

Communication & engagement plan

1. Project Title: A Review of community-based city-wide ophthalmology and Ear, Nose and Throat (ENT) services including a review of options for direct access audiology and hearing aid provision.

2. Project Lead: Amanda Douglas

Contact details:

Amanda.Douglas@wsybcusu.nhs.uk

3. Complete Equality Impact Assessment

(for support with this contact Sharon Moore Sharon.Moore@wsybcusu.nhs.uk)

4. This project is: citywide

5. Describe your project

a. Describe the engagement (what are you changing and why?)

This engagement concerns a number of different services. The contracts for these services are coming to an end and this engagement is essentially concerned with reviewing these services with a view to re-procurement. The services involved are:

Community ENT services - For the past 3 years, the Leeds CCGs have commissioned a city wide community Ear Nose and Throat (ENT) service through 'Any Qualified Provider' (AQP) rules. There are currently five providers working out at five different sites across Leeds. Each service currently includes a consultant, GP with Special Interest, together with specialist ENT nursing, and audiology support. Approximately 10,000 patients use these services each year.

Audiology and hearing aid provision - For patients requiring a hearing aid assessment and fitting a referral is made to the Hearing and Balance Centre (Audiology) based in secondary care. This service provides hearing assessment; hearing aids; balance assessment; and tinnitus therapy. There have been some concerns recently about the time people have to wait to receive a hearing aid and the provision of services to maintain hearing aids. Approximately 500 referrals are received by this service each year

Community Ophthalmology - For the past 3 years, the Leeds CCGs have commissioned a city wide community ophthalmology service through 'Any Qualified Provider' (AQP) rules. There are currently five providers working out at five different sites across Leeds. Each service currently includes a consultant, GP with Special Interest, together with specialist ophthalmology nursing. Approximately 4,200 patients use these services each year.

Leeds West CCG will lead on the engagement aspects of this work and will produce a set of recommendations to be taken into account during the re-procurement

b. Outline the key aim of the project

- To re-procure Community ENT and ophthalmology services and review options for providing audiology and hearing aid services

c. Outline objectives of this project

- Review of community ENT and Ophthalmology community services
- Review of options for providing audiology and hearing aid services
- Appraisal of existing evidence to identify best practice for community Ophthalmology and ENT services and audiology and hearing aid services.
- Search of other community models in the country highlighting any published data on

the benefits.

- Identify potential for further reducing inequality of access in a new procurement
- Gather patient experience from users of the services and their carers
- Gather the thoughts of the wider public on accessing community services

d. Outline expected outcomes from the project

At the end of the project we will have:

- Carried out a comprehensive assessment of the services including referral patterns, activity, process mapping, pathways, patient experience needs and preferences
- Gained a good understanding of models of community ENT and ophthalmology, audiology and hearing aid services and highlighted and published data on the benefits
- Identified best practice for community services
- Identified opportunities for innovative models of service delivery or staffing
- Assessed benefits, disadvantages and opportunities of any new proposed service developments
- Identified potential for further reducing inequality of access in a new procurement
- Produced a set of procurement recommendations for the CCG
- Produced an options paper outlining the options for procurement

e. How will you use patient involvement to affect the outcome?

- Seek the views of patients so that we can understand:
 - their experience of using current services; and
 - how they would like to access services in the future

This feedback will be used to develop the project and measure success.

f. How does the project support LWCCG strategic objectives?

- Strategic Objective 1: Priority Health Goals - To tackle the biggest health challenges in West Leeds, reducing health inequalities.
- Strategic Objective 2: Quality and Safety - To transform care and drive continuous improvement in quality and safety
- Strategic Objective 3: Best use of resources – To use commissioning resources effectively and responsibly

g. How does the project support the NHS Constitution?

- Ensures that patient choice, waiting times and access are maintained and improved where possible;
- reduces unnecessary hospital outpatient follow-up appointments;
- develops more alternatives to hospital appointments.

h. What is the level of service change?

