

# healthwatch

## Isle of Wight

### Patient Participation Group Event

Tuesday, 25<sup>th</sup> September 2018





## Background

Healthwatch Isle of Wight is the independent consumer champion for local health and social care services. It was created in April 2013 through legislation bringing in a Healthwatch organisation in each local authority area of England. It exists to ensure that people are at the heart of care. Feedback from the public is used to identify and share good practice and to highlight improvements that need to be made to health and social care services. Healthwatch Isle of Wight is supported by a team of paid staff, and an enthusiastic and proficient group of volunteers.

A small number of priorities are chosen every year by the public for Healthwatch to examine, with GP Services being one for 2018/2019. Healthwatch Isle of Wight is concentrating on the contractual obligations of the GP Practices to have a Patient Participation Group (PPG), supporting them to develop, evolve and expand.

Healthwatch Isle of Wight hosted a public event to promote the importance of PPGs, supported by the following speakers.

Steve Sollitt – Head of Primary Care, Isle of Wight Clinical Commissioning Group

Andy Hollebbon – Head of Communications and Engagement, Isle of Wight NHS Trust

John Nicholson – Chair of the IOW Council Policy and Scrutiny Committee for Adult Social Care and Health.

Also in attendance was David Barker, Head of Communications and Engagement, Clinical Commissioning Group in addition to Councillor Brodie and Paul Thistlewood, Scrutiny Officer.

The event was well attended with lively debate. In addition to the 3 speakers, attendees were invited to form groups to discuss the following topics: Recruitment and Engagement of PPGs, Challenges Faced by PPGs, Future of PPGs.

Cowes Medical Centre sent a representative to represent the Practice Manager.

## Recruitment and Engagement of PPGs

Attendees were asked what 5 methods they would use to promote their local Patient Participation Group to the community.....

- Advertise the existence of the PPG to people who use the Practice as much as possible. This practice does have a PPG – find out more and join us! would be a good start.
- If Surgery website exists, make sure the PPG is on there for people to access.
- Highlight what the PPG has achieved for the surgery – successes and also what can't be done.
- Make use of existing groups eg. Women's Institute, Men in Sheds, School, Town Women's Guild, Horticultural Society, Coffee Mornings, GP Surgeries, Hospitals and Colleges.
- Hold Coffee Mornings/social events
- Encourage old members to move on and encourage newer people to become involved.
- Promoting within the local library, Rotary etc.
- Recruit from Secondary Schools/Colleges , asking for pupils who are looking to pursue a medical or social work career.
- Attending local events such as The Big Picnic.
- Assure patients that their voice does count and they are part of a group.



## Challenges Faced by PPGs

Attendees were asked what they felt the 5 most common challenges faced by PPGs.....

- Visibility.
- Relationships with the Practice Manager and communication with the Surgery.
- Recruiting members/demographic.
- Accountability.
- Diversity.
- Who is on the PPG.
- Understanding the Function and Role of the PPG itself.
- Communications – being heard by the CCG and Scrutiny Committee.
- Getting Feedback from the relevant boards (CCG etc)
- Membership retention.
- Communication with other patients and business management team.
- Confidence that the clinicians are aware of difficulties faced by PPGs and how they themselves can assist.

Every group highlighted the need to be heard by the Health Bodies such as the IW CCG and the Health Scrutiny Committee. All wanted to be heard, but more than that, they wanted to be listened to and given feedback.

It was obvious from the Worksheets collated that the PPGs are hungry for a working relationship with the other health bodies or at least a route to them and for those organisations to recognise the voice of the patient.



## The Future of PPGs

- PPGs should be available to everyone!
- All Communication outlets needed to attract all ages etc.
- There is no future unless the CCG gets involved.
- PPGs need to have more structure.
- An Island Wide PPG, with a representative from each surgery to understand how each other are working.
- Diversity – to encourage a true representation of community.
- A Youth Forum separate from the normal group
- Better two way communication between PPGs & CCGs
- Online presence, separate from the Surgery.
- Ensure that personal issues are not raised but rather that the PPG is an opportunity to signpost patients where a suitable outcome can be achieved.
- Email addresses for contacts which are serviced regularly.
- Help from organisations such as Healthwatch, who could do a large campaign on the Island to make people aware that they are here for them.
- Sharing good practice of other successful PPGs.



