Annual report on patient and public participation
1 April 2018 – 31 March 2019
NHS 70

5 July 2018 marked the 70th birthday of the NHS, which was established in 1948 as one of the major social reforms following the Second World War by the then Health Secretary, Aneurin Bevan, at Park Hospital in Manchester.

For the first time, hospitals, doctors, nurses, pharmacists, opticians and dentists were brought together under one umbrella to provide free health services at the point of delivery.

To launch the NHS70 celebrations, we were pleased to welcome the team from the BBC Radio 4 Today programme to Dorset, who interviewed the CCG Chair Dr Forbes Watson about the work underway across the county to improve services for future generations.

The landmark birthday of the NHS was celebrated by staff and members of the public across Dorset over the spring and summer months. There were numerous events to mark the occasion with some great media coverage, the launch of a new Our Dorset website and support from partner organisations who flew the NHS70 flag on the day itself.

This year’s patient and public participation annual report continues the celebration with the NHS theme illustrated throughout.

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It was a great privilege to attend the service at Westminster Abbey last July to celebrate the 70th anniversary of our NHS. There was a strong sense of joyful celebration but also of serious commitment to improvement. David Jenkins

Lay member for Patient and Public Involvement (PPI) and vice chair of the NHS Dorset CCG Governing Body

Welcome

Our NHS belongs to us all and it is vital that clinical and managerial leaders keep closely connected with the experiences, priorities and needs of the people whom they are there to serve. I am pleased to be able to introduce you to NHS Dorset CCG’s third Annual Report on Patient and Public Participation. You will see that a great deal has been going on. Our Health Care Ambassador Network, the Be Heard initiative for young people, the Supporting Stronger Voices Network, our support to GP Practice Patient Participation Groups as well as to our Public Engagement Group (PEG), are all exciting examples of what is being achieved. Staff who engage through social media also make a very important contribution. I am particularly proud of our developing links with parish and town councils, the most local and community-based tier of local government. But I am sharply aware that there is always more that can and should be done to keep in close touch with people and communities and in particular, to talk and write in jargon-free, plain language.

I have greatly valued the opportunity to contribute to this important engagement work over the last six years and I wish my successor, Kay Taylor every success in taking this forward. Thank you for reading this report and please do stay involved.

Introducing our new lay representative

As we say a fond farewell to David, we are pleased to welcome Kay Taylor into the role of Governing Body lay representative for public and patient involvement from 1 April 2019.

Kay has worked in education for more than 30 years, starting out in the Highlands of Scotland. Kay is due to retire from the post of Executive Principal at the Minerva Learning Trust in August 2019, where she leads four schools in Bridport and is responsible to a board of trustees. Prior to this she was head teacher at Sir John Colfox school in Bridport.

Kay has a strong interest in the health of young people, particularly with mental health services. We look forward to working closely with Kay.
Our engagement process

The CCG is committed to placing the views of local people at the heart of the NHS in Dorset and to making sure that they are included as equal partners in the design of local services.

We have a tried and tested process for public participation and engagement, developed in line with national guidance, good practice and our Duty to Involve. It includes a number of stages to promote meaningful engagement: audience analysis, representation, gathering insight, communication planning, engagement and consultation on proposed changes and an equality impact assessment.

The process is reviewed regularly to take account of changes to policy and national guidance, which is available on our website at www.dorsetccg.nhs.uk/involve.

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Our engagement process

The foundation stone of our engagement structure is the Health Involvement Network (HIN), which is a database of people interested in helping to improve health services in Dorset.

We have approximately 800 members of the HIN at any one time. We constantly promote membership of this group to ensure that the widest range of people learn about opportunities to get involved.

In addition to the HIN, there is an established Supporting Voices Forum (SSV), which represents around 200 organisations across Dorset. We are looking at how we can develop SSV so that it, too, can become a vehicle for patient engagement across our Integrated Care System (ICS). You can read more about SSV on page 10.

Collectively, the PEG, HIN and SSV make up what we call our platform for patient and public engagement who sit on our Governing Body to ensure that public engagement is given due priority. Until 31 March 2019 when his term of office ended, this was David Jenkins, who was also the Deputy Chair of our Governing Body.

