

A meeting of the Patient Council will be held on Wednesday 31 October 2018 at 6.00pm at Hilder House, 49 – 51 Gawber Road, Barnsley, S75 2PY

### AGENDA

ITEM	SESSION	LEAD	TIME
1.	<b>Welcome and apologies</b>	Chair	6.00pm
2.	<b>Actions and updates of the previous meeting held on 26 September 2018</b>	<b>PC18/10/02</b> Chair	6.05pm
<b>WORKSHOP</b>			
3.	<p><b>Time to review the <a href="#">CCG Patient &amp; Public Involvement Strategy</a></b>            The strategy which you developed is now up for review. This month's session will be looking at what we want to keep and what we want to change.</p> <p>The current strategy is enclosed so you can remind yourself what went in it. It can also be accessed at the above hyperlink.</p>	<b>PC18/10/03</b> Emma Bradshaw, Engagement Manager	6.10pm
<b>GENERAL</b>			
4.	<b>Any other business</b>	<b>Chair</b>	7:20pm
5.	<p><b>Date and time of the next meeting:</b>            The next meeting will be taking place on Wednesday 28 November 2018, 6.00pm at Hilder House, 49 – 51 Gawber Road, Barnsley, S75 2PY.</p> <p><b>Future meeting dates 2019:</b>            Wednesday 30<sup>th</sup> January            Wednesday 27<sup>th</sup> February            Wednesday 27<sup>th</sup> March</p>		7.30pm Close

**For enquiries please contact:**

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**Minutes of the Barnsley Patient Council meeting held on Wednesday 28 September 2018 at 6.00pm in the Boardroom, Hilder House, Barnsley CCG, 49/51 Gawber Road, Barnsley, S75 2PY.**

**PRESENT:**

Chris Millington ( <i>Chair</i> )	Barnsley Clinical Commissioning Group Lay Member for Patient & Public Engagement
Alan Higgins	Barnsley Hospital Public Governor
Jan Eldred	The Kakoty Practice PRG
Adrian England	Healthwatch Barnsley / Monk Bretton Health Centre PRG
Ben Cox	The Grove Medical Centre PRG
Pat Durie	Patient, The Dove Valley Practice / My Barnsley Too
Margaret Sheard	White Rose Surgery PRG
Philip Watson	Patient, Hill Brow Surgery
Herbert Youel	Patient, Caxton House Surgery

**IN ATTENDANCE:**

Katie Popple ( <i>Minutes</i> )	Secretariat Team Leader & Executive PA, Barnsley Clinical Commissioning Group
Kirsty Waknell	Head of Communications & Engagement, Barnsley Clinical Commissioning Group

**APOLOGIES:**

Mike Austin	Primary Care Team, Barnsley Clinical Commissioning Group
Ann Hart	Ashville Medical Centre PRG
Margaret Lindquist	Walderslade Surgery PRG
Jill Marshall	Kingswell Surgery PRG
Janet Neville	Patient, Rotherham Road Medical Centre
Elaine Staley	The Kakoty Practice PRG
Colin Wilkinson	Park Grove Medical Practice PRG

Agenda Item	Note	Action	Deadline
PC18/09/01	<b>WELCOME AND APOLOGIES</b>		
	The Chair welcomed everyone to the meeting and apologies were noted.		
PC18/09/02	<b>MINUTES OF THE PATIENT COUNCIL HELD ON 25 JULY 2018</b>		

