



Statement of Patient & Public Involvement 2018-2019

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1. FOREWORD

In 2018 the NHS celebrated its 70th anniversary, a significant milestone in its history, and it is appropriate that we focus and reflect on the experiences of those who use our services and how they continue to help shape local health and care.

We have all used NHS services at some point in our lives as patients or carers, friends or family, and it plays a vital role in our daily lives. This makes the care the NHS provides important to all of us. This is why we are committed to listening to our local communities so that they continue to have an opportunity to share experiences, and to shape how care is planned, organised and delivered.

The NHS Long Term Plan, published in January 2019, outlines the bold direction for the health service to ensure that as health needs change and society develops, the NHS can continually move forward so that we have a service fit for the future. Locally and regionally we expect to be engaging with local people on how the plan will benefit local communities and improve services for them and their future generations.

Our Statement of Involvement shows how we are working with our communities to make the NHS better for patients and the public across Stockport. It also demonstrates the areas of best practice, and identifies challenges and how we are working to improve.

NHS Stockport Clinical Commissioning Group (CCG), working with local partners is committed to working more closely with the people it serves in order to make

improvements to health and care and the quality of people's lives.

Working directly with patients, carers and the public is critical to ensuring local services meet local needs and in developing sustainable



solutions. What matters to people must be valued and used as an underpinning principle of any health and care commissioning or provider organisation's way of working.

The challenge is to build this way of working into processes and systems so that it becomes essential to design, delivery and assessment of care.

Stockport CCG intends to build on achievements to date and has ambition and plans to increase and renew the involvement of patients, carers and the public, working alongside its partners, so that it is systematic and consistent in its approach.

Christine Morgan

Chair, Citizen Representation Panel

John Houghton

Deputy Chair, Citizen Representation Panel

James Brown

Head of Communications, NHS Stockport CCG

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2. INTRODUCTION

The Statement of Involvement outlines the work NHS Stockport Clinical Commissioning Group (CCG) has undertaken during the financial year from 1 April 2018 up to 31 March 2019 to engage and involve local people and communities.

Stockport CCG is responsible for making sure that the 310,000 people registered with a Stockport GP has access to the healthcare services they need.

We recognise that our decisions, policies, and services have a major impact on the lives and wellbeing of the local people, so we actively seek to engage with all sectors of the community to ensure that everyone has an equal chance to have their say before we make major decisions.

Stockport continues to be one of the healthiest places to live in the North West, but we know that this is not the experience of all of our residents. Local communities experience varying levels of affluence and have significantly different health needs.

Similar to other local areas across the country Stockport faces a number of challenges in the delivery of existing health and social care services. These issues include:

- An ageing population with increasingly complex care needs and at higher risk of isolation and loneliness.
 This is because more people live on their own without direct family support;
- A population where birth rates have risen, especially in areas of deprivation. This has led to more children and young people living in low income households where health outcomes are poorer;
- Changes in the most common health issues to those which are linked to lifestyles or are otherwise preventable;
- A period of economic challenge that affects the incomes and opportunities of the most vulnerable people in Stockport;
- Fragmented services which are complicated to access, have duplications and are not as focussed on the individual's needs as could be;
- A system where too many people are admitted to hospital, when they would be better and more appropriately cared for at home;
- Increasing financial pressures with deficits forecasts for Stockport as demand growth continues if service delivery is not improved.

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Stockport's population has a wide range of health needs, and has the oldest age profile in Greater Manchester. Currently 19.4% people are aged 65 and over and that is likely to rise to 21.8% by 2024 which is an additional 9,681 people.

There are significant health inequalities in Stockport, with life expectancy varying by 10 years between the most and least deprived areas. Smoking cessation rates are improving, but smoking rates are more than twice as high as average in areas of deprivation.

Children and Young People

- Almost 1 in 4 children in Stockport are overweight or obese by the age of 4 rising to almost 1 in 3 by the age of 10.
- Almost 1 in 4 of 5 year olds suffered tooth decay
- 8,500 children and young people are estimated to live in poverty.
- Over 70% of young adults are not active enough
- Anxiety is the major long term condition affecting young people in Stockport with more than 2,700 cases reported.
- Self-harm hospital admissions in those aged 10-24 are higher than the national average.





Adults and Older People

- 1 in 4 adults are overweight or obese putting them at greater risk of liver disease, heart disease and diabetes.
- Cancer is now the major cause of premature death with 45% of deaths under 75 years.
- Stockport's population is older than the England average, with around 55,600 residents aged 65 and over. Of these, 7,400 are aged 85 or over. By 2025 these age groups are projected to grow to 66,500 and 11,000 respectively.
- Half the older population of Stockport has a long term health problem or disability and 1 in 5 has 2 or more long term conditions.
- 1 in 3 older people live alone.
- 2,700 older residents suffer with Dementia.

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2. INTRODUCTION

Stockport: an overview



Health challenges facing **Stockport**

CHILDREN

1 IN 4 live in poverty

1 IN 4 of 5 year olds suffered tooth decay

8,500 children and young people estimated to live in poverty

70% are not active enough

2,700 cases of anxiety reported

Self-harm admissions are higher than UK average

ADULTS

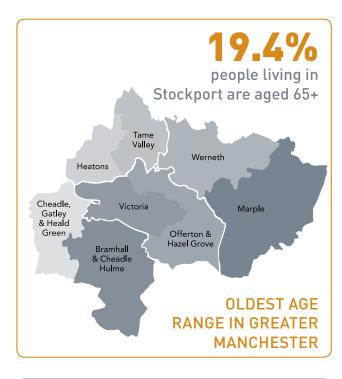
1 IN 4 are overweight

45% of cancer deaths under 75 years of age

1 IN 5 colder people have 2 or more long term health conditions

1 IN 3 older people live alone

2,700 older residents suffer with Dementia Stockport's population is older than UK average





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3. WHO WE ARE AND WHAT WE DO

NHS Stockport Clinical Commissioning Group (CCG) is a membership organisation representing GPs from every practice in Stockport with responsibility for planning, designing, buying and monitoring the health services for the local population.

These services include:

- Planned hospital care;
- Rehabilitation care;
- Urgent and emergency care;
- Community health services;
- Mental health and learning disability services.

3.1 Our vision

The CCG's vision is:

"We exist so that Stockport people will access high quality health services that empower them to live healthier, longer and more independent lives."

This underpins the organisations approach to everything it does to help improve the health and services across the borough.



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The CCG aims to work with local partners to improve health and secure high quality healthcare for the people of Stockport, now and for future generations. We want everyone to have greater control of their health and their wellbeing, and to be supported to live longer, healthier lives with high quality health and care services that are compassionate, inclusive and constantly improving.

4.1 Person Centred and Community Approaches (PCCA) in Stockport

Stockport Council and CCG are working towards a more joined-up commissioning function for health and care within the context of place-based commissioning, which is responsive to and works with local communities. The strategy recognises a particular need, in Stockport, to revitalise our approach to supporting, developing and working with the voluntary and community sector.

This work will draw in particular on the Stockport Local approach, which is being developed as a platform for community commissioning, and our innovative approach to place-based community support developed in the Heaton's.

The corporate leadership within the Council and CCG are committed to this agenda and a GMCA supported and fund workshop on the 'Asset-based Area' approach is scheduled for late April. This will equip senior leaders within the Council to support its implementation. These developments represent a real opportunity to build on the work of the Systems Leadership Group which created the

'Stockport Way' to encapsulate a shared vision for how we work with people and communities and initiated the community-focused Place Based Integration early adopter in the Heaton's.