This project will affect all patients and carers currently using community ophthalmology, ENT, audiology and hearing aid services. This service is a citywide service based at a number of locations affecting large numbers of the population. The public are potential future users of the service. There are concerns about the waiting times for hearing aid provision and servicing.

This has been assessed at level three.

i. If this is classed as a 'major change' (level 3 or 4) consider the following guidance

N/A

6. Pre-consultation information

a. Have we done something similar before?

In 2012 NHS Leeds carried out an ENT engagement. They were looking for new providers of ENT services in the community. These services would deliver a range of outpatient services, traditionally delivered in a hospital outpatient setting. The service would be delivered by a range of professionals including ENT consultants, GPs with a special interest in ENT, specialist nurses and audiologists.

b. What learning can you use from previous events/projects?

As part of the ENT engagement in 2012, an engagement a report was written. The recommendations were as follows:

- An Equality Impact Assessment is undertaken.
- New service provider to be on a well serviced bus route.
- Service provider to address patient experience via contract monitoring.
- Quality assurance over staffing levels and training to be part of the procurement process.

Themes identified from PALS and Patient Opinion

- Waiting times

7. What timescales are you working to?

(include planning implementation, evaluation and feedback)

Complete draft communications and engagement plan	11.7.14
Send plan to the PAG	11.7.14
Brief scrutiny board (if level 3 or 4)	Carolyn
Carry out engagement	18.7.14
Complete engagement report	Mid Oct 2014
Take business plan to CCC	Quarter 3 2014-2015
Procurement process	Quarter 3 2014-2015
Commencement	Quarter 4 2014-2015

8. Engaging with your stakeholders

(consider using a stakeholder mapping tool)

a. Who is the change going to affect and how?

Given what we know about the services the review is unlikely to result in significant changes for patients. However it could lead to changes in the service which would impact on patients and carers. These changes might include where services are available and how they are accessed.

b. Who will you need to engage with?

To engage with the following...

group	who	how	By who
patients	People who attend ENT clinics around the city	We will provide clinicians with paper copies of the survey to share with patients in clinic	LWCCG engagement team
		We will attend clinics across the city to fill in surveys with patients.	<ul style="list-style-type: none"> • LWCCG engagement team • Leeds Involving People (LIP) and staff at Commissioning

			Support Unit (CSU) may support this part of the engagement
People who attend Ophthalmology clinics around the city	We will provide clinicians with paper copies of the survey to share with patients in clinic		LWCCG engagement team
	We will attend clinics across the city to fill in surveys with patients.		<ul style="list-style-type: none"> • LWCCG engagement team • Leeds Involving People (LIP) and staff at Commissioning Support Unit (CSU) may support this part of the engagement
People who attend audiology and hearing aid clinics around the city	We will provide clinicians with paper copies of the survey to share with patients in clinic		LWCCG engagement team
	We will attend clinics across the city to fill in surveys with patients.		<ul style="list-style-type: none"> • LWCCG engagement team • Leeds Involving People (LIP) and staff at Commissioning Support Unit (CSU) may support this part of the engagement
People who attend voluntary, community and faith (VCF) sector services for support with their hearing	<p>We will contact key groups and share the survey and information about the project. Key groups will include:</p> <ul style="list-style-type: none"> • Leeds Society for Deaf and Blind People • Leeds Talking Newspaper Association • Deaf Across Leeds Enablement Service • Deaforum • Henshaws Society for Blind People • Leeds Hard of Hearing Club • Leeds Hard of Hearing Forum • Action for Blind People • Association of Blind Asians • DALES (Deaf Across Leeds Enablement Service) • Leeds and District Hard of Hearing Club • National Deaf Children's Society 		VCF sector
Children who access school nurses for ENT problems	We will contact school nurses and ask them to share the survey with children, young people or their parents		Schools
The above will be supported by:	<ul style="list-style-type: none"> • Continuous promotion on CCG's social media channels linking in and encouraging all identified groups/third sector partners to share using their own social media 		