David also sat on the Our Dorset PEG, which was set up two years ago to support participation and involvement across the ICS. The PEG brings together about 25 people who have rich life experience and are drawn from across Dorset’s geography. Collectively, they act as a critical friend.

Informed audiences

From April 2015, all GP practices in England were required to form a patient participation group. The 1586 practices in Dorset and we are working closely with PPG chairs and practice managers to develop a stronger network of PPGs to support patient and public voices at a local level.

"It's been a fascinating and fruitful year for the Our Dorset PEG. We've really grown into our role, which is not to carry out engagement but to act as a sounding board – a sense check on programmes of work in the Integrated Care System (ICS).

"We operate a 'you said, we did' policy. Several of the pieces of work we've looked at have already done that, telling us that our input has been listened to and acted upon. We continue to encourage teams across the ICS to use us to test the narrative, so that we can provide informed feedback as part of the person-centred service design we're all working towards.

"About a dozen of us are also involved with other groups, projects and programmes around the ICS, which works on two levels. Firstly, we as individuals take our own experience and knowledge with us, as well as a wider context which comes from involvement with the PEG, and act on that in the way that we think is best for us.

"But the PEG has also meant that I've brought back, enriching us as a group." - Ian Gall

PEG Chair
“I passionately believe that all people, regardless of personal circumstances or background, should have equal access, experience and outcomes from health and social care services. Sometimes, this doesn’t happen because policies or procedures unintentionally exclude or discriminate against people with protected characteristics.

“I was recruited to the PEG after I took early retirement from the Equality and Human Rights Team at the Care Quality Commission, where I was responsible for ensuring that equality impact assessments were carried out on new policies and procedures. I was absolutely delighted to be asked to review the processes in Dorset.

“Equality impact assessments (EIAs) help organisations to improve and promote equality by identifying ways to remove barriers and improve access for people with a protected characteristic. By examining our health and social care services in this way, everyone benefits.”

“I have several roles across patient and public involvement. As well as being a member of the PEG, I am a representative on NHS England’s Learning Disability and Autism Advisory Group and a champion for Healthwatch Dorset.

“We’re all recipients of healthcare in one form or another and while most experiences will meet our needs and expectations, we have a role to play when our healthcare has not been as successful or has failed to meet certain standards.

“The public need to be at the forefront of any changes to how services are delivered to ensure proposals are fair and will only lead to improvements. In the last year, I have influenced the consultation process on the new Long Term Plan for autistic people and those with learning disabilities and I have played a role in interviewing Dorset Council’s new Executive Director for Adults.”
Professional support for public engagement

Professional responsibility for leading, planning and delivering public engagement activity sits with the Communications and Engagement Team, which is part of the Engagement and Development Directorate. However, we encourage the view that engagement and good communications are part of everyone’s job.

The team supports and trains staff and GP leaders so that they can feel confident in delivering key messages and engaging with a range of audiences and stakeholders. 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.

To help this we have a group of Flexible Friends, who are staff from all grades and departments throughout the organisation who volunteer to support engagement events. They take the learning back to their own teams and increase awareness of the value of public engagement.

Dorset is one of the first Integrated Care Systems (ICS) in England. This means all NHS organisations and local authorities serving Dorset have been working more closely together as partners to benefit local people.

As a result, over the past year the Communications and Engagement Team has worked even more closely with other NHS organisations and local authorities (including Public Health Dorset) that make up Dorset’s ICS – known as Our Dorset.

We do this through two networks of the ICS communications leads and public engagement and patient experience leads, which meet monthly or bimonthly. Each network has cross-representation to ensure that the synergy between the two functions is captured. The networks provide a forum for the partner organisations to pool resources, share skills and provide joined-up communications and engagement across the ICS.
Supporting Stronger Voices

Our event at the Allendale Centre went down a storm! We had over 110 guests representing patient, local authority, community, minority and voluntary groups.