Our PCCA self-assessment highlights a number of areas in which we are making good progress, including:

- Driving forward person-centred conversations as key to our Enhanced Case Management approach, and planned incorporation of the Goals of Care document into the Stockport Health and Care record, to facilitate access and sharing across organisations
- Establishment of our GP-based social prescribing service, the Wellbeing and Self Care team, which will operate as a key pillar of the 'Team Around the Place', alongside the WIN (Wellbeing Independence Network), TPA (The Prevention Alliance)and Stockport Homes
- Establishment to of the Stockport Local fund to invest in community and voluntary activity and emerging third sector collaborative infrastructure.

Key challenges remain including the implementation of Personal Health Budgets, embedding and mainstreaming person-centred approaches and coproduction, and building the relationships, trust and culture that facilitate appropriate information sharing and a focus on shared outcomes. While some innovative work is taking place within the Council, it is recognised that a broader whole system approach to develop the commitment, tools and skills for PCCA is needed.

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Our ambition is to place patients, public and our local communities at the heart of everything we do. To achieve this, genuine patient and public participation is essential.

The NHS Five Year Forward View (2014) and Next steps on the NHS Five year Forward View (2017) describe a new relationship between the NHS, patients and the public, including a commitment to involve communities and citizens in decisions about the future of health. This is particularly relevant following the NHS 70 celebrations and the publication of the NHS Long Term Plan (2019) to ensure that health services continue to develop for future generations.

Public involvement helps us to understand local needs and to prioritise those people who experience the poorest health outcomes, enabling us to improve access and reduce health inequalities. It provides opportunities to see things differently and to be innovative, leading to a better use of our limited resources.

In addition the CCG has a legal duty under Section14U and 14Z2 of the Health and Social Care Act 2012 (see Appendix B) to involve patients in decisions about care and treatments and the public in the commissioning of services.

Within the CCG's constitution we have made the commitment to ensure that there is meaningful public involvement in the planning, development and shaping of local services. These are governed by the following principles:

- Working in partnership with patients and the local community to secure the best care for them;
- Adapting engagement activities to meet the specific needs of the different patient groups and communities;
- Publishing information about health services on the CCG website and through other media;
- Encouraging and acting on feedback;
- Identifying how the group will monitor and report its compliance against this statement of principles.

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The CCG works with a range of partners across the voluntary and third sector and have always worked closely with patient groups, including Healthwatch, in order to engage as wide an audience as possible and to involve them in decision making.

The CCG's Accountable Officer and GP Clinical Chair hold regular meetings with Healthwatch colleagues, who have a place as a representative on the Governing Body. Healthwatch is also represented on the Stockport Citizen's Panel.

In addition, where developments are being planned, commissioners attend Healthwatch briefing sessions to ensure local involvement in shaping plans. Members and officers of Healthwatch are also regularly involved in formal CCG committees and workshop

Our approach to public involvement is to make sure that we use a wide variety of different mechanisms, methods and approaches to engage with people.

The CCG uses a number of methods to involve and engage with our communities and to listen to their views and needs. Some of these approaches include:

4.2 Citizen Panel

The Stockport Citizen's Panel meets quarterly and the forum is engaged over the latest plans on the development of local health and care services. Key questions and comments by the panel are noted and taken back to programme teams for consideration and development of business plans.

4.3 Citizen Space

Citizen Space 'have your say' is the CCG's and Council's online consultation database where members of the public can take part in surveys and keep up to date with the engagement work being undertaking.

The CCG has always been committed to listening to local people in shaping their area and the services that they receive. It is important that consultation and community engagement is being carried out in a coordinated and robust manner.

We use a range of appropriate consultation and engagement methodologies to ensure an appropriate and proportionate approach to enabling stakeholders to have their say on services that affect them. These methodologies are both online using the Citizen Space consultation portal and offline using a range of methods to ensure no group is excluded.

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4.4 Patient story

Patient story videos and podcasts are shown at the beginning of each Governing Body meeting. The stories provide an example of the lived experience of patients to help showcase examples of excellence and where the quality of care was not as it should be.

4.5 Governing Body composition

To ensure that patient views are heard at every level of the organisation, the CCG has appointed lay members to sit on all our committees. A number of important working groups also have patient and public representation including the Individual Funding panel and STAMP.

The Governing Body has appointed four independent Non-Executive Lay Members, who in addition to being full governing body members have additional specialist roles:

- Christine Morgan is the Non-Executive Lay Member for Patient and Public Involvement, the portfolio for which she assumed informal responsibility from January 2018 and formally confirmed at the Annual General Meeting of the CCG in September 2018. Christine also Chairs the Citizen Representation Panel and Individual Funding Request panels.
- John Greenough leads on Audit, Remuneration and Conflict of Interest matters.

- The Governing Body has a representative from Healthwatch Stockport and the Chair of the Health and Wellbeing Board in attendance at all meetings to feed in local views.
- Dr Debbie Kendal is the Non-Executive Secondary Consultant who Chairs the Quality Committee which includes the Non-Executive Lay Member for Patient and Public Involvement and a Healthwatch member.
- Peter Riley Chairs the Primary Care Commissioning committee (from September 2018) which includes the Non-Executive Lay Member with the remit for Patient and Public Involvement, was the previous Chair up to August 2018.
- The Performance and Delivery Committee (replaced the Finance and Performance Committee in September 2018) includes the Non-Executive Lay Member responsible for Audit and Finance.
- The Audit Committee is chaired by the Non-Executive Lay Member responsible for Audit and Finance.
- The Remuneration committee is Chaired by the Non-Executive Lay Member responsible for Audit and Finance and includes the Non-Executive Lay Member with the remit for Patient and Public Involvement.
- The Strategy, Commissioning and Planning Committee is Chaired by the CCG Clinical Chair and includes the Non-Executive Lay Member with the remit for Patient and Public Involvement.

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5. PROMOTING EQUALITY AND REDUCING HEALTH INEQUALITY

NHS Stockport values diversity and is committed to reducing inequalities in the workplace, in health outcomes, in access to and experience of local services.

Challenging discrimination and addressing inequalities is key to achieving our vision of high quality healthcare for Stockport.

This report outlines some examples of how we have engaged with different groups and diverse communities within our local population to ensure that their voices are heard.

As a public sector organisation, we have a legal duty under the Equality Act (2010) to ensure equal access to our services for all our diverse communities.

This includes making adjustments so that for those whose first or preferred language is not English or who use sign language as their main means of communication can receive the same level of service as other patients.

The CCG continues to manage the interpretation budget for local Primary Care services on behalf of NHS England, who now commission these services. The service provides interpretation at medical appointments in General Practice; NHS dentistry; NHS pharmacy and NHS optometry.

NHS Stockport CCG holds interpreting contracts with:

- **Stockport Interpreting Unit**, for the provision of face-to-face for foreign language interpreters in over 43 languages.
- **The Big Word**, for the provision of 24/7 phone interpretation services in over 200 languages.
- Action on Hearing Loss for the provision of face-toface British Sign Language interpreters.
- **Sign Video** for the provision of Skype based British Sign Language interpreters.

Over the financial year 2018-2019 interpretation was used for 3,539 healthcare appointments (an increase of 657 compared to 2017-2018). A total of 42 languages were used, in addition to sign language. Farsi was the most commonly used language, followed by Arabic, Kurdish, Urdu, Polish, and British Sign Language.