Agenda Item	Note	Action	Deadline
	<p>The minutes of the previous meeting held on 25 July 2018 were approved subject to the following amendment on item PC18/07/02: “The project intended to create 1560 champions in its first year (<del>the equivalent of 7% of Barnsley’s population</del>), targeting areas deemed high risk using the Fingertips Database (a public health database website accessible to all)”.</p> <p>It was noted that the percentage was highlighted as incorrect during the presentation.</p>		
<b>PC18/09/03</b>	<b>THINGS YOU’VE CONTRIBUTED TO THIS YEAR</b>		
	<p>The Patient Council has played an influential part in helping to shape services by feeding back their personal experiences and ideas for better working. The CCG wanted members to see the positive impact that their input had had on Barnsley people and their local community.</p> <p>The group were shown a preview of a film which was scheduled to be viewed at Barnsley CCG’s Annual General Meeting the following day. The film explored key areas where the CCG had focused its resources throughout the year on joining up care to make health services seamless for people in Barnsley. It looked back at some of the main achievements over the past 12 months, along with an overview of CCG’s accounts for 2017/18.</p> <p><i>You can watch the film here: <a href="http://www.barnsleyccg.nhs.uk/about-us/annual-general-meeting-2.htm">http://www.barnsleyccg.nhs.uk/about-us/annual-general-meeting-2.htm</a></i></p>		
	<p>Both the film and the Head of Communications and Engagement offered the following updates for each key area:</p> <p><b><u>BREATHE</u></b> A service offering a different type of support for long-term breathing conditions such as COPD, by taking the service to individual’s in their own homes, with nurses on-hand to offer care, preventing hospital admissions and allowing patients to be involved in managing their own condition.</p> <p><b><u>MSK Model</u></b> Anyone with a bone, muscle or joint problem is now assessed over the phone within 48 hours of a GP referral, ensuring they are referred for the correct treatment first time, avoiding any unnecessary delays.</p>		

Agenda Item	Note	Action	Deadline
	<p><u>Diabetes</u> The new service joins up all the different team's involved in someone's care, with more support available within GP practices. The hope is that integrated care will be provided closer to home, allowing Barnsley patients to manage their long-term condition more effectively, reducing A&amp;E and hospital admissions.</p> <p>A member of the group commented that they felt examples of patient experience were missing from this section of the video. The Head of Communications &amp; Engagement agreed to feed this back. Additionally she encouraged the group to share both positive and negative experiences to help improve services. It was reiterated that the CCG wanted everybody to have high levels of care across all services and that everyone should have Patient Choice.</p> <p><u>Neighbourhood Nursing Team</u> There has been focused work on staff in care homes to keep residents out of hospital by providing high quality care through joining up the way in which teams at the hospital, neighbourhood nursing, GP practices, the council and care homes are working together. This has already had a huge impact with a 30% reduction in hospital admissions. It was identified that following a fall, rather than immediately requesting an ambulance, an assessment should occur to establish if the patient requires hospital care or care provided by alternative resources in the community.</p> <p><u>Therapy Based Intermediate Care Service</u> The Acorn Unit is a new 24 bed unit led by therapists in Barnsley Hospital which was set-up to help people get back up onto their feet following discharge. Both hospital and community patients can be signposted to the unit for further rehabilitation to improve independence, function and mobility through incentives such as exercise classes, mental stimulation and building confidence. Professionals are working in partnership to ensure the correct resources are in place once a patient is discharge so individuals feel fully supported. The benefits include the ability to leave hospital sooner, a reduction in the likelihood of readmission and better patient flow through the hospital creating more beds.</p> <p><u>Mental Health and Wellbeing Services and Wider Community Support for Children and Young People – OASIS &amp; Chilypep</u> The CCG has continued to work with young people this</p>		



