

Update from the Oxfordshire Clinical Commissioning Group (OCCG)

1. Authorisation

For the September meeting of the Health Overview and Scrutiny meeting, an update was provided on how OCCG is progressing towards taking statutory responsibility for planning and purchasing healthcare for people in Oxfordshire in April 2013 when NHS Oxfordshire is disbanded.

The NHS Commissioning Board (NHSCB) is reviewing evidence submitted by CCGs to satisfy the 119 criteria that fall within six domains:

1. A strong clinical and multi-professional focus which brings real added value.
2. Meaningful engagement with patients, carers and their communities.
3. Clear and credible plans which continue to deliver the Quality, Innovations, Productivity and Prevention (QIPP) challenge within financial resources, in line with national requirements (including excellent outcomes) and local joint health and wellbeing strategies.
4. Proper constitutional and governance arrangements, with the capacity and capability to deliver all their duties and responsibilities including financial control, as well as effectively commissioning all the services for which they are responsible.
5. Collaborative arrangements for commissioning with other CCGs, local authorities and the NHSCB as well as the appropriate commissioning support.
6. Great leaders who individually and collectively can make a real difference.

Since the last update OCCG have hosted a visit from members of the NHSCB who wanted to further explore the remaining 30 unmet criteria required for authorisation.

During the visit, the NHSCB panel members carefully questioned members of OCCG about a number of key areas including their constitution and accountability, arrangements for safeguarding, their financial plans and arrangements for engagement.

Feedback following the visit confirmed that a further 21 criteria had been met, leaving just nine needing further work:

- Three related to the constitution, the specific wording not adequately reflecting the national model and the two way accountability not being clear for member practices. OCCG plans to review the constitution with member practices during January and so will address these criteria at that stage.

- Three relate to the clear and credible plan. OCCG will update its Operational and Quality, Innovation, Productivity and Prevention (QIPP) Plan which includes developing further the financial plans for 13/14, 14/15 and 15/16. OCCG will continue to monitor delivery of the current plan and mitigation where plans are not on course.
- One relates to arrangements for safeguarding. Until OCCG is a statutory body it is working under the arrangements agreed for the PCT. It is reviewing these and making appropriate amendments where necessary so that arrangements are in place for OCCG on 1 April 2013.
- Two related to commissioning support arrangements, the capability to manage the commissioning support arrangements provided and having plans to formally procure commissioning support between 2013 and 2016. OCCG has made progress in appointing to its senior structure and so believes the first of these is now met. It is also developing outline plans for procuring commissioning support whilst national guidance is awaited.

The national timetable for authorisation has been amended slightly and the NHSCB are currently considering what conditions might apply to OCCG before allowing further information to be provided which should ensure six of the criteria are met leaving those relating to the constitution to be addressed in the new year. A final decision will be made by the NHSCB in December and this will be announced publicly.

2. Appointing to the new structure of OCCG

An offer has been made for the final director post to be recruited to – the Director of Partnerships and Development. This is a key role on the executive team and will have a lead for all joint commissioning and all commissioning for pan-Oxfordshire.

All Assistant Director posts have been appointed to and a staff consultation on the remaining structure of the organisation has been completed. It is anticipated that recruitment to the structure will begin on 7 November 2012.

3. Developing Public Involvement within OCCG

Informing and engaging with the public is important for the development of OCCG, especially during this time of change and transition. It is vital that OCCG develops its stakeholder relations, including the way it seeks and uses feedback to inform decision making in developing health services for the people of Oxfordshire.

OCCG is seeking to build on the platform established by NHS Oxfordshire to develop and extend its own relationships with the public so that people living in Oxfordshire and working within the NHS locally feel informed and included in its work.

Following the launch of the new clinical commissioning model for Oxfordshire in January 2011, a communications and engagement approach was put into place in order for GPs leading the development to begin to develop relationships and enter into dialogue with the local population and other key stakeholders. Developing and running public events played a central role in this process.

With engagement and involvement from our local population and other key stakeholders, through public events and a public consultation, a Communications and Engagement Strategy was put forward and agreed by OCCG in December 2011. This Strategy provided a framework for improving and strengthening the quality and delivery of communications and engagement activities to support OCCG in all aspects of its work.

3.1 Developing Patient Participation Groups

Part of implementing the OCCG Communications and Engagement Strategy was to develop local patient participation groups (PPGs) in more of the practices within Oxfordshire. The aim of this was to facilitate grass roots patient and public engagement. PPGs vary in their ability to influence decision making and there is no set way in which they work; the aims and working of each group entirely depends on local needs. However they should have a common aim of making sure that their GP practice puts the patient, and improving health, at the heart of everything it does.

PPGs are one of many routes to gain more local engagement and it is important to reflect on and identify the opportunities to engage afforded by working with the voluntary sector, the charitable sector, local faith groups and a variety of community groups as well as strengthening PPGs.