The total cost of interpretation was £52,999.36 (compared to £47,608.13 in 2017-2018) For the first time this year this amount was jointly funded by the GP Primary Care budget and the CCG's interpreting budget.

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The Friends and Family Test (FFT) is a single question survey which asks patients whether they would recommend the NHS service they have received to friends and family who need similar treatment or care.

Since it was initially launched in April 2013, the FFT has been rolled out in phases to most NHS funded services in England, giving patients the opportunity to leave feedback on their care and treatment. NHS England publish monthly data on the FFT which can be accessed at www.england.nhs.uk/fft/

Friends and Family Test results for 2018-2019 across the borough are summarised below and the data relates to the most recent NHS England national publication for February 2019:

GP Services: Overall satisfaction with GPs services across Stockport remains high and over 91% of patients would recommend them. This is slightly higher than the 90% in 2018 and above the England average rate of 90%. The percentage of respondents who would not recommend GP services across Stockport is below the England average range at 5% compared with almost 6% nationally.

Accident & Emergency: The percentage of patients who would recommend Stockport A&E services as a place to receive care has increased slightly to 89% compared to 87% in 2018. This is higher than other A&E performances across Greater Manchester, with the exception of Bolton NHS Foundation Trust at 91%.

There has been no change in the percentage of respondents who would not recommend the A&E service remaining at 7% in 2018, which is lower than the England average of 9% and the Greater Manchester average of 10%. It is likely that these results are reflective of the challenging performance seen in A&E departments.

Inpatients: On average 96% of respondents would recommend Stockport as a place to receive inpatient care, which is slightly higher than the rate of 94% reported in January 2018. This is in line with the England average rate of 96% and above the Greater Manchester average of 94%. The percentage of respondents who would not recommend inpatient services across Stockport is also within the England average range of 2%.

Outpatients: On average in February 2018 93% of respondents would recommend outpatient services, which is a slight increase of 1% compared to the previous year and slightly below the England average of 94%. The proportion of respondents stating they would not recommend outpatient services is also within the England average range at 3%.

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Maternity: The percentage of patients who would recommend Stockport Maternity services as a place to receive care has increased to 100% (compared 98% in Jan 2018). This is higher than the national England average of 97% and Greater Manchester average of 96%. The proportion of respondents stating they would not recommend maternity services has decreased to 0% which is better than the national average of 1% and regional average of 2%.

Community: On average 92% of respondents would recommend Stockport as a place to receive community care, compared to 90% in 2018 and slightly lower than the national average of 96%. The percentage of respondents who would not recommend inpatient services across Stockport is also slightly higher than the England average range at 3%.

Over the year the CCG received a wide range of queries, compliments, comments and complaints from local communities. In addition, the CCG's manage requests for information submitted under the Freedom of information Act.

All of these contacts from the public are monitored and analysed so that trends in requests or issues are fed into the Governing Body and the relevant commissioning team to ensure that improvements are made as a result of local contacts.



Over 2018-2019, NHS Stockport received:

- 120 Complaints;
- 241 Compliments and enquiries;
- 22 MP letters;
- 243 Freedom of Information requests.

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Over the last 12 months the CCG has worked with a range of communities and local partners across Stockport to involve and engage patients and the public in local plans, commissioning intentions and service development. This involvement has included linking with the Greater Manchester Health and Social Care Partnership (GMHSCP) on the GM Taking Charge programme.

In addition, over the last year the CCG has strengthened its commitment to public and patient involvement by developing a framework to support Commissioners. The new process ensures that public involvement for all plans and proposals are considered and any required impact assessment is completed. To read the CCG Engagement Framework please visit: www.stockportccg.nhs.uk/about-us/what-are-our-plans-and-priorities/

7.1 Devolution Difference Stockport

More than 100 people attended the Devolution Difference event on 9 October 2018. The event was held to reflect on how health and social care in Stockport is changing for the better, helping local people live healthier, happier lives.



The borough was handed the power to begin making these improvements two years ago when Greater Manchester took control of the region's £6bn health and social care budgets with the aim of transforming services.

To mark the anniversary the event showcased the positive changes that have happened in health and social care services in Stockport that are making a difference to the lives of local people.

Jon Rouse, the Chief Executive of Greater Manchester Health and Social Care Partnership delivered a key note speech and there was further insight into the transformation by leaders of NHS Stockport CCG, Stockport Council and Stockport NHS Foundation Trust.

The event was supported by over 25 local voluntary, charity and health and care organisations that formed a drop-in market place, allowing guests to find out more about how the changes will affect them and talk to staff in the services available in local communities.

7.2 Stockport NHS Foundation Trust

Stockport NHS Foundation Trust continues to support the local work, including GM programme, and is able to engage its 5,000 staff and 11,000 trust members through a number of different channels. These include the monthly team brief, screensavers, Chief Exec's Weekly Update, intranet, briefings social media accounts and Stepping Up newsletter and events, including the Annual Members Meeting.

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Next steps

The intention is to continue to strengthen the work and to get better at demonstrating the difference the Trust can really make, by increasing how communities can be involved in shaping services and decision-making.

By 2020 the Trust aims to improve the scale of engagement and representation to ensure that communities and individuals are able to be heard and influence the development of local health and care services.

7.3 Pennine Care NHS Foundation Trust

Mixed Sex Accommodation - 'What Matters to You' - Involving patients, staff and carers

National guidance from the NHS
Operating Framework (2011/2012)
requires all providers of NHS Health
Care to confirm they were compliant
with the National definition "to
eliminate mixed sex accommodation
except where it is in the overall best interest of the patients
or reflects patients' choice".

Department of Health (2011) have provided clarity in their guidance relating to breaches.

The CQC inspections held in 2016 and 2017 within Pennine Care NHS Foundation Trust highlighted areas of non-compliance with the guidance and therefore deemed to be regulatory breaches.

What Pennine Care aimed to achieve

The aim of this initiative is to achieve an improved Quality and Safe Care and to be regulatory compliant.

What Pennine Care have achieved during 2018-2019

In June 2018, an engagement and involvement programme – 'What Matters to You' was commenced by the Trust. This included a three stage process:

- 1. Ward Managers having informal conversations with staff, patients, carers and families as regards the issues around Mixed Sex Accommodation and potential changes to Same Sex Accommodation.
- 2. A total of 18 facilitated sessions with patients to asl questions about experiences around privacy, dignity and safety, as well as their views on potential moves from Mixed Sex to Same Sex Accommodation.
- 3. Survey for staff, Commissioners, service user groups, local authority partners, CQC, third sector groups.

Feedback from this survey was combined with feedback from all three stages described earlier to inform an independent analyst report. This feedback report was presented to the Trust Board on the 11th February 2019 as well as the Joint Health and Scrutiny Committee on February 26th 2019.

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- Stage 1 of the process resulted in 327 response forms being returned.
- Stage 2 involved a total of 197 participants in the focus groups.
- Stage 3 on-line survey to wider stakeholder groups resulted in 640 responses.

A number of presentations have also taken place with Governors and Pennine Care NHS Foundation Trust Service Users Group to update on progress. An update presentation was also given to the CQC inspection team.

Other activity includes a review and update to the Bed Management Protocol and MSA algorithms, new signage being deployed onto wards and a MSA poster and leaflet has been designed and is being printed for all wards.