Our guest speakers, Dr Karen Kirkham (Assistant Clinical Chair for the CCG) and Jill Haynes (Dorset Council’s Deputy Leader) gave some great examples of how health and social care services are working closely together. For a real flavour of the event, visit ourdorset.nhs.uk to watch a short film produced on the day.

The Supporting Stronger Voices (SSV) forum was set up by the CCG to support patient, carer and public representatives so that we can extend invitations to attend to more people from across Dorset’s Integrated Care System.

The updated objectives are to provide:

- The opportunity for public, patient, carer, voluntary and community representatives to meet and build relationships.
- Information and updates to help develop a collaborative understanding of Dorset’s health and care system.
- Opportunities for people to provide their views on areas of Dorset’s health and care system and to inform service provision or change.
- Opportunities for training to support members of SSV.

Our Dorset Engagement Leads Network

Our Dorset Engagement Leads Network met every 2 months throughout 2018/19.

This network brings together staff from local health and care organisations in Dorset – each of whom have a public engagement role, working with local people in some way to ensure that their views inform service provision and development.

By working together, we can find opportunities to join up our view-seeking and avoid asking the public the same thing twice! We can also learn from each other and spread good practice.

We worked closely on planning and carrying out the Discovery Project, which you can read about on page 22, and are currently developing plans to train staff across the county to be able to better co-design services with local people.

Find out more and get updates at ourdorset.nhs.uk

"Bringing together the engagement leads has been really insightful. We are already starting to see the benefits of partnership working through an upskilled workforce to improve the capacity and quality of our engagement work."

"The network offers great potential to work together to raise the profile and influence of the public and patient voice throughout health and social care."

- Chris Skinner
Partnerships and Engagement Officer, Dorset Council

"Working together on engagement as a system helps us to share information, ideas and solutions, which has been really beneficial to my Trust.

"I’ve been introduced to new contacts through the engagement leads, reducing duplication of work and leading to a cost-efficient service in other areas of my portfolio. The network has helped me think about services out of isolation, producing a unified, aligned approach."

- Laura Northeast
Head of Patient Experience
Every year, we refresh the Engagement and Communications Framework to ensure due consideration is given to new operating priorities and different ways of working.

Within the CCG, assurance is provided in a number of ways, including regular update reports to the executive team and Governing Body. Going forward under the recent local government reorganisation, our work to involve local communities in decision-making alongside our wider engagement activity will be externally reviewed by Dorset Council and Bournemouth, Christchurch and Poole (BCP) Council. This will take place through their respective Health Overview Scrutiny Committees (HOSCs) for the west and east of the county. On occasion, this will also take place via Joint Health Scrutiny Committees (JHSC), which are set up to consider specific proposals that have implications for health and social care services used by people across Dorset, such as the Clinical Services Review.

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

The CCG also contracts for advice and assurance as and when appropriate, depending on both the scale and nature of public consultations.

We continue to follow national guidance and work closely with NHS England’s national and regional communications and engagement teams in order to share and learn from emerging best practice across the country.

In July, we won the ‘Improving Patient & Community Engagement’ Healthcare Transformation Award 2018. This was specifically for the Integrated Care System in Dorset.

The award was for the key role that the PEG and its predecessor played in supporting system-wide integrated public engagement.

In addition, 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’.

We were rated as ‘high good’ in every area, with many actions rated as outstanding. One of the areas for improvement, both nationally and locally, was to develop more co-ordinated working between quality, engagement and equality teams. Work has already begun on this.
We recognise how important it is to engage with local people in all corners of our county. That’s why we’ve been supporting GP practices to strengthen their patient groups. This area of work gives us the greatest opportunity to speak with patients about the services we provide and invite them to get involved.

Jim Gammans and Gill Foott, our Engagement and Communications Coordinators, have the dedicated role of supporting the development of a stronger network of PPGs across the county. Since their appointment in January 2019, they have been working with practice managers and PPG groups across the county to do exactly this. They have already supported PPG recruitment drives and are regular attendees at PPG meetings, where they offer advice and guidance on setting up and running a group.