	<ul style="list-style-type: none"> Writing and sharing a standard article for inclusion in any internal bulletins, magazines or websites of all the above identified groups/third sector partners 		
Public	All residents in Leeds live in one of the three CCG areas. We will ask our partner CCGs to share the survey using their in-house communication channels	<p>We will contact the other CCG's to share the survey and related documents</p> <ul style="list-style-type: none"> with their networks on their website via social media internal staff/member practice bulletins 	All Leeds CCG engagement representatives with material and suggested text developed by LWCCG communications and engagement team
	VCF sector services	<p>We will email VCF sector services on our network and ask them to share the documents with their service users and through the following (if available):</p> <ul style="list-style-type: none"> websites social media internal/in-house publications 	VCF sector with material and suggested text developed by LWCCG communications and engagement team
	Patient reference groups	<p>We will email the engagement documents directly to GP practice managers in LWCCG practices. We will also email the document to leads at the other CCGs to disseminate to practice managers</p>	<ul style="list-style-type: none"> LWCCG engagement team Other CCG to circulate locally Practice managers to disseminate at practice level
	Wider public	<p>We will contact Healthwatch and ask them to share the engagement documents with its members through:</p> <ul style="list-style-type: none"> Weekly newsletter Website Social media 	Healthwatch with material and suggested text developed by LWCCG communications and engagement team
Carers	We will engage with carers, friends and family due to the nature of their relationship with people with hearing and sight difficulties	<p>We will contact Carers Leeds and ask them to share the engagement documents with its members and also look into the possibility of holding a one-off focus group or attending an existing group</p>	Carers Leeds with material and suggested text developed by LWCCG communications and engagement team

To inform the following...

group	who	how	By who
People with protected characteristics as defined by Equality Act 2010	Black and minority ethnic (BME) communities	We will contact key BME VCF sector groups in Leeds	VCF sector
	Carers	We will contact Carers Leeds and ask them to share the engagement documents with its members	Carers Leeds
	Children and young people	We will contact key older people VCF sector groups in Leeds	VCF sector
	Older people	We will contact key older people VCF sector groups in Leeds	VCF sector
	People with disabilities	This will be a key part of this projects given the impact on people with sensory impairments. (see section	VCF sector

		above)	
	Users of mental health services	<ul style="list-style-type: none"> We will contact mental health VCF sector groups in Leeds Work with LYPFT as outlined above 	VCF sector
	Lesbian, gay, bisexual and transgendered people	We will contact key LGBT VCF sector groups in Leeds	VCF sector
	Gypsies and travellers	We will contact Leeds GATE	VCF sector
	Homeless people	We will contact homeless organisations in Leeds	VCF sector
Underpinning principles for contacting people with protected characteristics	<ul style="list-style-type: none"> All the above will have access to material and suggested text developed by LWCCG communications and engagement team The bulk of the above activity will be done by email and on social media If we are requested to provide documentation in alternative formats we will do so, because of the complex and diverse nature of our communities we will not proactively produce materials in a range of formats from the outset 		
Partners	Leeds City Council (including public health and adult social care)	We will contact LCC with details of the engagement through social media and also ask, if appropriate, for the information to be shared internally and through the Citizens Panel	LWCCG comms team
	Adult social care (Mick Ward)	We will email Mick Ward given his interest in sensory impairment	LWCCG comms team
Political	<ul style="list-style-type: none"> Members of Parliament (MPs) for Leeds Leader of Leeds City Council Councillors (Leeds City Council wards) Overview and Scrutiny Committees Health and Wellbeing Board Local Area Committees 	We will contact LCC with details of the engagement this will be a briefing note that is emailed with a link to the survey	LWCCG comms team
Providers	<ul style="list-style-type: none"> LTHT, LCH and LYPFT Private/independent sector/ community interest providers incl. Care UK and Local Care Direct 	We will contact all partners with information for them to disseminate using in-house channels such as newsletters, websites and social media	LWCCG comms & engagement team
Media	<ul style="list-style-type: none"> Local media 	We will send out a press release about the engagement and include the media in Twitter and Facebook activity. We will share our video introducing the engagement	LWCCG comms & engagement team
<p>c. What methods will you use to engage with your stakeholders? Outline in the action plan at the end of this document We will use a variety of ways to engage with our stakeholders. This will help us to communicate in ways which are appropriate for our different communities. We will use the following methods to engage:</p> <ul style="list-style-type: none"> We will develop an online questionnaire which will be accessible through our website We will produce paper-based questionnaires which can be shared with people who do not use the internet We will add information about the engagement to our website. This will include links 			