What Pennine Care plan to do next

Findings from the feedback report highlighted the following:

- The Trust needs to provide on all wards at all sites Single Sex Accommodation with En-Suite facilities, in a Mixed Ward environment ("mixed but separate".)
- Separate Functional (ie schizophrenia or bi-polar) and Organic (ie dementia) patients.
- Involve patients/carers/staff more in design of services.
- Empower staff.
- Increase levels of training for staff.

- Provide greater number of OT's on wards to increase therapies and activities for patients.
- Provide more activities and if possible access to quiet outside space.
- Location is important; however, more important is safe patient care.

The Trust Board plans to review the findings in full and is committed to having a solution to the Mixed Sex Accommodation for implementation in 2019-2020.

7.4 Mastercall

Mastercall is a social enterprise organisation, providing a range of 'out of hospital' healthcare services for patients across the Northwest, including Stockport.

Patient Engagement Committee (PEC)

The Mastercall PEC is held every quarter and involves key members of staff, other healthcare organisations and patients. The PEC has a number of objectives, including:

- Find out patients experience of the services provided by Mastercall;
- To involve patients in decisions being made about treatment and care;
- Review patient feedback to consider emergent themes in engagement, experience and outcomes;
- Discuss topical subjects to get a patient's insight and lived experience.

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Over the year the Mastercall PEC have held in depth discussions on a range of topics including:

- Dignity in Care Mastercall reaccreditation
- Mental Health provision and how to improve signposting to services
- Proposed Introduction of a Council of Members to help shape local services
- Development of a Stockport Involvement and Engagement Strategy
- Review of Patient Experience feedback across all surveys and how it can be used to improve local services
- Patient Experience Software exploring different ways to gain feedback including SMS, emails, postal, kiosk to help Mastercall to capture and respond to patient views.

Mastercall is committed to ensure that patient and public views are reflected in decision making. This has included the exploration of different channels for patients, including text messaging, Friends and Family cards and kiosks at health sites.

7.5 Viaduct Care

Viaduct Care is the GP Federation of Stockport and is supported by all 39 Practices across the borough and was established as a not-for-profit Community Interest Company (CIC) in April 2018. The aim of Viaduct is to provide high quality out-of-hospital services, centred around eight neighbourhoods and based on the ethos of co-ordinated, accessible and proactive care for the population of Stockport.

Patient involvement with Viaduct Care

Over the last 12 months Viaduct has begun to engage with a range of partners and the public in developing a range of new community based services including establishing the 7-day Access Service, which allows patients to have a booked appointment with a GP, Nurse or Health Care Assistant in evenings and at weekends; and the First Contact Physio Service and they have implemented direct patient engagement.

Through these services, Viaduct has launched a feedback system that enables people to leave comments and give a rating on the Friends and Family Test. This is then used to further improve the service and future plans include publishing the data on the Viaduct website.

Viaduct has also launched the Wellbeing and Self-Care Service, who provide advice and offer one to one and group work support for patients who have been diagnosed, or are at risk of, long-term conditions, who are frequent attenders at their GP Practice, or who are experiencing loneliness and social isolation. The service has engaged patients to improve access and information to support individuals and to develop case studies to highlight the positive impact it can make.

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Future plans

As Viaduct continues to develop they are committed to working with local partners to improve public and patient involvement in shaping community services. They will also be hosting a public Annual General Meeting and will support other public engagement events over the next year. For more information about Viaduct Care visit www.viaductcare.org.uk.

7.6 Healthwatch Stockport

Healthwatch Stockport is the independent health and social care champion for local



people in Stockport. It was created to gather and represent the views of the public and plays a role at both regional and local level to support local health organisations to ensure that the views of the public and people who use services are taken into account.

Healthwatch is an instrumental part of the public involvement network across Stockport and members from the Board sit on a wide range of committees and local decision-making groups, including the Stockport Health Partnership Board and Health and Wellbeing Board, to ensure public views are represented.

Healthwatch Stockport is committed to continuing their role in supporting local health and care organisations by:

- Informing by providing information and signposting about health and care support and services.
- Involving and gathering local views to ensure communities are listened to about what works well and what could be improved.
- **Influencing** the planning and delivery of local health and social care services based on **local views**.

Over the last year Healthwatch has held a series of Network events, bringing together health, social care, charity and voluntary partners to discuss issues and celebrate achievements.

One significant event was the NHS70 Party held on the 5 July to mark the anniversary of the NHS, which was held at St Catherine's Church, Heald Green with around 100 people in attendance. The event included a series of interactive presentations and a memorabilia display, including old uniforms and public health posters from the last 70 years in Stockport.

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In addition to the NHS70 event, Healthwatch held regular engagement activity and events on the following:

- A series of Afternoon Tea Events finding out people's experiences on Domiciliary Care;
- Network Event on updating the Healthwatch priorities;
- Focus group on Diabetic eye screening;
- Members reviewed leaflets intended for the public on pharmacy and mental health;
- Held a mental health strategy briefing session;
- Engaged local people and users of the angiography service about changes to service;
- Members were engaged with the Electronic patient record change over;
- The Director of Adult Social care gave Healthwatch Stockport a briefing on care services;
- Healthwatch Stockport Network Event local health and social care support services provided by the voluntary sector Marple;
- Bosden Farm Carers Event;
- Health and Wellbeing Event, Signpost Stockport for Carers;
- Engaging local people on the Dental Access survey;
- Healthwatch Stockport Annual General Meeting;
- #ItStartsWithYou national Healthwatch campaign promotion;

7.7 Citizen's Panel

The Stockport Citizens' Panel is managed by the CCG and helps to gather local community's insight and opinion on local health and social care issues.

The panel is made up of representatives from local communities and patient groups, including Healthwatch and ensures that partners can regularly seek the views of a sample of local residents on health and social care issues and in planning.

The Citizens' Panel complements and expands to invite other patient representative groups, such as patient participation groups (PPGs) to join meetings when required.

During 2018-2019 the panel scrutinised a number of topics and commissioning plans by the including:

- Mental Health Commissioning intentions for adults, children and young people;
- Greater Manchester Carers Charter;
- Stockport Red Bag initiative;
- Stockport Outpatients Project;
- GMHSCP Improving Specialist Care;
- Viaduct Care launch of new services;
- Neighbourhood updates, including Health Champions project;
- Development of a Stockport Involvement Strategy;
- Proposal for a new Partnership Involvement Network;

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- Stockport Joint Strategic Needs Assessment;
- Stockport Devolution Difference event;
- NHS70 celebrations;
- Pennine Care NHS Foundation Trust consultation on mixed sex accommodation;
- Mental Health Conference 'One Size Does not Fit All';
- SEND Local Area inspection.

Clinicians and senior staff led the presentation of these plans and key questions and comments by the panel were noted and taken back to programme teams for consideration.

The Citizen Panel both as a collective group and as individuals are strengthening the ambition of the CCG and local partners to develop working partnerships which lean more towards co-design and coproduction. In this way members can have a strategic view and also work in coproduction on operational strands such as the Outcomes framework, key initiatives, and wider plans.

7.8 Mental Health Advisory Group

The Mental Health Advisory Group (MHAG) was set up in 2018 having evolved from the development and introduction of three new mental health services, Psychological Medicine in Primary Care, GP Navigators and Community Psychiatric Nurse into the Crisis Team.

The MHAG has representation from Stockport CCG, Stockport Council, Pennine Care NHS Foundation Trust and third sector organisation, who are working in partnership to understand local needs and develop mental health services.