To understand more about how practices are developing their PPGs an audit of Oxfordshire practices was undertaken; this gave OCCG information about the number and effectiveness of PPGs within Oxfordshire. Through this work OCCG have been able to identify practices that would benefit from support in developing their existing PPGs and offer support to those who would like help establishing a practice PPG. This work has commenced and is on-going with the support of the Local Involvement Network (LINKs).

3.2 Developing Public Locality Forums

During the OCCG Communications and Engagement Strategy consultation OCCG asked members of the public about a proposed model for locality engagement (see appendix a); concerns were raised about the look and feel of the structure of the model and the detail of how it would be implemented to help promote inclusive engagement in decision making:

- Participants told us that the structure was too hierarchical and needed to be revised.
- Feedback also indicated that the term “Citizen Forum” was not well liked and hard to associate with.
- More than one public representative at locality and OCCG Board levels would be desirable.

As a result of the feedback on the model, the development of the Health and Wellbeing Structure and a developing understanding OCCG public involvement needs, as the organisation and Localities grew, the proposed model was not progressed and instead work was been undertaken to develop OCCG’s reach in lots of different areas.

Work to replace the model identified in the Communications and Engagement Strategy is to develop Public Locality Forums associated with each Locality; this will enable OCCG to ensure that the public voice is heard throughout the commissioning process from decisions made by practices through to the locality groups and onto the Board level, commissioning for the whole county. We are progressing these currently in all Localities and hope to have a forum in place for each locality by April 2012. Each forum's focus and form will be different as localities differ however the underlying aim is to get public involvement at locality level to feed into OCCG decision making and service redesign as well as the forums being able to raise issues locally; however essentially the purpose will be the same - to create a mechanism by which the OCCG Locality Groups can have two way engagement and involvement with their public on their decision making going forward.

3.3 Establishing the Public Involvement Network

Since the establishment of OCCG we have worked closely with our local population and key stakeholders in order to develop the routes and methods to involve and engage with our local population.

This includes working closer with our County and District Councils, via the Public Involvement Network, NHS partners and the voluntary/charitable sector to develop routes to access a wider audience.

OCCG is a key partner (and coordinator as we jointly fund the officer responsible for coordinating the PIN) in the development of the County's Public Involvement Network (PIN). The PIN is a mechanism being developed as part of the Health and Wellbeing (HWB) Board Infrastructure to ensure that representative opinions and experiences of Oxfordshire people underpin the strategy and commissioning carried out by Oxfordshire's Health and Wellbeing Board. The PIN includes people of all ages, circumstances, cultures and faiths, abilities and geographical locations across Oxfordshire. It is also responsible for ensuring that Oxfordshire's Voluntary, Community and Faith sectors are engaged and able to contribute their expertise and knowledge to influence and shape the debates. It is responsible for developing an Engagement Strategy and annual action plans covering the engagement activity of the shadow HWB Board and its partnership boards. Public representatives have also been appointed with the involvement of OCCG through formal recruitment process to sit on the partnership boards of the HWB Board structure.

3.4 Transfer of Talking Health

So far, OCCG has used the PCTs online consultation tool Talking Health. However, as part of the transition Talking Health has been transferred to OCCG to use as their online consultation and engagement tool. The system will enable OCCG to keep a self-maintaining, accurate record of people that want to be involved and have their say about their local NHS. As part of the transfer an audit was undertaken to review the list of people signed up to Talking Health and to ensure members were happy for their details to be transferred to OCCG.

When members of the public or organisations register to be involved, they can express their subject preferences. This enables us not only to inform them about the public of consultations that are meaningful and relevant to them, but also communicated in the way that people prefer e.g. via email or post.

Talking Health will enable OCCG staff to run consultation projects quickly and easily, to manage them online, create surveys, discussion groups or enable commenting on structured documents e.g. strategy documents.

Reports can also be generated at a touch of a button for each survey, a single project or all projects – providing accurate results and evidence of the OCCG’s public involvement and engagement.

Talking Health also features a ‘You Said, We did’ section completes the circle of engagement – providing evidence of what has actually changed in Oxfordshire as a result of public feedback.

Currently OCCG have over 2000 members registered on Talking Health; a publicity campaign is due to be launched in the next month to encourage more people to sign up to the consultation system.

4. Next Shadow Governing Body (SGB) meeting in public

The next meeting of the Shadow Governing Body in public will take place on 4 December 2012. [Papers](#) will be published on the OCCG website on 28 November.

For more information:

For more information about the communications and engagement strategy please visit the OCCG website: [Communications and Engagement Strategy - Oxfordshire Clinical Commissioning Group](#) and for an update on implementation of the strategy please visits: <http://www.oxfordshireccg.nhs.uk/involve-me/documents/CommunicationsandEngagementUpdate.pdf>

1 November 2012

Oxfordshire Clinical Commissioning Group

Appendix a:

Model for Public and Patient Engagement