to the paper and online survey

- We will produce a 'podcast' style video to introduce the engagement. This can be used on our website, in bulletins and in our social media campaign
- We will use Twitter, and to a lesser degree Facebook, to raise the profile of the engagement
- We will write a press release to engage people via the media

9. What resources do you need for the engagement?

a. What additional staffing do you need?

Engagement support – Leeds Involving people. This might involve running focus groups or filling in surveys with patients.

As a citywide project the engagement teams at the other CCGs can support this work

b. If the information is complicated or is targeted at people with learning disabilities have you considered 'easy read' literature?

Alternative formats will be available, on request, to people with additional needs

c. Outline the your budget

Due to the limited time available we will not be designing and printing the survey. Some additional costs may be incurred through commissioning the CSU to carry out additional engagement

Chris to cost printing for surveys

Resource	Cost
Alt format questionnaires (audio/braille) for ophthalmology	£?
Printing of 1000 surveys	£?
Additional engagement support from CSU/LIP	£?
TOTAL	£?

10. What are your consultation/engagement questions?

a. What do you want to find out?

- Understanding public knowledge of ophthalmology, ENT and audiology services in Leeds
- Understand the experience of current patients and carers
- Understand key touchpoints in the current pathways
- Understand how patients and carers would like to access the service in the future
- Equality monitoring

b. What questions will you ask?

See attached draft patient survey

c. How will you pilot the questions to ensure they are suitable?

We will share the draft survey with the steering group which is attended by commissioners and clinicians. The PAG will also have an opportunity to comment on the draft survey.

d. How many people do you need to speak to?

At this point it is unclear how many people use all these services. Based on previous similar engagements we plan to engage with 200 people.

We do however feel it is a risk to identify a set number of respondents and that this figure should be used as a guide. However if the quality of the data returned is deemed sufficient and helps us to develop key themes and a better understanding of the needs of people who use these services we must use this alongside existing evidence and insight from other similar exercises across the country.

- e. How will you demonstrate that you have consulted with a representative sample?**
We will ask people to fill in equality monitoring and we will report on this in the engagement report

11. Results

- a. Who will collate the results?**
NHS Leeds West CCG Communications and Engagement Team
- b. Who will analyse the results?**
NHS Leeds West CCG Communications and Engagement Team
- c. Who will write the report?**
NHS Leeds West CCG Communications and Engagement Team
- d. How will you use the feedback – what will you do differently?**
The feedback from the public, patients and carers will be fed into the overall service review. This feedback will be used to identify opportunities to improve the service. It will also ensure that the service meets the needs of the patients regardless of disability, geographical location or place of provision, and provides equitable access to the right care at the right time in the right place.

12. Feedback and Evaluation

- a. How and when will you feedback to your participants?**
All participants will be sent a copy of the engagement report. A follow-up report will be produced at the end of the procurement to inform participants on the outcomes of the project.
The engagement report will be added to the website and featured in our patient and staff bulletins
- b. What will you feedback?**
We will feedback the results of the engagement, the recommendations and outcomes of the procurement
- c. Will there be ongoing feedback or a follow-up event?**
See above
- d. Have you filled in the PPI events Record log**
This is the responsibility of the engagement lead.