The group meets bi-monthly and has two lived experience patients who provide critical input and suggestions on a range of issues, including suicide prevention, bereavement counselling and post self-harm support.

As a result of the collaborative partnership and the direct involvement of patients on the group,

Stockport has excellent strategic expertise for implementation and development of Mental Health services such as Suicide Prevention for example, to ensure that it reflects the experience of individual, carers and families in our communities.

7.9 Special Educational Needs and Disabilities (SEND) Inspection

A Local Area Inspection was undertaken by Ofsted and the Care Quality Commission (CQC) in September 2018 which can be found on the **Stockport Local Offer**.

The inspection was to determine the local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities and evaluate how much progress

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has been made in implementing the SEND Code of Practice 0-25 years, since its implementation in September 2014.

During the inspection inspectors visited settings, schools and a college, and engaged with over 400 parents, children and young people with SEND.

The final report was critical of health, education and social care services across Stockport and encouraged partners to work more closely with families to improve the quality of services.

The CCG and Stockport Council were required to complete a Written Statement of Action (WSoA) for submission to the DfF.

Since November 2018 the CCG and Council held a number of public workshops and surveys, inviting parents, carers and young people to share their lived experience and to work with the organisations in improving local SEND services.

The work will continue over the next two years and so far over 300 families have been actively involved and a proactive programme is in place to continually engage, inform and involve local communities. This includes parent representatives on the SEND Board and all the SEND work streams, to ensure that improvements are coproduced

7.10 Over-the-counter Medicines

In December 2017 NHS England launched a national public consultation on reducing prescribing of over-the-counter medicines for 35 minor, short-term health conditions. The consultation



closed in March 2018 and guidance was issued to CCGs on how to implement the changes.

The consultation included items for a condition:

- That is considered to be self-limiting and so does not need treatment as it will get better on its own without any treatment; and
- Where self-care would be appropriate, i.e. that the person suffering does not normally need to seek medical care but may decide to seek help with symptom relief from a local pharmacy and use an over the counter medicine.

Each year the NHS spends around £569 million on prescriptions for medicines which can be purchased over-the-counter from a pharmacy and other outlets such as supermarkets. Many have little evidence that they work and many of the conditions treated would get better on their own without doing anything.

The aim of the nationally co-ordinated consultation by NHS England was to develop commissioning guidance on over-the-counter medicines and produce a consistent, national framework for CCGs to use.

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As a result in March 2019 CCGs across Greater Manchester, including Stockport, launched an engagement campaign with communities to consider any local issues that may need to be considered before implementing the NHS England recommendations. Full details on the engagement will be published on the CCG website and Citizen Space.

7.11 Greater Manchester Health and Social Care Partnership - Improving Specialist Care

The Greater Manchester health and social care strategic plan, 'Taking Charge of Our Health and Social Care in Greater Manchester' was published in December 2015.

Part of this work identified that there are significant differences in population health and in outcomes for people across our health and social care system, depending on where they live or receive care in the region; which is unacceptable.

'Taking Charge' identified interlinking themes for the transforming health and social care in the city region, including Stockport. The plan is about improving the health and wellbeing of the 2.8 million people living in Greater Manchester, as much and as quickly possible, by:

- Helping people to better manage their own health
- Providing more joined-up care near where people live
- Working together, across hospitals and practices, to share skills and specialist treatment
- Doing things more efficiently and to the same high standards across all boroughs

Since signing an historic devolution deal with the government, Greater Manchester has taken charge of the £6bn spent on health and social care in the ten boroughs. It also got an extra £450m to transform public services. The Greater Manchester Health and Social Care Partnership was formed to oversee the changes and make them happen together.

What is the Improving Specialist Care Programme?

The aim of the Programme is to support hospitals across the region to work more closely together, and with a variety of health and social care organisations, across a range of clinical services to make sure expertise, experience and efficiencies can be shared widely so that everyone in the region can benefit from the same standards of specialist care.

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The services included in the Programme are:

- Benign Urology
- Cardiology
- Respiratory
- MSK/Orthopaedics
- Paediatric Surgery
- Breast Services
- Vascular
- Neuro-Rehabilitation

They were included because in 2016, Clinicians, Trusts and Commissioners across Greater Manchester identified these services as increasingly under pressure, potentially unsustainable in the future and would require a Greater Manchester wide solution not local or incremental change.

The Programme is producing proposals for new Models of Care (how services are delivered) which can be applied across the region which reduce variations in outcomes for patients, improves access to care and makes services more sustainable for the future.

A range of options will be developed for how each service could be delivered more effectively in the future, these options will be explored with our partners and stakeholders, including patients and carers.

Next steps

As the Improving Specialist Care Programme develops possible options for service change will start to emerge, there will be planned local engagement and NHS Stockport CCG will be part of informing and shaping how that engagement activity can be best delivered in our communities.

7.12 Stockport Council Public Health Team

The Stockport Council Public Health Team delivers a range of interventions and activities to engage local residents in improving their own health. The information below provides an overview for the key successes over the last year.

Stockport Active Ageing

Active Ageing in Stockport is a partnership programme between Stockport Council, Life Leisure, Age UK Stockport, Stockport Homes and Stockport's older population. The programme aims to help people over the age of 65 who are currently inactive and have experienced a life event (as defined in NICE guidance) to become more physically active.

The programme was launched in November 2018 and provides a 12 week peer mentor support scheme, free activity passes, an inclusive activity timetable and on-going support and advice.

A key focus for the programme is to have participants tell their stories through the marketing campaign and inform the future programme development.

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Although still in the early stages, 56 people have either begun the programme or expressed their intent to start and four have successfully trained as peer mentor volunteers.

GP Practice Health Champions

The aim of creating Practice Health Champions was to nurture collaboration between GP Practices and people from the local community. To date Practices in Alvanley, Bracondale, and Heaton Moor have introduced Health Champions.

In the Stockport pilot, local people were invited to volunteer as health champions at three GP Practices to offer new, innovative activities and support to improve the health and wellbeing of the local community.

They have played a particularly strong role in tackling social isolation, with well attended weekly community events, and also helping others to change to a healthier lifestyle with regular walks, healthy eating classes and other targeted activities.

Anecdotally the work of the health champions has led to a reduction in GP appointments particularly amongst "frequent flyers" but the impact will continue to be monitored to ensure the potential benefits to patients is harnessed.

7.13 Stockport - End of Life Conversation

The 'End of Life' Conversation was an engagement event with carers who looked after someone who passed away in last 12 months. As part the review and redesign the palliative care provision in Stockport, the CCG and Stockport NHS Foundation Trust worked together with Healthwatch to organise a focus group to:

- Understand the experiences of informal carers in looking after someone at the end stage of their life;
- Inform the direction of the local implementation plan for palliative care in Stockport.

The aim of the engagement was to learn from experiences of family carers what works well, what needs improvement, what is missing and what suggestions people might have to improve our local palliative care offer.

The feedback from the participants confirmed that the new model needs be developed that acknowledge the different needs between palliative care and bereavement pathway ensure the right balance between support for patients, carers and families. There will also be further exploration for respite opportunities.

Next steps for involvement for the group

The participants have been promised to meet up with commissioner and palliative care lead in nine months' time to keep informed on progress of this redesign work and to further engage on specific elements to ensure it is the right new model.