Agenda Item	Note	Action	Deadline
	<p>doctors and nurses to help manage long-term conditions ensuring patients are getting the most out of their medicines and provide better access to health checks. This may involve following up any inaccuracies on hospital discharge summaries or carrying out medication reviews. This frees up GP time so they can focus their skills on where they are most needed.</p> <p><u>Neighbourhood Working</u> With more services being offered locally, GP practices are quickly developing their role as a hub in their local neighbourhoods by looking at the benefits of joining up with a whole range of services, all centred around local communities, including consultants, therapists, neighbourhood nurses, mental health teams and My Best Life. It was explained that these plans would be further developed this coming year, with the CCG working alongside the residents, community and voluntary organisations and the council in the Dearne to improve health and wellbeing together.</p> <p><u>Barnsley CCG's Budget</u> The CCG's budget for 2017/2018 was £413,063,000. If this was represented as £1 it would be broken down into the following spend on services:</p> <ul style="list-style-type: none"> <li>• 50p – Hospitals and Patient Transport</li> <li>• 12p – Medications</li> <li>• 11p – GP Services</li> <li>• 9p – Community Services</li> <li>• 8p – Mental Health Services</li> <li>• 4p – Funding Continuing Healthcare</li> <li>• 1p – Running Costs</li> <li>• 5p – Other Programmes</li> </ul> <p><u>Awards</u> This year Barnsley CCG was 'highly commended' in the HSJ CCG of the Year Award, won two national awards for helping patients get the best out of their medications and was one of only 20 CCGs in the country ranked as 'Outstanding' by NHS England. Colleagues have also been celebrating 70 years of NHS service and the value it brings to everyone's lives.</p>		
	<p>The Chair and Head of Communications and Engagement thanked the Patient Council for their continued support and contribution.</p>		

Agenda Item	Note	Action	Deadline
PC18/09/04	<b>ANY OTHER BUSINESS</b>		
	<p><u>OPEN (Our Public Engagement Network) Membership Scheme Sign-up</u>  The Head of Communications &amp; Engagement reiterated the ability to sign-up to OPEN, which would provide further opportunities of engagement. Some members took additional sign-up cards to distribute amongst their PRGs / networks.</p> <p><u>Annual General Meeting</u>  Members were reminded that this would take place the following day on Thursday 27<sup>th</sup> September at 10am (registration from 9:30am) at the Digital Media Centre, County Way, Barnsley, S70 2JW.</p>		
PC18/09/05	<b>DATE AND TIME OF THE NEXT MEETING</b>		
	<p>The next meeting of the Patient Council will be held on Wednesday 31 October 2018 at 6.00 pm, in the Boardroom Hillder House, 49 – 51 Gawber Road, Barnsley, S75 2PY.</p> <p><b>Future Meeting Dates 2018</b>  28 November</p>		

# Patient and Public Engagement Strategy

2016 – 2018



**NHS Barnsley Clinical Commissioning Group (CCG)****Patient and Public Engagement (PPE) Strategy 2016 – 2018****Version control**

Version 8 developed December 2016 – Approved January 2017

<b>Contents</b>	<b>Page</b>
<b>1. Why is patient and public engagement important to us?</b>	3-4
<b>2. Guiding principles</b>	5-7
<b>3. The Engagement Cycle</b>	8
<b>4. How you can help us and give your views on NHS health services in Barnsley</b>	9-11
<b>5. How will we review how we are getting on?</b>	11
<b>6. Associated Strategies</b>	12-13
<b>7. What do you think of our strategy?</b>	13
<b>Appendix 1 - Engagement Expenses Reimbursement, Payments for patients and members of the Public</b>	14-15

## 1. Why is patient and public engagement important to us?

### Introduction

***‘The Government aims for there to be “no decision about me, without me” for patients and their own care. The same goes for the design of health and social care services at both a local and a national level’.***<sup>1</sup>

In order to effectively plan and buy the right services on behalf of our local community, we need to find out the views and experiences of members of the public, patients, and their carers, including those people who are less likely to speak up for themselves.

As the people who use and pay for the local NHS, it is really important for us to hear comments, experiences, ideas and suggestions from local people from across Barnsley about the ways in which we can develop and improve services to benefit our local communities.

Clinical Commissioning Groups (CCG's) who engage with their local community and build the feedback and views they gain from this into their commissioning decisions will be better placed to offer services that respond to the needs of local people and are accountable.

Patient and public engagement is the active participation of patients (also often referred to as service users), carers, community groups and the general public in how our health and well-being services are planned, delivered and evaluated. This can range from an individual conversation to working with a particular population group. It is broader and deeper than traditional consultation and the giving of information. Effective patient and public engagement leads to improvements in health services, and is part of everyone's role in the NHS, 'every interaction counts!'