Action Plan July 2014 – October 2014

	Action	Target audience	Lead	Deadline	Comments/ progress
1.	Write communications and engagement plan	Staff Patient reps PAG	Chris Bridle Amanda Douglas	11.7.14	completed
2.	Write patient survey	Patients Carers Wider public	Chris Bridle Amanda Douglas	11.7.14	completed
3.	Send plan to PAG by email (Invite other PAG members for citywide projects)	PAG members	Amanda Douglas Chris Bridle	11.7.14	completed
4.	Write engagement covering letter	All	Chris Bridle	15.7.14	
5.	Add survey to snap survey	All	Natasha	17.7.14	
6.	Create video to introduce the project and add to website	All	Natasha Amanda Douglas	w/c 21.7.14	
7.	Add engagement onto website	All	Natasha Communications and Engagement teams at other CCGs	17.7.14	
8.	Press release	Media public	Natasha	w/c 21.7.14	
9.	Social media plan	All identified partners both those who we plan to engage with and those who we will inform Patients and their carers Wider public	Natasha Communications and Engagement teams at other CCGs	w/c 21.7.14	
10.	Email out link PDF of survey and link to online survey	CCG networks VCF sectors LCH/LTHT/LYPFT networks Citizens panel Political partners	Chris Bridle Communications and Engagement teams at other CCGs	w/c 21.7.14	
11.	Mail-out covering letter and paper surveys	CCG networks	Chris Bridle	w/c 21.7.14	

		VCF sectors	Communications and Engagement teams at other CCGs		
12.	Drop off paper surveys to health centres and GP surgeries	GP practices Community Public patients	Chris Bridle Communications and Engagement teams at other CCGs	w/c 21.7.14	
13.	Organise and run drop-ins at ophthalmology clinics across the city	Patients and carers	Chris Bridle Patient rep LIP/CSU	July-Aug	
14.	Organise and run drop-ins at three of the five ENT clinics across the city (Meanwood Group practice, Fountain Medical Diagnostic Services, Leodis Care Ltd, Chevin Medical Practice, Wharfedale Hospital) This will reflect the three CCG areas.	Patients and carers	Chris Bridle Patient rep LIP/CSU	July-Aug	
15.	Organise and run drop-ins at audiology and hearing aid clinics across the city	Patients and carers	Chris Bridle Patient rep LIP/CSU	July-Aug	
16.	Add to patient newsletter in early-Sept	<ul style="list-style-type: none"> • West Leeds CCG network members • Public • patients 	Natasha	Sept	
17.	Add to staff e-bulletins and share content with partners identified in the plan	<ul style="list-style-type: none"> • Staff • Colleagues at partner organisations • Patients and carers (from coverage in partner bulletins) 	Natasha	July-Aug	

Appendix A – Stages of engagement

Definitions of reconfiguration proposals and stages of engagement/consultation			
Definition & examples of potential proposals	Stages of involvement, engagement, consultation		
	Informal Involvement	Engagement	Formal consultation
Major variation or development Major service reconfiguration – changing how/where and when large scale services are delivered. Examples: urgent care, community health centre services, introduction of a new service, arms length/move to CFT			Category 4 Formal consultation required (minimum 12 weeks)
Significant variation or development Change in demand for specific services or modernisation of service. Examples: changing provider of existing services, pathway redesign when the service could be needed by wide range of people		Category 3 Formal mechanisms established to ensure that patients/service users/ carers and the public are engaged in planning and decision making. In most cases this means 12 weeks engagement period	Information & evidence base
Minor change Need for modernisation of service. Examples: Review of Health Visiting and District Nursing (Moving Forward Project), patient diaries	Category 2 More formalised structures in place to ensure that patients/ service users/ carers and patient groups views on the issue and potential solutions are sought	Information & evidence base	
Ongoing development Proposals made as a result of routine patient/service user feedback. Examples: proposal to extend or reduce opening hours	Category 1 Informal discussions with individual patients/ service users/ carers and patient groups on potential need for changes to services and solutions	Information & evidence base	