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7.14 South East Sector Healthier Together Public Voice

One of the CCGs key programmes of work is the delivery of the Healthier Together programme which aims to implement a range of quality standards to improve patient outcomes as part of a Greater Manchester initiative. Stockport CCG are the lead commissioner for the South East Sector Healthier Together Programme which includes partners from Stockport NHS Foundation Trust, Tameside and Glossop CCG, Tameside and Glossop Integrated Care Foundation Trust, North Derbyshire CCG and Eastern Cheshire CCG.

To ensure excellent patient and public involvement, Stockport CCG led on the development of Public Voice, a patient and public involvement forum for Stockport, Tameside and Glossop, North Derbyshire and East Cheshire. The group is led by a lay Chair who is also a member of the South East Sector Healthier Together Programme Board to ensure that the voice of local people is at the heart of the Healthier Together Programme. During 2018/19 Public Voice was involved in a range of key areas:



- A sub group of Public Voice was established to review the impact of the Healthier Together Programme on Patients and carers in regard to transport. The outputs of this work were shared with the Programme Board and indicate the need to fund local voluntary sector transport initiatives in 3 key areas to avoid any inequalities created by the Healthier Together changes;
- In May 2018 the Surgical Teams from Stockport NHS
 Foundation Trust, along with the team from Tameside
 and Glossop Integrated Care Foundation Trust and
 The Christie undertook a mock Multidisciplinary Team
 meeting enabling Public Voice members to see what
 happens in such meetings and provide feedback
 on how the patients thought the process could be
 improved from their perspective;
- During the year the proposed clinical pathways and financial case for Healthier Together were presented and discussed with Public Voice with their feedback being taken into consideration and amendments being included where possible. The national Emergency Laparotomy Audit data for Stockport, Tameside and Glossop was also explained and shared so that the public and patient members understand why the programme is so important and what the data is telling us;

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- A number of interactive check and challenge sessions were undertaken so that Public Voice Members could understand, challenge and support the improvement of the whole programme
- A mock post take ward round was also undertaken to enable patient and public involvement in the development of new processes along with the surgical team



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Feedback from involvement exercises is reported to the CCG's Governing Body on a quarterly basis. It is used as a key piece of evidence for consideration in decisions and showing how the views of communities are translated into commissioning decisions.

One of the key tools for feeding back to local people is the CCG's engagement website:

https://stockport-haveyoursay.citizenspace.com/

For those without access to the internet, write-ups of events are also sent out to local groups after they have met with the NHS. Sign-up sheets are also taken at all public events so people who wish to receive a write-up of the event can have this sent to them in their preferred format.

Articles summarising formal consultations are included in the local Council publication that is delivered to all households in Stockport. In addition, feedback reports are sent to the Healthwatch for inclusion in their regular newsletter and targeted feedback articles are also included in a wide range of local newsletters.



A full breakdown of involvement and engagement activity can be found in Appendix 1 which outlines:

- When activity took place;
- How many people were involved;
- What was asked;
- What local people told us:
- · What was done as a result of local feedback; and
- Where to find more information on the involvement activity.

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The Stockport Together public consultation in 2017-2018 made clear recommendations for how the CCG should engage and involve local communities.

The CCG developed five guiding principles from the feedback.

They are:

- Increase local knowledge about the issues needed to address as a health and care system;
- Encourage public to share the lived experience to inform service development;
- Actively supporting local communities to be involved in decision-making;
- Create opportunities for public to engage with each other;
- Ask people "What Matters to You" as a 'personcentred' approach to care.

The aim is to ensure that the approach will be more systematic, structured and aligned to the commissioning cycle.

9.1 Shaping the way the CCG engages and involves communities

As Stockport adopt a neighbourhood approach to delivering health and social care services, similarly, the CCG needs to consider a neighbourhood approach to engagement and involvement.

Through GP practices and our new neighbourhood leads, there is a key role for working with local people and maximizing connections between existing groups and organisations.

Moving forward, more detailed planning is required between Commissioners and Providers to determine the appropriate levels of engagement.

These considerations will include:

- The statutory requirement of the Joint Commissioner to engage with local populations to assess the overall health and social care needs of that population;
- The advantaged position of neighbourhood leads having frequent contact with local people through GP practice or specialist services;
- The access to people (including hard to reach and seldom heard groups) that the third sector open up in promoting population health messages and increased levels of engagement and involvement.

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9.2 Partnership Involvement Network

Across England many health and social care organisations are working ever more collaboratively to deliver joined-up and consistent involvement with local communities. In Greater Manchester Tameside and Glossop have led the way in introducing a new model of engagement and involvement and Stockport is building support to develop a similar approach.

The proposal is being developed to evolve local engagement which is currently delivered by each organisation separately, into a new Partnership Involvement Network that would be part of a strategic system-wide health and care partnership.

The aim of the Partnership Involvement Network (PIN) proposal would be for it to become part of a partnership approach to provide the patients, carers and local communities with a structured method to influence the strategic planning and development of health and care services and to co-produce issues and ideas.

The key principles behind the proposal for a Partnership Involvement Network (PIN) would be to:

- Actively involve the public, patients and other stakeholders in shaping local services;
- Work collaboratively across public and community sectors so that involvement is joined up across Stockport;
- Continually ask 'What Matters' to the public, patients and other stakeholders when planning and shaping local services.

The new network will establish a coordinated and collaborative forum for people and organisations to ensure their voices are heard and give the opportunity to learn about and influence to the development of public services.

Next steps

The proposals to set up a Partnership Involvement Network will be coproduced and developed with local partners and would become a central strategic involvement forum for representative organisations and individuals across Stockport.

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Stockport CCG is tasked with a number of different roles: from directly commissioning and buying services, to ensuring that local health and care plans are designed to meet the need of local communities. We hope that this review has provided a range of examples of how we have worked in partnership with patients and communities in carrying out our responsibilities.

We want to work closely with patients, carers and communities who have experience of using health and care support or services to make improvements in how that care is planned, organised and delivered.

We know that people share our ambition to continually improve services into the future.

Although we have seen significant changes in the NHS this review demonstrates our continued commitment to improve the way we involve people to shape better health and care services.

However, our intention is to strengthen this work and to get better at demonstrating the difference we can really make, by increasing how communities can be involved in shaping services and decision-making.

As the needs of our local communities and population change, we will continue to work with them together to establish how best to meet new challenges.

Over the next year we will focus on further improvements in how we engage and act on what patients and the public are telling us.

Finally, we would like to thank all of our patients, staff and community partners who have worked with us in to help achieve our goals.