We will be able to better meet people's needs if we listen to what people tell us, instead of relying on existing knowledge and assumptions. We can develop improved, more responsive services if we involve and truly listen to not only those who are already using services, but those who are not.

As an organisation we are committed to ensuring that meaningful engagement with patients, carers and the public is at the heart of our decision making. Through effective commissioning we want to deliver high quality and safe services that meet the needs of Barnsley people.

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<sup>1</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/138262/B3.-Factsheet-Greater-voice-for-patients-300512.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/138262/B3.-Factsheet-Greater-voice-for-patients-300512.pdf)

Putting Barnsley People First

We want to develop an organisation where everyone recognises and promotes the value of involving patients and the public, and their role in commissioning and improving services.

This strategy has been developed in partnership with members of the Barnsley Patient Council and with input from our staff and local partners working within health and social care organisations across Barnsley.

#### National context and legal framework

NHS England published, '[Transforming Participation In Health and Care – The NHS Belongs To Us All](#)' in September 2013 which states how the vision for patient and public participation, outlined in the [NHS Constitution](#) and [Health and Social Care Act 2012](#), will become a reality.

The legal framework within which we operate can be found [here](#)

In brief our engagement responsibilities as a Clinical Commissioning Group (CCG) are as follows:

- Ensuring that patients, carers and the public have opportunities to be involved in the commissioning of health services;
- Ensuring that consultation and engagement around service changes and developments is carried out to an appropriate level to meet legal requirements;
- Supporting the collection, collation and dissemination of patient experience data and ensuring that it feeds into patient's engagement;
- Promoting patient choice;
- Promoting each patients involvement in decision about their own care;
- Building and protecting the relationship of the local NHS;
- Building effective relationships with staff, public, patients, carers, partners and the media;
- Providing different ways in which patients, carers, the public and partners can share their views;
- Ensuring the provision of information for patients is appropriate and timely; and that local information will aid the implementation of these roles and responsibilities, with particular attention being paid to the equality agenda and the information highlighted in the Barnsley [Joint Strategic Needs Assessment](#)

## 2. Guiding principles

*“It’s not about how much it costs to engage people; it’s about how much it costs if you don’t engage people: How much does it cost if the CCG commissions things wrongly? If it doesn’t benefit patients/service users it costs financially but also in terms of patients not getting the right service!”*

Barnsley Patient Council Member

The following guiding principles or aims and objectives have been developed in conjunction with members of the Barnsley Patient Council, CCG staff and with input from colleagues working within the field of engagement from some of our local partner organisations.

- ✓ We understand that it is easier to hear some voices than others and we are keen to engage with a more diverse group of patients and public, particularly those who have traditionally been less engaged. We will work with our partners across health and social care alongside patient groups, and local voluntary, faith and community groups to achieve this.
- ✓ **“More integration/co-operation across services/borders”** - We do not want to duplicate the work of other organisations and we are committed to working in partnership to increase our reach and maximise our collective resources and networks wherever it is possible and appropriate to do so.
- ✓ **“Don’t expect people to always come to you”** - We want to build ongoing relationships with local people and organisations and be more systematic in how we involve patients in decision making across whole of the commissioning cycle in a timely fashion.
- ✓ We understand that there are many voices and views in Barnsley. In making commissioning decisions, we will have to ensure that we maintain a balance between the range of views expressed alongside clinical effectiveness and financial implications. We will always aim to be open and transparent about our decision making and justify how we reach decisions that reflect this.
- ✓ **“I’m a part time patient but a full time person”** - We will work towards creating an environment in which people are empowered to be equal partners in managing their own health and wellbeing and understand how to access the services and tools that they need to enable them to do so.
- ✓ **Importance of carer/family views in addition to patients and service users** - We will ensure that feedback from patients and carers helps to improve the quality and safety of local services. We will listen to patient and carer stories and experiences and ‘walk’ the patient journey in order to gain a full picture of the

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quality of local services and provide us with a starting point in terms of any service development.