Gill’s presence has been really beneficial in re-focusing the group and creating a positive and supportive environment, so thank you!

- Sarah Faulkner, Practice Manager of Walford Mill Practice, Wimborne

To enable PPGs to learn from one another and about developments in the wider NHS, we invite members to be part of our six-monthly networking events at different locations across the county. These events are popular and feature speakers and exhibitors from across the health and care system. GPs, practice managers and PPG group members themselves have all been involved in presenting at the events.

Thanks to the CCG for investing in PPG support.

- Andy Hutchings, an advocate for patient and public involvement and a member of a PPG in Weymouth.

We also worked with three local groups to produce short films about their activities. Bere Regis, Lilliput and The Royal Crescent Practice in Weymouth were delighted to be invited to be involved in this work. The case study films now feature on the Our Dorset and relevant GP practice websites.

Our suite of promotional PPG materials continues to be popular with groups. After making printed posters and banners available, we received requests for editable versions which we were happy to provide.

Jim and Gill have grasped the opportunity that social media offers to keep in touch and promote the work of PPGs. Follow them on Twitter @GillFoott and @JimGammansCCG.

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- Andy Hutchings, an advocate for patient and public involvement and a member of a PPG in Weymouth.
Case study: Musculoskeletal Physiotherapy Services Review

Stage One - Insight gathering
The team looked at a number of sources to better understand the situation in Dorset and learn from other parts of the country including:
• Outcomes of the Physiotherapy Review conducted in 2014.
• Patient feedback from providers (Friends & Family Test; Complaints & Compliments).
• A literature review of best practice and evidence for alternative models.

Stage Two - View-seeking
A survey was produced and shared online, at community events, at physiotherapy clinics and meetings to gather views from patients, carers and staff about what is working well and what could be improved. Bournemouth University’s Market Research Group (MRG) hosted the survey, analysed the results and provided a report to summarise the outcomes.

Stage Three - Special Interest Groups
The project team used targeted social media, emails and face-to-face visits to gather insight from special interest groups identified in the Equalities Impact Assessment as being most greatly impacted by changes to MSK services, including older, working age and transgender people.

Stage Four - Reference group
Participants were invited to join a reference group, which was also attended by physiotherapy professionals, to help shape and design improvements to the service over the course of three sessions. Session one set out success criteria for any future model, such as timely access to services.

Stage Five - Design sessions
In session two, ideas from the group and examples of models in other areas, such as self-referral, were considered against the agreed criteria for success. In session three, the group fed back on the first draft of options for a physiotherapy service and a second draft was then produced and emailed to all members of the reference group to further refine the options.

Next steps
Comprehensive feedback was received from professionals, patients and carers. The draft options were updated and sent out for a final vote. 45 people, including 15 GPs, 6 patients and carers, public health and numerous physiotherapy professionals, voted. The review team now awaits approval of the proposals and a new project will begin to implement the changes.

Case study: Mental Health Acute Care Pathway Review

The review focused on how services could be improved for approximately 8,000 people living with serious mental illness in Dorset.

Engagement, consultation and co-production informed the preferred options and implementation has now begun. Public consultation took place for eight weeks from February 2017. One of initiatives resulting from the review is the Retreat in Bournemouth.

The Retreat provides a safe place where someone in crisis can self-present, be referred to by emergency departments, GPs and other services or taken directly by police, ambulance, family or friends.

Opened in July 2018, the Retreat operates from 4.30pm to midnight daily.

Early evaluation showed that over 3,306 people visited the Retreat in 2018. There are already signs that the service is helping people to manage crises differently.

Of 176 people frequently seen by psychiatric liaison services prior to its opening, 66% had not returned to see psychiatric liaison.

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The Integrated Community Children’s Health Service (ICCHS) project aims to help improve physical health services for children and young people. Listening to what young people, their families and carers have to say is an integral part of this. 54 participants attended the first of three design events held during October half-term, with good representation from children, young people, families, the voluntary sector, partners and professionals from a range of backgrounds. We had fun getting to know each other and learning how we can work together to future-proof children’s physical health services.