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01/04/2018	80	Mental Health Training Sessions with TPA	As part of extending confidence in holistic assessments to partner colleagues TPA colleagues asked for training on a list of commonly encountered difficulties relating to clients mental health	To help improve competencies of non- health staff in managing distressed patients within a social prescribing setting, a series of training sessions covering the list was developed and delivered in a small group interactive setting	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/mental- health-training- sessions-with-tpa
01/05/2018	96	Mental Health training with Stockport Homes	We asked: Whilst attending a Public Health led discussion with colleagues from Stockport Homes, ABL, CGL, and START it became clear that they frequently work with distressed or challenging residents. The Clinical Commissioner for Neighbourhoods, Steve Bradshaw, offered to deliver bespoke training sessions to these colleagues to help with these challenges.	Feedback during follow up question and answer sessions reflected better confidence and knowledge subsequent to the training. Colleagues now have a better understanding of communicating with mentally distressed clients and social prescribing to complement their area of expertise.	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/mental- health-training-with- stockport-homes

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	No of	We asked	You Said	We Did	For more
14/05/2018	people	Red Bag Scheme - We would like the Residents and families from the Residential and Nursing homes to give continual feedback that it has supported their transition into hospital and the safe discharge back home again.	 A number of positives have been received about the scheme: Staff at the hospital are engaging with the scheme and service users are coming home quicker. Families are happy (not losing glasses etc) Reduced phone calls to the care home Protects providers – evidence that information has been sent to the hospital- check list Positive feedback and support from NWAS and ED However there are still some area that require improvement: GP's / Consultants require training Notes not always returned -Paperwork needs to stay in the bag. More promotion in the hospital so all staff are aware, due to high turnover of care and nursing staff. Person Centred info poor quality or not always read 	A Pathway Development Plan has been developed with actions for each of the providers such as Nursing, Residential, Extra Care Homes, NWAS and Hospitals to ensure Champions have been identified and the necessary staff are well trained and fully aware of the scheme.	information

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When	No of people	We asked (Activity)	You Said	We Did (Impact)	For more information
14/05/2018	13	Continuing and Complex Health Care survey – Families were asked to rate the service they had received from the service	The patient experience survey results are as below: 13 people in total filled in the survey from July 2018 to March 2019. All those asked to think about the Continuing Healthcare process — 9 out of the 13 people asked said they were happy with the CHC process from their first contact with the CHC team to placement or implementation of their care as above. 4 people commented that there was some aspect of communication that could be improved; the team is reviewing to learn from the comments. Did you understand the process? 10 of the 13 asked said that they understood the process, 1 person said 'No' as they were a relative that lived a long distance away and hadn't been involved in the process. 2 people said the process was new to them and found it difficult.		https://stockport-haveyoursay. citizenspace.com/ continuing-and- complex-health- care/51d2393f

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	Continuing and Complex Health	Were you kept well informed? 9 out of the 13 people were kept well informed, 1 person said no but indicated that they were invited to the meeting but that they lived far away and could not attend. 3 people commented that there was some aspect of communication that could be improved; the team is reviewing to learn from the comments. There were 0 complaints regarding quality of care of providers and all responses stated that care was good or very good.		

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When	No of people	We asked (Activity)	You Said	We Did (Impact)	For more information
29/05/2018	30	Team around the Town meetings - As Neighbourhood Clinical Commissioner, Steve Bradshaw has indicated an interest and wish to be involved in the development of social prescribing networks	As Clinical Commissioner for the Neighbourhoods, Steve Bradshaw was invited and attended three meetings over the last 12 months You said: TPA Community Connectors arrange periodic 'Team around the Place' meetings. These offer the opportunity for local groups/residents to meet and share their values along with what their group can offer as a means of promoting greater local knowledge.	An example of a positive outcome was that at the Marple meeting it was noticed that there was a clash of meeting times between two groups both of whom would have benefited the same group of attendees. Therefore one group agreed to change their meeting times. The overall outcome of all meetings is a better local knowledge between groups of what are already available and potential gaps. This will hopefully also then lead to on-going cooperation and signposting between groups.	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/team- around-the-town- meetings

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			100 0010		
11/06/2018	people	(Activity) Osteoarthritis of the Knee Workshop Questionnaire V4 This is the first time Stockport Together have collaborated		(Impact)	information https://stockport- haveyoursay. citizenspace.com/ stockport-together/ d2e9fced
		to provide this workshop. We would value your feedback, so we can decide if this is a suitable event to run, and how we can improve it for the future			

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When	No of people	We asked (Activity)	You Said	We Did (Impact)	For more information
26/06/2018	11	Citizens Representation Panel 26th June 2018	A number of topics were discussed: Mental Health Commissioning Intensions - Adults and Children and Young People; Stockport's Devolution Difference event; presentation by Karen Snelson and Andrea Stewart on the Outpatients Project.	The attached paper provides an outline of activity for the CCG and Partners to complete on behalf of the CRP.	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/crp- 26th-june-2018
24/07/2018	100	Healthwatch - NHS 70yr birthday celebration event	·	During the event members of the public shared their stories of the NHS, and were happy to hear from not only people who have benefitted as patients but also former NHS staff members too.	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/mental- health-training-with- stockport-homes
26/07/2018	51	AGM 2018			https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/agm- 2018



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When	No of people	We asked (Activity)	You Said	We Did (Impact)	For more information
08/08/2018		Mental Health	To improve the representation at this multi-agency advisory group we sought user and carer representatives. This was first raised at the August meeting. This was achieved by contacts with Mind and SPARC and meeting with volunteers. The first meeting attended by service users was 10th October. We asked for interested service users/carers to become involved in this multi-agency bi-monthly mental health advisory group.	Two volunteers came forward and after further discussion regarding the nature	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/mental- health-advisory- group-1
25/09/2018	10	Citizens Representation Panel 25th September 2018	Topics for discussion: Theme 3 Dermatoscope and Dermatology Project Commissioning Intentions 2019/20 Neighbourhood Update Update on Heaton's Neighbourhood	The attached paper provides an outline of activity for the CCG and partners to complete on behalf of the CRP	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/crp-25- september-2018

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When	No of people	We asked (Activity)	You Said	We Did (Impact)	For more information
08/10/2018	6	Third Sector Contract Review - Reviewing current provision and future aspirations. We asked: What is being done well? Where are the gaps? What could be done better? What are our aspirations?	 You said: During the discussion a number of themes emerged for example: How Stockport Mind is involved in GM wide developments Challenges of being a small single borough provider The activities led through SPARC Challenges for Carers 	All the information from the workshops were considered and discussed. The Local Authority is using this to re-draught contracts and nuance aspiration. These contracts are out for competitive tender at the time of writing this.	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/mental- health-third-sector- contract-review

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When	No of people	We asked (Activity)	You Said	We Did (Impact)	For more information
10/10/2018	21	Devo Difference event - evaluation	More than 100 people attended the Devolution Difference event on 9 October 2018. The event was held to reflect on how health and social care in Stockport is changing for the better, helping local people live healthier, happier lives. The borough was handed the power to begin making these improvements two years ago when Greater Manchester took control of the region's £6bn health and social care budgets with the aim of transforming services. To mark the anniversary the event showcased the positive changes that have happened in health and social care services in Stockport that are making a difference to the lives of local people. Jon Rouse, the Chief Executive of Greater Manchester Health and Social Care Partnership delivered a key note speech and there was further insight into the transformation by leaders of NHS Stockport CCG, Stockport Council and Stockport NHS Foundation Trust.	The event was supported by over 25 local voluntary, charity and health and care organisations that formed a drop-in market place, allowing guests to find out more about how the changes will affect them and talk to staff in the services available in local communities.	https://stockport-haveyoursay. citizenspace.com/ communications- team/6a486be0

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01/11/2018	3 55	Osteoarthritis of the Knee Workshop Questionnaire V5		A knee workshop was set up and around 40 patients were invited to attend. Other professionals attended the event such as podiatry, ABL, Patients were shown a presentation and invited to ask questions. A survey was circulated to all those that attended which showed patients now had greater confidence in managing their condition.	https://stockport- haveyoursay. citizenspace. com/stockport- together/42ef9c4b
10/12/2018	3 77	SEND Workshop December 2018 - We asked Special Education Needs and Disability (SEND) parents and carers to look at the SEND review undertaken by Ofsted and CQC and give us their feedback	To see a full report of all the feedback and themes please go to the Local Offer page - https://stockport.fsd.org.uk/kb5/stockport/fsd/localoffer.page	The full details of activity, plans and outcomes to date can be found on the 'Local Offer' page via this link - https://stockport.fsd.org.uk/kb5/stockport/fsd/localoffer.page	https://stockport- haveyoursay. citizenspace. com/stockport- together/42ef9c4b