- ✓ **“Don’t use jargon – be clear on what you are asking and why”** - We will be clear about when we are ‘communicating’ information and when we are ‘engaging’ and ‘consulting’ and the differences between these.
- ✓ We will strive to effectively manage expectations by being open and upfront about what each engagement and/or consultation process can achieve and will feedback the results publicly to all who took part and, if for any reason we cannot meet the requirements asked of us, we will explain why.
- ✓ **“Learn from the good”** - We will utilise and share best practice in terms of what works well in relation to engagement activities/ methods.

To help to achieve our aims, we will continue to develop and utilise the following groups/mechanisms;

- **CCG Equality and Engagement Committee** - this is our internal assurance committee which meets bi-monthly as a sub-committee of our Governing Body. The group is chaired by our CCG Lay Member for Patient and Public Engagement and takes part in discussions regarding the work of the CCG, oversees our communications, engagement and equality activities and forward plans, and seeks to provide assurance to our Governing Body that we meet our statutory duties in terms of engagement and equality.
- We encourage people who want to work with us in the development of new and existing services to join our public membership database – **OPEN (Our Public Engagement Network)**. The title reflects the culture that we strive for: to be OPEN about our ambitions and challenges, as well as being OPEN to ideas, and OPEN to unlimited membership. We contact people on this database whenever there’s an opportunity for them to get involved and also provide them with a regular member’s newsletter. Involvement opportunities can range from being part of a discussion group, completing a questionnaire, joining a service user group or telling us what they think about local services. For more information regarding this please visit the **‘get involved’** section on our website at [www.barnsleyccg.nhs.uk](http://www.barnsleyccg.nhs.uk)
- **Local GP Practice Patient Reference Groups (PRGs)** – PRGs are groups of patients interested in health and healthcare issues, who want to get involved with and support the running of their local GP Practice.

Most PRGs also include members of practice staff, and meet at regular intervals to decide ways and means of making a positive contribution to the services and facilities offered by the practice to its patients. The activities of PRGs vary because they develop to meet the local needs within their area.

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- **Barnsley Patient Council** – The Patient Council is made up of Barnsley residents who are also members of OPEN and/or their local GP Patient Reference Group. They meet every month on a Wednesday evening and members of the public are more than welcome to attend the meetings. The purpose of the Patient Council is to ensure that the people, communities and populations served by the CCG have a voice which is heard in the development and delivery of services. The members work with the CCG to improve health care services and to ensure high quality and sustainable health care by putting the people of Barnsley first. They also helped to co-develop the guiding principles for this strategy.
- **Healthwatch Barnsley** - Healthwatch is the independent health and care champion created to gather and represent the views of the public in relation to health and social care.

Healthwatch plays a role at both a national (via Healthwatch England) and local level and aims to ensure that the views of the public and people who use health and social care services are taken into account by both the Providers and Commissioners of local services. Further information regarding your local Healthwatch can be found by visiting their website at the following address; [www.healthwatchbarnsley.co.uk](http://www.healthwatchbarnsley.co.uk)

- **Barnsley Engagement Leads Network** – the aim of this group which is still in its infancy, is to bring together colleagues working within the field of patient, service user, public and carer engagement across predominantly health and care organisations working within Barnsley in order to discuss and share ideas/ areas of best practice, potential areas for joint working and provide peer support.

To support the wider partnership arrangements and strengthen the engagement and equality work delivered by the CCG, Barnsley Council and the wider voluntary and community sector, the CCG provides a financial contribution to the local authority.

### 3. The Engagement Cycle

The Engagement Cycle was developed by InHealth Associates on behalf of the Department of Health and shows how involvement can and should be a continuous process in planning and commissioning services. It shows how involvement activity and shared decision making help us to commission services that work for our local communities and that provide value for money.

We want to show clearly how we plan to engage with patients and the public in a more systematic way; showing where and how people and groups can contribute and how their views will be used by the CCG to improve services and make commissioning decisions.

To try to demonstrate this, we have used the engagement cycle tool and tailored this for Barnsley

## Managing demand and performance

We will use a variety of patient experience data to understand how different services are performing. This includes patient stories, patient experience surveys, complaints information, and comments on social media and Healthwatch Barnsley data

- This information will be channelled through the Quality and Patient Safety Committee and will also feed into the contract monitoring process.