Three key areas, namely communication, relationships and ‘where and when’, were identified as themes that will form the future of co-design work to tackle barriers and gaps.

One hundred percent of attendees rated the event as ‘excellent’ or ‘good’ and felt it was well organised, had a good mix of children, young people and professionals, and had a good, inclusive format. We plan to meet again in the spring of 2019.

Feedback the views of children, young people and their families.

Identify and start to discuss how to remove barriers to joining up physical health and care services for children and young people.

Identify and explore how we might close gaps in service provision together.

CASE STUDY: BE HEARD - WORKING WITH CHILDREN AND YOUNG PEOPLE

It can be hard to hear the views of children and young people. This is one approach we took in Dorset to make sure they had a say in shaping services for physical health.

Being involved with the CCG and its work has made me realise that my voice and opinions do count towards decisions that are made for young people.

I now understand how this work is being used to help meet the needs of young people and I have seen how the CCG is working to benefit us all. These events made me feel part of something important and I believe that what I was suggesting was considered.

I encourage other young people to get involved in projects that impact upon them, otherwise the decisions will be made on their behalf and could be the wrong approach.

For example, an idea that myself and my friends put forward on the day was about confidentiality and decision-making when you are seeing your GP and you are under the age of 16.

The CCG would have never known about this issue unless it was raised by young people who it has affected in the past.

- Abi Morgan
17 year old Be Heard participant

The focus of our co-design event was to:

- IDENTIFY AND START TO DISCUSS HOW TO REMOVE BARRIERS TO JOINING UP PHYSICAL HEALTH AND CARE SERVICES FOR CHILDREN AND YOUNG PEOPLE.
- IDENTIFY AND EXPLORE HOW WE MIGHT CLOSE GAPS IN SERVICE PROVISION TOGETHER.
- FEEDBACK THE VIEWS OF CHILDREN, YOUNG PEOPLE AND THEIR FAMILIES.
In our annual report, we outlined how the views of around 600 families were used to inform the introduction of Maternity Voices – the name given to our Maternity Services Liaison Committee.

Maternity Voices brings together maternity service providers and commissioners to listen to the experiences of families using these services. We can now build on that story. Some plans have been implemented with continued active co-production.

You said you wanted one trusted source to the experiences of families using these services.

- You said you wanted support to develop your overall health record.
- You said you had difficulty accessing the maternity system…
- You said you needed access anywhere – preferably online. You thought they might.

We ensured parents were given easier access. We ensured support to the mother.

“Love it! So much information in one place which is ideal, also available is more geared up towards the mother.”

- Local dad, January 2019

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Case study: Better Births – continuing engagement and co-design

In our previous annual report, we outlined how the views of around 600 families were used to inform the introduction of Maternity Voices – the name given to our Maternity Services Liaison Committee.

Maternity Voices brings together maternity service providers and commissioners to listen to the experiences of families using these services. We can now build on that story. Some plans have been implemented with continued active co-production.

You said you wanted one trusted source of local information for mums, dads and partners, and one place to self-referrer into the maternity system…

In true collaboration with local families, Dorset Maternity Voices representatives, local midwives, local health visitors and other key stakeholders, we have developed a local online guide to pregnancy, birth and beyond – the Maternity Matters Dorset website, to provide a single point of access for referrals into the maternity system, which means individualised care planning can begin from the initial contact.

You said you felt abandoned once your baby was born and that healthcare professionals do not care for your baby’s physical and mental health following birth…

We redesigned the postnatal care pathway to include:

- Extended discharge at 28 days
- Standard operational procedures (SOP) for health visiting and midwifery
- The development and use of Maternity Support Workers (MSWs)
- New postnatal consultant-led clinics

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We have begun developing two films with Bournemouth University, using animation and gamification to educate families in an informative and innovative way.

The films aim to support understanding of what to expect, what you can do to support your own emotional wellbeing and when to get support during pregnancy and postnatally.

In January 2019, we held two showcase events at the Dorford Centre in Dorchester and at a pop-up shop in Poole’s Dolphin Shopping Centre to demonstrate progress so far and gain feedback on the developments from local staff and families.