## Questions, Feedback & Comments

Healthwatch received the following feedback, comments and questions:

*I am worried about health and social care on the Island and struggled to find out how I could become involved, and I'm very computer literate! It wasn't easy to find out!*

*There was a thirst by attendees to improve the role of patient's voice. I'm not sure if the same view is held by health partners - particularly the CCG.*

*We need an Island-Wide PPG Group or Forum.*

*There is a need for PPGs to be able to exchange views, concerns and ideas in an appropriate arena. This would save everyone reinventing the wheel.*

*The role of Healthwatch within the community in general is not understood by the public - more communication is needed.*

*How does PPGs, Healthwatch and Health Scrutiny work together and feed back to each other?*

*Never seen anything about PPGs in my surgery. Who are they? Who are they accountable to? How often do they meet? What do they discuss?*

*I really want to get involved in some way, however working full time when meetings take place could be an issue. How many hours per month would I need to give?*

*We need a wider knowledge of what is being done or not being done. The workshop raised the issue of comms being an issue in all areas and activities. The Communication and engagement plans were good but somewhat aspirational.*

*I felt that there was a lack of commitment by the CCG to reflective communication.*



## Key Points from the Day

- There is no prescriptive way for a PPG to exist.
- It is essential that the Practice Managers and GPs are supportive of the PPGs and without that support, there is a problem.
- PPGs will enable positive feedback, as well as negative.
- PPGs can feel isolated and there was a feeling that they do not get listened to by the CCG or indeed, receive any feedback from them.
- An overview of the Patient Council was given with the intent of an Island wide Patient Participation Group.
- Terms of Reference for the Patient Council make it more of a tick box exercise.
- The Trust recognise that there needs to be a change of mind set regarding Patient Engagement and a will to make that happen.
- Discussion of the importance of staff uniform within St. Mary's.
- Health Scrutiny Committee is run by lay people, who constructively challenge and verify activities and reports from the Trust, CCG as well as Social Care (the Local Authority) and other organisations.
- People are reluctant to give feedback as they don't want to complain or for their level of care to change. This is particularly more potent on an Island.
- 'Feedback is the fuel that drives the motor of change.'
- Little confidence that the CCG is being supportive of Patient Participation Groups.
- David Barker, CCG Comms, stated that they value the importance of PPGs and the feedback that they can get from them.
- The CCG could be doing more to engage in constructive interactions.
- There is a will of the people to get involved on the Island.
- There was a recognition with all that the clinicians on the Island are amazing and have provided exceptional care when needed.

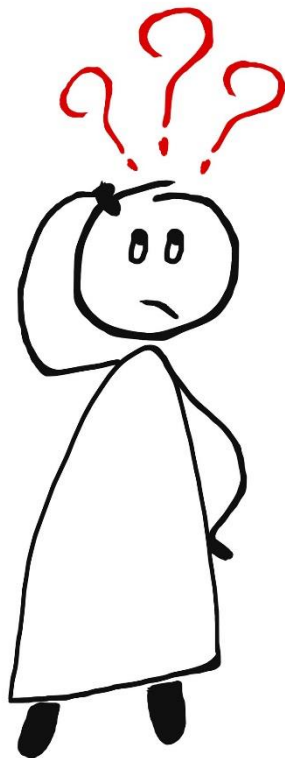
## The Isle of Wight Clinical Commissioning Group gave the following assurances:



- To promote PPGs and work constructively to help evolve and diversify groups on the Island.
- To be more proactive in supporting the PPGs to ensure they maintain a healthy and constructive relationship with their Practice Manager.
- To engage more directly with the PPGs and ensure an open 2 way line of feedback.
- To look into a database of PPG members and assist if necessary with an island-wide PPG.