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When	No of people	We asked (Activity)	You Said	We Did (Impact)	For more information
11/12/2018	14	Citizens Representation Panel	Topics for discussion: Update from members of key activity, Strengthening involvement & Engagement in Stockport, Mental Health Conference and Send Inspection Report; Neighbourhood Update and Viaduct Care	The attached paper provides an outline of activity for the CCG and partners to complete on behalf of the CRP	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/ copy-of-crp-25- september-2018
13/12/2018	8	Tea with the GP - The scheme is simply asking patients to participate once invited, in order to improve their wellbeing by improving contact with GP surgery staff.	Feedback after the event from patients was excellent and it was enjoyed by all.	We are arranging a further event in this Neighbourhood and then approach the charity (Contact the Elderly) to gain permission/obtain funding for further Neighbourhoods.	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/tea-with- the-gp

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15/01/2019	Send	SEND Workshop January 2019 - We asked Special Education Needs and Disability (SEND) parents and carers to look at the SEND review undertaken by Ofsted and CQC and give us their feedback.	To see a full report of all the feedback and themes please go to the Local Offer page - https://stockport.fsd.org.uk/kb5/stockport/fsd/localoffer.page	There are a number of actions raised by parents for the Local Authority and	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/ send-workshop- january-2019

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When	No of people	We asked (Activity)	You Said	We Did (Impact)	For more information
18/01/2019		Practice Champion Scheme - Stepping Hill Neighbourhood We met with the Practice Champions at Bracondale Practice to ask if they would assist a practice in the Stepping Hill Neighbourhood to set up a similar scheme and possibly share activities for patients	The Bracondale Practice Champions agreed they would be glad to assist where they could and would welcome more volunteers working in the neighbouring Stepping Hill Neighbourhood.	Stepping Hill practices are going to decide if they wish to 'host' a Practice Champion scheme and would like more information from Public Health as to what is involved. The Practice Champions will wait to hear if a Stepping Hill practice wishes to engage and work with them later on this year.	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/practice- champion-scheme- shillneighbourho

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When	No of people	We asked (Activity)	You Said	We Did (Impact)	For more information
29/01/2019		End of Life Conversation - The aim of the engagement was to learn from experiences of family carers what works well, what needs improvement,	Strengths End of life team at home End of Life assessment Enhanced care team highly valued but only in last 2 weeks of life Advanced care planning works especially well for dementia patients but not necessarily for other conditions Weaknesses Not a person-centred care plan, no choice provided Not possible to book respite care Variable support from GPs: some very supportive GPs and some carers reported not having received much support from their GP Lack of conversations to discuss and plan end of life care No bereavement support offered Lack of training for staff; staff don't know when / how to start conversations and what services are available Treatment for pain was lacking	What we did or will do as a result (ie how this will influence decision-making) Made a split between the palliative care and bereavement pathway to acknowledge the different needs reviewed respite opportunities and are looking in creating more options for respite looked at continuity in support for carers in first days after death improved joint working between elements of the pathway extended enhanced support team involvement looked at training opportunities to up skill staff e.g. home care staff	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/end-of- life-conversation

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29/01/2019	19	End of Life Conversation - The aim of the engagement was to learn from experiences of family carers what works well, what needs improvement,	Challenges Adapting home gave stress and had an impact financially; home environment felt less homely Need to start conversations earlier Skills of family carers not appreciated by care home staff when cared for moves into care home Support for deaf people in end phase of life was lacking Barriers Disjointed services Lack of training for family carers	What we did or will do as a result (ie how this will influence decision-making)	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/end-of- life-conversation

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04/03/2019	66	Over the Counter Medicines	NHS Stockport CCG wants the views of local patients, the public and other stakeholders on the NHS England recommendations before taking any further decision on whether to remove these products from routine prescriptions locally.	Started in March and is ongoing until 1st April 2019	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/otc
05/03/2019	10	•	A number of topics were discussed, these included: National Signposting Scheme, length of time for GP appointment, Right Care, Right Time services and recruitment of staff.	It was agreed there would be regular discussions with NHS Watch and other colleagues.	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/ nhs-stockport-ccg- meeting-with-nhs- watch-consortiu
12/03/2019	13	Citizens Representation Panel 13th March 2018	Topics for discussion included: Update from members on key activity Proposal for Stockport Partnership Involvement Network (SPIN) Update GM Carers Charter Mental Health Advisory Group	The attached paper provides an outline of activity for the CCG and partners to complete on behalf of the CRP	https://stockport- haveyoursay. citizenspace.com/ consultation-and- engagement/crp- 12th-march-2019

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Appendix B - Health and Social Care Act 2012

All Clinical Commissioning Groups have duties outlined within the Health and Social Care Act 2012 to ensure patients are involved. The key elements regarding involvement within the Act are highlighted below.

Full details can be found at www.legislation.gov.uk/ukpga/2012/7/section/26/enacted

14U Duty to promote involvement of each patient

- (1) Each clinical commissioning group must, in the exercise of its functions, promote the involvement of patients, and their carers and representatives (if any), in decisions which relate to—
- a) the prevention or diagnosis of illness in the patients; or
- b) their care or treatment.
- (2) The Board must publish guidance for clinical commissioning groups on the discharge of their duties under this section.
- (3) A clinical commissioning group must have regard to any guidance published by the Board under subsection (2).

14Z2 Public involvement and consultation by clinical commissioning groups

- (1) This section applies in relation to any health services which are, or are to be, provided pursuant to arrangements made by a clinical commissioning group in the exercise of its functions ("commissioning arrangements").
- (2) The clinical commissioning group must make arrangements to secure that individuals to whom the services are being or may be provided are involved (whether by being consulted or provided with information or in other ways):
- a) in the planning of the commissioning arrangements by the group;
- b) in the development and consideration of proposals by the group for changes in the commissioning arrangements where the implementation of the proposals would have an impact on the manner in which the services are delivered to the individuals or the range of health services available to them; and
- c) in decisions of the group affecting the operation of the commissioning arrangements where the implementation of the decisions would (if made) have such an impact.

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- 6. WHAT OUR PATIENTS
 AND COMMUNITIES
 TELL US ABOUT LOCAL
 SERVICES
- 7. PUBLIC INVOLVEMENT PRIORITIES AND IMPACT OVER THE LAST YEAR
- 8. THE IMPACT OF INVOLVING OUR COMMUNITIES IN DECISION-MAKING.
- 9. FUTURE PLANS
- 10. CONCLUSION

APPENDICIES

APPENDICIES

Appendix B - Health and Social Care Act 2012

- (3) The clinical commissioning group must include in its constitution;
- a) a description of the arrangements made by it under subsection (2); and
- b) a statement of the principles which it will follow in implementing those arrangements.
- (4) The Board may publish guidance for clinical commissioning groups on the discharge of their functions under this section.
- (5) A clinical commissioning group must have regard to any guidance published by the Board under subsection (4).
- (6) The reference in subsection (2)(b) to the delivery of services is a reference to their delivery at the point when they are received by users.







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