86% felt happy about the developments; 79% felt maternity services and the people using them will definitely benefit, while 21% thought they might.

Making Maternity Voices partnerships work based on the local success of our patient engagement, we delivered webinars with Dorset Maternity Voices, NHS England and National Maternity Voices to support other maternity systems across the country to develop their own Maternity Voices partnerships.

Maternity Voices frequently walk the patch in the community where service user representatives attend parent and baby groups or events to gather feedback from new parents, including via online forums.

You said you wanted support to develop your overall health record.

“You said you had difficulty accessing the Special Care Baby Unit (SCBU) from the maternity ward due to distance.”

We ensured families were given easier access.

Shopping Centre to demonstrate progress so far and gain feedback on the developments from local staff and families.

We instigated a new feeding clinic at Poole Hospital, drop-in breastfeeding visits at children centres and support for MSWs in the new postnatal care pathway.

You said you wanted support to develop your overall health record.

“You said you had difficulty accessing the Special Care Baby Unit (SCBU) from the maternity ward due to distance.”

We ensured families were given easier access.
In the latter part of 2018, the NHS, local councils, voluntary organisations and members of the public took part in a public engagement discovery project. Together, we looked at what Dorset is doing well in terms of public engagement and also what could be done better. Views were sought via an online survey, telephone interviews and discussion with Our Dorset’s PEG.

A workshop was held on 8 November 2018, bringing everyone together to consider people’s views and focus on suggestions to strengthen public engagement across Dorset. NHS England selected Dorset to be the first of six pilots for the new Integrated Care System public engagement improvement project.

Over the coming year, the NHS, local councils, the community and voluntary sector and local people will work together to improve public engagement and communications to make a real difference to local people.

Some new projects to come out of this work include:

- Training a ‘bank’ of 80 staff engagement champions across Dorset to work with local people to co-design and improve local services.
- Setting up a ‘reading panel’ with local people to review and provide feedback on draft public information, to make sure it is clear and easy to understand.
- Looking at how the NHS and local councils can work more closely with the community and voluntary sector and Healthwatch Dorset when engaging with residents.
- Joining up Dorset’s engagement and communication teams across all health and care organisations.

After two jam-packed days in Bristol and Taunton, our Senior Public Engagement & Consultation Lead, Frances Aviss completed NHS England’s train-the-trainer course.

Frances is the first member of the team to complete this training, which will enable the Communications and Engagement Team to deliver ‘10 steps to even better public engagement’.

It’s really important to help people understand why meaningful engagement matters. We’re using this training to better support staff and public representatives in developing their public engagement knowledge and skills. Frances will deliver the first ‘10 steps’ course with colleagues from Dorset Healthcare in April 2019 to members of the team, to ensure there is plenty of critical feedback. Frances will then go on to utilise this experience to support ongoing work to develop a bank of engagement champions.

Participants will be asked to share their experience of the training to help us continuously improve local NHS services with local people. For updates visit dorsetccg.nhs.uk.

Just 10 steps - training the trainers to improve public engagement in Dorset

Frances Aviss, Senior Public Engagement Lead

I’m really excited by this clear and comprehensive one-day training course. The training day introduces an approach to patient and public engagement which is based on best practice. It explores how and why we engage, works through the 10 steps that people should follow when undertaking public engagement and signposts to lots of helpful information and resources.

I undertook the training with a super group of colleagues from across the South West and the idea is that we will be able to support each other to deliver the training to both staff and public representatives across Bath, Wiltshire, West Bristol, Somerset, Gloucestershire, Cornwall and Isles of Scilly, Devon and of course our beautiful county of Dorset.
Partnership working between the voluntary sector, the NHS and local councils is crucial to improving care for the people of Dorset. The role that they play in helping us reach out to diverse, local communities and community and voluntary groups underpins our engagement and communications with local people.

With the growing focus on and importance of health prevention and the wider determinants of health and wellbeing, the support provided by the community and voluntary sector is increasingly needed.