- The Quality and Patient Safety Committee also receives information on patient experience of hospitals and other service providers.

We will always commission for quality and ensure that patients' views are taken into account in the procurement of services:

- Healthwatch representatives and, where appropriate, expert patients, will be involved in developing service specifications, tender documents and key performance indicators. Where appropriate, they will also have the opportunity to sit on procurement panels and be involved in the choice of successful provider.

## The Engagement Cycle How Barnsley CCG will engage and involve people in commissioning



## Strategic Planning

We will do this through the Joint Strategic Needs Assessment (JSNA)- the process through which public sector partners identify where best to invest their resources to secure local health and wellbeing outcomes based on local health intelligence and feedback

We will have an annual review of our strategic priorities.

- Through this we will engage all local stakeholders in the development of our commissioning intentions and priorities for the following year

- We will share our priorities on our website – [www.barnsleyccg.nhs.uk](http://www.barnsleyccg.nhs.uk) and have a get involved section highlighting involvement opportunities

- We will invite and receive ongoing feedback through the Barnsley Patient Council, OPEN network and Patient Reference Groups (PRG's)

## Specifying outcomes and procuring services

We will involve patients, carers and expert patient groups in the design of pathways

- Our Governing Body will hear stories on patient experience at each monthly meeting

- Our Quality, Patient Engagement and Equality Committees will receive on-going feedback through complaints, patient experience surveys, Patient Reference Groups (PRGs), the Patient Council and OPEN network.

#### **4. How you can help us and give your views on NHS health services in Barnsley**

##### **GIVE YOUR COMMENTS**

- **Share your experiences of health services in Barnsley**

How you do this will depend on the service:

- Your GP practice: through your Patient Reference Group (PRG) or via the receptionist or practice manager. You can also answer the ‘friends and family’ question.
- Barnsley Hospital: through the hospital’s Patient Advice and Complaints Team. Contact details for Barnsley Hospital can be found here: <http://www.barnsleyhospital.nhs.uk/feedback/>
- Hospital in-patient services: by answering the ‘Friends and Family’ question after you have stayed in Barnsley Hospital. Patients will be asked whether they would recommend hospital services to their friends and family if they needed similar care or treatment. We will be monitoring our local hospital on the answers that patients give to this question.
- Mental Health and Community Health Services such as district nursing and physiotherapy: via South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) (SWYPFT provides the majority of these services for Barnsley residents). Contact details for their customer services team can be found on their website: <http://www.southwestyorkshire.nhs.uk/service-users-and-carers/help-and-advice/customer-services/>
- You can also send the CCG your comments through our website: <http://www.barnsleyccg.nhs.uk/about-us/feedback-and-enquiries.htm>

- **Tell Healthwatch Barnsley about your experience of the quality of local services**

Healthwatch Barnsley is independent from the health and social care services you use. Their job is to ensure that local people’s views are heard in order to improve the experience and outcomes for people who use local services. They will also help to monitor the quality of services.

We meet regularly with Healthwatch Barnsley to hear the local people’s views that they have collected.

**How?** For further information please visit the Healthwatch Barnsley website at [www.healthwatchbarnsley.co.uk](http://www.healthwatchbarnsley.co.uk) or call 01226 320106

- **Ask us to visit your group**

We will visit different community groups throughout the year to hear what their members think. We are particularly keen to hear from people who have traditionally not been engaged in local health services.

**How?** Invite us to visit your group by contacting the Communications and Engagement Team at [barnccg.comms@nhs.uk](mailto:barnccg.comms@nhs.uk) / 01226 433721/433773

- **Join OPEN (Our Public Engagement Network)**

You can join OPEN to receive regular news updates from the CCG. We will also use our website and news updates to advertise any consultations/ engagement opportunities that we are running or to ask for people's feedback on specific issues e.g. through surveys.