## Questions Raised

- ▶ WHAT IS THE CCG DOING TO PROACTIVELY PROMOTE PPGs?
- ▶ DO THE CCG HAVE A DATABASE OF PPG MEMBERSHIP?
- ▶ HAVE SCHOOLS OR COLLEGES BEEN REACHED OUT TO?
- ▶ IS THE NEW VISION FOR NEW PATIENT COUNCIL ACHIEVEABLE?



- ▶ HOW CAN PPGs AND HEALTH SCRUTINY LINK TOGETHER?
- ▶ ARE THERE ANY WORKING EXAMPLES OF PPGS IMPLEMENTING GOOD PRACTICE (EVEN FROM THE MAINLAND)?

Healthwatch Isle of Wight would like to thank all those who attended, with special thanks to Steve Sollitt, David Barker, Andy Hollebon and John Nicholson.



# Patient Participation Groups (PPG)

Steve Sollitt

# ***What are Patients Participation Groups***

## **A PPG role is :**

- Being a critical friend to the practice;
- Advising the practice on the patient perspective and providing insight into the responsiveness and quality of services;
- Encouraging patients to take greater responsibility for their own and their family's health;
- Carrying out research into the views of those who use the practice;
- Organising health promotion events and improving health literacy;
- Regular communication with the patient population.

# ***Who is part of the Patient Participation Group?***

The Patient Participation Group should be developed in the most appropriate way to ensure regular engagement with a representative sample of the practice population, and it should have a structure that allows it to reach the broadest cross section of the patient population. This should include the involvement of carers of registered patients, who themselves may not be registered patients of the practice.

Practice engagement with the Patient Participation Group will need to include obtaining patient feedback and, where the practice and Patient Participation Group agree, acting on suggestions for improvement. Practices should demonstrate they have made an effort to engage with any underrepresented and seldom heard groups, including patients with mental health conditions or groups with protected characteristics as identified in the Equality Act 2010.

# ***Reviewing patient and carer feedback***

Practices should aim to be regularly reviewing feedback with their Patient Participation Group and wider registered population to consider areas for improvement. Suggested sources of feedback to review include:

- patients and carer priorities and issues;
- themes from complaints and suggestions;
- planned practice changes;
- bespoke survey;
- Care Quality Commission (CQC) related issues;
- the GP patient survey;
- the Friends and Family Test;
- working with local commissioners (Clinical Commissioning Groups/NHS England/Local Authority);
- views from local voluntary and community groups, including local Healthwatch



# ***How should the Patient Participation Group be structured?***

There are no prescriptive requirements on how to run a Patient Participation Group

The Patient Participation Group may be a virtual or a face-to-face group, or a combination of the two.

For some groups it may be helpful to separate out a smaller “Organising Committee” from a larger “face to face” group and a “virtual group”. There is a need for a Constitution/Terms of Reference, with a Chair and Secretary appointed plus other members. In addition, practices may wish to hold public information or condition support meetings as well as an Annual General Meeting.

# ***Patient Participation Group action plans***

It is recommended that each practice should develop an action plan with their Patient Participation Group on improving practice and implementing the changes based on the priorities for improvement identified by the Patient Participation Group from the sources of feedback listed above.

The action plan should be in the form of a report, which the Patient Participation Group and the practice can use to evidence that feedback has been taken into account and that the Patient Participation Group has been properly engaged. The report could include details on the make-up of the Patient Participation Group against the practice population, sources of information analysed, the areas identified for improvement, what actions were taken to address these priorities and the resulting changes made.