We continue to work closely with a host of community and voluntary sector organisations, including Bournemouth and Poole Council of Voluntary Services, Dorset Community Association, the Volunteer Centre Dorset, Dorset Race Equality Council, Access Dorset, Dorset Youth Association and Dorset Mental Health Forum, among many others.

A highlight this year has been the development of our Health Ambassadors Forum with Dorset Race Equality Council, which you can read about on the following page.

We have also maintained strong working relationships with the Dorset Association of Parish and Town Councils (DAPTC) to reach into our rural communities. They help us to provide opportunities for involvement to thousands of individuals, groups and organisations we may otherwise struggle to reach.

This year, we have strengthened our relationships with groups representing young people, which has helped to give young people and those representing them a strong voice in informing service-change and development.

We are delighted to be working closely with Chatterboxes, SPACE, Dorset Youth Association, Dorset Parent Carer Council and the Local Council’s Youth Participation Workers. This has made a huge difference to our engagement with younger people.

A strong theme to emerge from the public engagement discovery event was the importance of developing even stronger relationships with the community and voluntary sector across all of Dorset’s health and care organisations. Plans are afoot to do this in 2019/20.

In December 2018, Dorset Race Equality Council (DREC) hosted the first meeting of a new health ambassador network – a group of people from different ethnic backgrounds who are very active in their respective communities.

Representatives from DREC and the CCG meet with the health ambassador network three to four times a year, which helps the CCG reach out into these local communities.

In turn, it provides support to the network in carrying out their activities to communicate key messages about local health and care services, explore different views and develop an understanding of service provision and needs. At the first meeting, the group spoke about access to health services during winter.

A simple information postcard was shared with the network to signpost people to which services they should use and where to get further information. The health ambassadors agreed to share copies of the postcard in their communities.

Copies were placed in hampers for the homeless, provided to local people as part of the ‘elderly lonely project’, distributed to the Polish community at a Christmas craft fair and also to the Gypsy, Roma and Traveller communities.

“The health ambassadors have a hugely valuable role. They represent members of their communities and support effective engagement with members of the various ethnic communities within Dorset.”

Nathalie Sherring
Chief Executive - DREC

Working with the community and voluntary sector

Health Ambassadors - working with Dorset Race Equality Council
We always strive to make opportunities for engagement and involvement more accessible in order to help us build better healthcare services.

Our goal is to put local people at the centre of our discussions.

We have recently revamped the ‘Get Involved’ section of our website so members of the public can see what we’re up to at a glance.

You can read all about past and current projects, the organisations we regularly work alongside and the engagement principles that guide everything we do.

You can also download key publications in alternative formats to help groups to better promote engagement activities being carried out organically in healthcare settings across Dorset.

The ‘Feedback’ section highlights current opportunities to get involved, as well as campaigns that the team are supporting.

Get involved
Putting local people at the centre of our discussions

We always strive to make opportunities for engagement and involvement more accessible in order to help us build better healthcare services.

Our goal is to put local people at the centre of our discussions.

We have recently revamped the ‘Get Involved’ section of our website so members of the public can see what we’re up to at a glance.

You can read all about past and current projects, the organisations we regularly work alongside and the engagement principles that guide everything we do.

You can also download key publications in alternative formats to help groups to better promote engagement activities being carried out organically in healthcare settings across Dorset.

The ‘Feedback’ section highlights current opportunities to get involved, as well as campaigns that the team are supporting.

Visit dorsetccg.nhs.uk/involve.
Priorities for next year

Over the coming year, our focus will be to:

- Continue to strengthen existing Patient Participation Groups in general practices, while encouraging the formation of new groups.
- Support the development of the outcomes for improving engagement and communications across the ICS resulting from the NHSE-supported Discovery Project, including training 80 members of staff in co-design methods.
- Support engagement and consultation projects led by the CCG, such as the Dementia Services Review.
- Help promote newly commissioned services informed by patient and public involvement, such as initiatives coming out of the Mental Health Acute Pathway review.
- Engage with public and patient groups about the NHS Long Term Plan and what it means for Dorset.
- Inform and improve understanding among our local communities about the future of urgent care.