hub without beds at Christchurch and, in addition, to commission a community hub with beds on the Major Emergency Hospital site. This is in addition to a hub with community beds as the Major Planned site. So there will now be hubs with community beds at both Bournemouth and Poole Hospitals.

Option A – Consultant-led services at the major emergency hospital in the east of Dorset plus an integrated service across Dorset County Hospital and Yeovil Hospital in neighbouring Somerset.

Option B – A single consultant-led centre that covers the whole of Dorset, based at the major emergency hospital in the east of the county.

This was the most contentious proposal of the CSR. There was strong preference for option A over option B, but many people saw option A as ‘the least worst option’

Accessibility and safety of mothers and babies in the west of the county were the main concerns

Strong overall support for retaining consultant-led maternity services and overnight paediatric services at Dorset County Hospital, despite the risks highlighted by the Royal College of Paediatrics and Child Health

Before public consultation, we did not identify a preferred option for maternity and paediatrics. Following consultation, the CCG Governing Body decided to commission option A.

Subsequently, Somerset CCG announced that it was to carry out its own clinical services review, and as a result, in December 2017, Dorset CCG announced its intention to work to maintain a consultant-led maternity and overnight children’s service in Dorchester as part of a single maternity and paediatrics service for Dorset’.

The Governing Body will need to agree a way forward this year. If a sustainable model can be found, then we will consult with the public on these proposals before making any decision.
The Consultation Institute (TCI) were invited to quality assure the CSR consultation process through an assessment process and provide guidance and advice on how to meet best practice standards. This was to ensure local people in Dorset received the best possible public consultation.

In July 2017 TCI confirmed that the CSR consultation exercise was consistent with their good practice standards with the possibility of achieving Best Practice once TCI could review the detail of the consideration phase. In September 2017 Dorset CCG received confirmation that the consultation had been upgraded to Best Practice.

Following our assessment of this consideration phase TCI is prepared to upgrade the consultation to Best Practice, on the basis of the genuine commitment of the CCG to listening and modifying their proposal...We would like to congratulate you on this ‘upgrade’ and wish you well in your continuing dialogues with the communities in and around Dorset.

> Mike Bartram (Assessor), The Consultation Institute
How local voices influenced commissioning decisions

Mental Health Acute Pathway (MHACP) Public Consultation

> The Mental Health Acute Care Pathway review was launched in 2015 to focus on how services could be improved for approximately 8000 people living with serious mental illness in Dorset. It featured community-based services in safe places that would help people to manage themselves when approaching or in crisis, and help to avoid them ending up in an emergency department or police custody.

It featured strong co-production. The preferred options were for two retreats (Bournemouth and Dorchester), three community front rooms (Purbeck, West Dorset, North Dorset), seven recovery beds for the whole of Dorset and enhancing the existing 24/7 crisis line at peak times (Connection service). It also proposed 16 additional inpatient beds – four at the Forston Clinic in the west and 12 at St Ann’s Hospital in east Dorset. It also proposed relocating 15 beds from the Linden Unit in Weymouth to St Ann’s Hospital and closing the Linden Unit when the other beds were in place.

Formal public consultation ran for two months from 1 February to 31 March 2017 and used similar methodologies to the CSR consultation – open questionnaires, drop-in meetings, digital platforms, advertising and use of the media.
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<th>You said</th>
<th>We did</th>
</tr>
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<td>Concerns about the closure of the Linden Unit</td>
<td>Reviewed the case for closing the Linden Unit</td>
</tr>
<tr>
<td>Questions about changing the bed base to meet demand</td>
<td>Reviewed the bed base including male and female provision to ensure it matches demand</td>
</tr>
<tr>
<td>Concerns about the male/female bed number split, especially in the west of the county</td>
<td>Reviewed inpatient services to ensure that everyone can get to a bed in Dorset within 31 miles</td>
</tr>
<tr>
<td>Questions about staffing of the retreats and community front rooms</td>
<td>Identified one off funding to double run services while testing the retreat</td>
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<td>Questions about public transport</td>
<td>Reviewed the travel analysis and changed the location of the community front room in North Dorset from Sturminster Newton to either Shaftesbury or Gillingham where there are better transport links and an anticipated population growth.</td>
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</table>
The main focus of Staywell Dorset is to engage and inform the hard-to-reach group of young people aged 15-30. After all, when you’re that age you’re going to live forever, right?

By creating a site with this group in mind, we present Dorset’s health services and winter/summer messaging in a way that young people find accessible, interesting, and most importantly, memorable. This enables them to take ownership of their own healthcare and sets them up to make informed choices for the future.

It was important that we didn’t miss the balance between entertaining and informative, and that we hit the mark with the demographic. To ensure this, we engaged with Dorset Youth Council and other young people before the site launched, and continue to encourage feedback from visitors to ensure the site stays relevant and helpful.

The site is mobile-friendly, uses bright, bold colours and characters, and has a casual tone that is more accessible to the age group without being less informative than your average health website.

We regularly update the site with blog posts that tie in with the season, holidays and awareness days, which we and our partner organisations share through social media to ensure we’re hitting our demographic county-wide.