# Healthwatch IW Patient Participation Workshop 25/9/18



Andy Hollebon  
Isle of Wight NHS Trust

# In a year .....

- 70,873 calls to NHS 111
- 28,915 calls to 999
- 46,622 A&E attendances
- 12,222 scheduled inpatients
- 14,414 emergency inpatients
- 1,100 babies born
- 13,000 bed moves
- 416,000 sheets used
- 160,500 outpatient appointments
- 114,989 imaging requests
- 221,903 community (nursing, AHP, etc.) contacts
- 6,072 referrals to mental health services
- 816 patients involved in research on 46 studies
- 51% of waste recycled

19



# The change underway



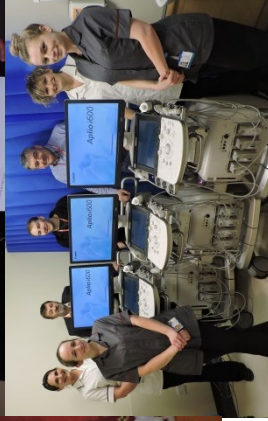
- During the year full new Executive Board
- Significant change in our Non-Executive Directors
- Special Measures
- Rebuilding



# Our people



**NHS**  
Isle of Wight  
NHS Trust



# Our values & vision

## We care...

- about everyone's safety and wellbeing
- by valuing and respecting every person
- by being open and honest
- by finding time

## We are a team...

- working in partnership with others
- building high trust relationships
- striving for excellent communication
- acting professionally

## We innovate & improve...

- by continuously developing and learning, maintaining competency
- by giving, welcoming and using feedback to improve
- by trying new things; simplifying and being more efficient

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**2018/2019: Developing and refreshing our values and mission statement through our leadership and culture programme**

## Our vision



Patients come first in everything we do. We fully involve our patients, staff, volunteers, families, carers and communities. ”



# Listening & learning



- ✓ Your feedback directly to us
- ✓ Patient surveys
- ✓ Friend and family results
- ✓ Monitor the number of complaints and how quickly we respond effectively to them
- ✓ Monitor the number of positive comments
- ✓ Reviews – NHS Choices, Care Opinion, etc
- ✓ Communication and documentation audits
- ✓ Duty of Candour reporting audits
- ✓ Audits
- ✓ Membership
- ✓ Patients With A Disability Working Group
- ✓ Patient Council





# Membership



- Members can:
  - Help shape our future plans for services and the Trust
  - Receive a regular newsletter (one per household)
  - Be involved in focus groups or surveys about our services
  - Be invited to events and health talks including Medicine for Members' Meetings
  - Have access to a website providing discounts at high street retailers
  - Receive an invitation to the Annual General Meeting
  - Be involved as much or as little as you wish
- To become a member of the Trust, pick up a membership form at St Mary's Hospital or telephone our Membership office on 01983 822099 ext. 5703 to request a form or e-mail [membership@iow.nhs.uk](mailto:membership@iow.nhs.uk)
- More info at <http://www.iow.nhs.uk/getting-involved/become-a-member/membership.htm>

# Patient Council now

- Over 10 years
- Constant through changes in patient & public involvement
- Current membership 20 – 25
- Self nomination from membership
- Interview by current member & Trust officer
- Meet every six weeks
- Presence on many committees & working groups
- Presence at Trust Board



# Possible arrangement for new IW NHS Trust service user and carer led advisory body

## Patient Council

Total membership 34

16

**One representative from each GP practice** - nominated or elected from each Practice's Patient Participation Group (PPG)

6

**Lay individuals representing**  
Healthwatch IW;  
People Matter IW;  
Parent's Voice IW;  
Council of Governors UHS;

Council of Governors  
Southern Health;  
Health and Social  
Care Policy Scrutiny  
Committee

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**Residential or Nursing Home residents or relatives** - one from each Locality Area -  
West & Central;  
South Wight and North East Wight

3

**Individuals aged under 25** - one from each Locality Area - West & Central; South Wight and North East Wight

3

**Carers - one from each Locality Area**  
- West & Central;  
South Wight and North East Wight

3

**Lay Individuals representing the BME population one from each Locality Area:** West & Central, South Wight and North East Wight



# Questions