**How?** Visit [www.barnsleyccg.nhs.uk](http://www.barnsleyccg.nhs.uk) regularly and fill out the form on the 'get involved' page to be added to our mailing list.

### **GIVE SOME OF YOUR TIME**

- **Join your GP practice's patient reference group (PRG)**

A PRG is a group of patients who are interested in health and healthcare issues, and who want to get involved with and support the running of their local GP practice.

Most groups also include members of practice staff, and meet at regular intervals to discuss how to make a positive contribution to the services and facilities offered by the practice to its patients. It is a requirement for all GP practices to have some form of patient group which meets either in person or is linked into the practice virtually. We will be working with local practices to help and support them to develop their groups going forwards to help them reach their full potential.

Some PRG members also link into the CCG Patient Council. The Patient Council is made up of representatives from PRGs and from OPEN. The group meets monthly and helps us to develop our plans. The Patient Council also shares with us information about the quality of local services using information from their PPG.

**How?** Ask at your GP practice reception for further information about your practice patient group and how you can get involved.

- **Come along to monthly Governing Body meeting held in public and our themed engagement events**

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Our Governing Body meets monthly and the agenda and papers can be accessed via the about us section on our website. Members of the public are encouraged to attend. If you would like more information regarding the Governing Body meetings please call us on 01226 433795.

We have a section for members of the public to ask questions early on in the agenda. This way you don't have to wait until the end to ask questions. We ask that anybody attending the meeting signs in and you are welcome to leave the meeting at any point.

The venue of the meetings changes on a regular basis, so we can visit different areas of the borough and more people can attend the meetings.

We will also hold engagement events throughout the year where local people can come along and tell us what they think about local services. These are often themed around a particular issue.

**How?** Meetings and events will be advertised on our website at [www.barnsleyccg.nhs.uk](http://www.barnsleyccg.nhs.uk) and through our news updates and through our local partners.

- **Be involved in the development of health services**

When we are thinking about the services that we have commissioned and how they are working, we want to involve local people with experience of those services and people who are 'expert patients' (expert patients are people with a long-term condition like diabetes who are generally members of a peer support group).

**How?** If you live in Barnsley and would like to be involved in helping to shape the services that we plan and buy and how they are run and monitored, please join OPEN to indicate your interest.

## **5. How will we review how we are getting on?**

The CCG has established an Equality and Engagement subcommittee of the Governing Body which will meet bi-monthly and review how we are getting on with delivering our patient and public engagement strategy. We will also get feedback throughout the year from the Patient Council, OPEN network, GP Patient Groups Healthwatch Barnsley, patient and public surveys, our local partners and via our website and social media channels.

One of our key aims is to work with our partner organisations working across health and social care in Barnsley to develop a common way in which to measure the success of our engagement activities to help us to review how we are getting on. This will form part of the work undertaken by the newly formed Barnsley Engagement Leads Network.

## 6. Associated Strategies

- **Equality and Diversity Policy**

Equality is a legal principle to eliminate discrimination and promote equality of opportunity to people and groups. The Equality Act 2010 defines this protection based on protected characteristics. These are: race, sex, gender identity, age, sexual orientation, religion or belief, marriage and civil partnership and pregnancy and maternity.

We define diversity as the valuing of our individual differences and talents, and creating a culture where everyone can participate, thrive and contribute. Equality and diversity form the basis of our values and how we operate as an organisation.

Equality is relevant to everyone, not just certain groups of people. Everybody is protected under the Equality Act 2010 from discrimination or harassment, if this treatment is because of a protected characteristic.

As part of the Public Sector Equality Duty, we are committed to embedding equality and diversity values into our policies, procedures, employment practice and the commissioning processes that secure health and social care for the people of Barnsley. Our Equality and Diversity Policy sets out our overarching aims to help us to achieve this.

- **Barnsley Health and Wellbeing Strategy**

As a member of Barnsley's Health and Wellbeing Board, we are committed to working together with our local partners working across health and social care and the voluntary and community sector to improve the health and wellbeing of the people of Barnsley.