You can see for yourself at www.staywelldorset.nhs.uk.

Staywell Dorset:

- Helps young people understand health services, and when and how to use them.
- Tailors winter/summer messaging to young people, which gets them thinking about prevention in a way that will stick with them for when they need it. For example, during the summer festival season and we will tie in advice on alcohol and drug abuse with our usual dehydration/sunburn messaging, presented as tips on staying well at a festival.
- Guides young people to more detailed local online information that they might not have otherwise known was available, such as Dorset Mind or NHS Choices.
Social Media

Social media is a key way to ensure we reach the correct age group. As well as sharing blog and site updates, we also created a Facebook profile filter for the winter season, and used targeted advertising to share the site and ensure it was being seen by the right demographic – young people in Dorset.

- 667 web referrals from social media channels.
- 1239 click-throughs from Facebook ads.
- Facebook ads had a reach of 60,884 young people in Dorset.

A big difference to the usual out of date medical advice websites… It feels fun and light-hearted but without making light of serious situations.

Really good tone. Engaging and contemporary.

> Feedback from young people in Dorset

> GP feedback from outside Dorset via Twitter

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Andy Sixsmith @AndySixsmith • 14h

Great website Dorset - genuinely easy to navigate and really easy navigation to access information, help or services that relates to the person @rheeside @DorsetCCG

NHS Dorset CCG @DorsetCCG

Are you using the right service this Bank Holiday? Visit the staywelldorset.nhs.uk website for more information on choosing well. Or, if you still aren’t sure - call 111
DORSET’S VISION

> Dorset’s Vision was originally created as a central hub for people wanting to learn more about the proposed changes to acute and community health services and mental health services, and take part in the CSR and MHACP consultations.

It hosts our social media feeds, and is mobile responsive, ensuring people can keep informed on the move, and that all of our consultation news and information is available from one place.

During consultation, our goal was to allow people to find the information they needed to make an informed decision quickly and easily, and that this information was easy to understand.

We designed the site with this in mind – putting the most relevant information on the main page, with the option to drill down if more detail was needed. Information was provided in different formats, including animation and video to suit people’s different needs, and to support them to have their say.

Following the completion of the consultation and publication of the results, Dorset’s Vision underwent a redesign to focus more on the future of services in Dorset. The aim was to provide the public with information about the results, as well as keeping them informed of the most recent developments and news concerning implementation.

Dorset’s Vision acts as a source of news and information. We regularly update the news feed with features, case studies and information on how we’re working with partners and local people to improve Dorset’s services. It also acts as a resource library, holding in-depth information, such as presentations and meeting notes, that can be accessed freely by the public.

The site also acts as our main engagement hub. Currently, as well as information on ICS developments, it hosts the survey for the Be Heard review for integrated children’s community health services.

For more information, visit www.dorsetsvision.nhs.uk.

Individual visitors over the last year: 7854 • page views over the last year: 25,190
Social Media

> Following our successful ‘Mine, Yours Ours’ campaign for the Clinical Services Review, we’ve continued to expand our social media offering over the course of the year, producing original, eye-catching content that encourages the general public to interact with our campaigns, reviews and latest news in a timely manner.

Our Dorset CCG Twitter account now has 5848 followers, and we have a total of 2623 followers between our two Facebook pages (NHS Dorset CCG and Dorset Maternity Voices).

For many people, social media is the first port of call for updates and news on current events, so it’s important that our social output is relevant and up-to-date. During the CSR, social media played an enormous part in keeping people informed and involved with the latest developments, and for providing information on local events – for example we were able to share the outcomes of the decision-making Governing Body meeting in real time. We have continued to use our social media feeds to engage with Dorset residents and encourage involvement in current projects.

We compose new tweets/Facebook posts daily to engage with our audience and ensure we are providing new, interesting and timely information, often tying in with national campaigns tailored to Dorset residents to encourage local awareness. We produce our own social media ‘plaques’ which help our messages stand out in people’s news feed, and familiarises people with the different visual identities of our campaigns and reviews.

As well as producing our own content we are able to share that of our partners and vice-versa, helping each other to reach larger audiences and encouraging system-wide working. We also share relevant content provided by NHS England and Public Health England. By using a mixture of our own content and that from other sources, we can ensure our social feeds are interesting and engaging.

We constantly monitor our social feeds to ensure that any queries or comments that come through are responded to quickly and accurately.

.tasks_social_media
Priorities for next year

Our priorities for the coming year:

• Continue to support and strengthen the work of the STP PEG
• Review and refresh membership of the Health Involvement Network
• Further develop a network of patient participation groups in general practice
• Support the engagement and consultation elements of CCG-led reviews including dementia, community services for children, primary care transformation programmes and upcoming reviews such as physiotherapy services
• Consolidate work begun this year to look at how we can develop a process for capturing patient experience data so that it can be fed into commissioning decisions alongside public engagement information
• Make better use of available population mapping data such as RightCare programme data so that we can build a better understanding of health inequalities within Dorset.