The associated Health and Wellbeing Strategy sets out how key health partners within the borough will work together to produce better health and wellbeing for the people of Barnsley.

One of its key objectives is to ensure the engagement of individuals and communities in helping inform and shape local health and social care policies and in holding services to account.

Further information can be found regarding the Health and Wellbeing Board via the Barnsley Metropolitan Borough Council website at [www.barnsley.gov.uk](http://www.barnsley.gov.uk) or by clicking [here](#)

- **Barnsley's All – Age Mental Health and Wellbeing Strategy 2014- 2019**

Mental health is everyone's business - individuals, families, employers, educators and communities all need to play their part to improve the mental health and

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wellbeing of the people in Barnsley and to keep people well, by improving the  
outcomes for people with mental health problems.

This strategy describes the work that is needed over the next five years to ensure that the residents of Barnsley have improved mental health and where necessary receive the right support at the right time and in the right place to support them through to sustained recovery

Further information can be found via the Barnsley CCG website at [www.barnsleyccg.nhs.uk](http://www.barnsleyccg.nhs.uk) or by clicking [here](#)

## **7. What do you think of our strategy?**

This strategy has been developed following input from our Patient Council members, CCG staff, and colleagues from our local partner organisations and now we'd really like to hear what you think.

- After reading the strategy, do you understand how to get involved, including giving your feedback? Do you think we have missed anything from this strategy?
- Do you think our Barnsley engagement cycle diagram shows how we will continuously involve people in all we do?

Please send any comments and feedback to us via the following ways;

Via email: [barnccg.comms@nhs.net](mailto:barnccg.comms@nhs.net) as 'PPE Strategy Feedback'

Write to: Communications and Engagement Team, NHS Barnsley CCG, FREEPOST RTCH-GAZH-TZJH, Hilder House, 49-51 Gawber Road, Barnsley, South Yorkshire, S75 2PY

Call Emma Bradshaw on 01226 433773.

## **APPENDIX 1**

### **Engagement Expenses Reimbursement Payments for Patients and members of the Public**

All patients, carers and the public asked to participate and be involved in the business of the CCG will be entitled to claim out of pocket expenses. This would include reimbursement of costs such as:

- Mileage (45p per mile recommended by Volunteering England<sup>1</sup>)
- Public transport costs (including bus, rail and underground fares)
- Associated parking costs (excluding parking/speeding fines)

The person claiming would be asked to complete and sign a short form and would be reimbursed in cash from a float.

Additional expenses incurred to enable a person to contribute could, with prior arrangement by the lead manager, include:

- Taxi fares (for a person unable to use other forms of transport and, where possible, booked via the CCG account)
- Carers Costs (in the case where a 'sitting service' is required, the full cost of the service will be reimbursed. In the circumstance where a paid personal assistant is required, the hours whilst at the meeting, together with the travel time from the patients house and back, will be reimbursed)
- Subsistence costs (for people engaged with an activity for more than four hours. Maximum cost of reimbursement is £7.50)
- Translation costs (including languages other than English, Braille, signer costs etc.)

If the cost of stationary and printer ink is prohibitive to a persons' involvement, the offer will be made by CCG staff to supply relevant information pre-printed rather than via online methods. The cost of telephone calls will be reimbursed when demonstrated via a bill.

All expenses must be claimed within a three month period of the activity undertaken, unless in exceptional circumstances. In order for a person to claim their out of pocket expenses, a person will be asked to complete and sign a short form attach any receipts and have the form counter-signed by the relevant service lead who has arranged the engagement activity. The payment will then be made in line with the CCG financial procedures.

**Expenses Claim Form**

Name

Address

Phone number/ Email Address

What are you claiming for? *e.g. travel to and from CCG engagement meeting on 14/11/13, care of a dependent (please give contact details of the carer)*

How much are you owed? (45p per mile by car, bus fare etc.)

Is a receipt attached?

Yes

No

Signed \_\_\_\_\_

Date \_\_\_\_\_

For office use

Date received

Financial code

Date paid

Payment Authorised