

Oxfordshire Health and Care Transformation Communications and Engagement Strategy 2016-2017



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1. Purpose

The purpose of this document is to set out the proposed patient, public and external stakeholder communications and engagement approach to support the next 12 months of the Oxfordshire Transformation Programme.

Although the programme itself spans the next five years, this strategy focuses on the programme's priorities for 2016/17 and the Programme's aim of consulting on a range of significant service changes resulting from the development of new models of care for the county as part of the development of a five year Sustainability and Transformation Plan.

A number of assumptions have been made when developing the strategy:

- The timescale: that the Transformation Programme plans to consult on possible options of service reconfiguration from October 2016
- Resource: that all communications and engagement activities will be jointly owned and delivered by all partner organisations – this includes clinical and non-clinical staff
- Principles: that the Oxfordshire Transformation Board engages in the process in line with the Gunning Principles¹
- Budget: that there is sufficient staff resource and non-pay budget to deliver the proposed activities

2. Background

The NHS Five Year Forward View² (October 2014), describes a vision for health and care service that will be needed in 2020. This vision empowers people, their families and carers to take more control over their own health, care and treatment supported by easy access to integrated holistic care, in settings closer to where people live and organised to effectively support people with multiple conditions not just a single disease. Achieving this vision will require NHS organisations to develop plans to ensure:

- Individuals are taking greater responsibility for their own health
- We are better at preventing and managing demand
- We are (re-)designing services and finding innovative ways of delivering outcomes for a society that lives longer and expects more
- We are maximising the value of our health and social care spend.

¹ These are legally acknowledged principles against which consultations are measured in judicial review i.e. that the consultation took place when proposals are still at a formative stage; sufficient reason is put forward for the proposal to allow for intelligent consideration and response; adequate time is given to the consideration of the response; the product of the consultation is conscientiously taken into account.

² The NHS Five Year Forward View was published on 23 October 2014 and sets out a new shared vision for the future of the NHS based around the new models of care. It has been developed by the partner organisations that deliver and oversee health and care services including Care Quality Commission, Public Health England and NHS Improvement.

The Five Year Forward View Into Action (December 2014) produced by NHS England develops this vision further and outlines new ways of working and new models of care over the coming years.

NHS and social care organisations in Oxfordshire have formed a Transformation Board to oversee a system wide Transformation Programme. It comprises Oxfordshire Clinical Commissioning Group (OCCG), Oxford Health NHS Foundation Trust (OHFT), Oxfordshire University Hospitals NHS Foundation Trust (OUHFT), South Central Ambulance Trust (SCAS), Oxfordshire County Council (OCC) and the Oxfordshire Primary Care Federations. Its joint purpose is to develop plans for the next generation of integrated GP, community and hospital services. Its aims are to:

- Provide innovative ways of delivering outcomes for a society that lives longer and expects more
- Maximise the value of Oxfordshire's health care spend
- Find ways to become better at preventing and managing demand
- Help individuals to take greater responsibility for their own health

The Board is not an executive body, so it will look to work through the existing structures in the county, e.g. the boards of individual organisations, the Health and Wellbeing Board (and the Oxfordshire Joint Health Overview and Scrutiny Committee in terms of scrutiny).

The work of the Oxfordshire Transformation Programme will feed into an over-arching five year plan (called a Sustainability and Transformation Plan) across Buckinghamshire, Oxfordshire and West Berkshire, to address the above aims and make proposals for the type of transformational service change that is required.

Since the spring of 2016, in Oxfordshire, clinically-led service review working groups have been developing ideas for possible future models of care for the following areas:

- Integrated care for frail older people and those with long term conditions and urgent and emergency care for the general adult population
- Planned (elective), diagnostics and specialist care
- Maternity
- Children's services
- Mental health
- Learning disability and autism

They have been considering clinical best practice, national and international evidence, health needs and future population health demand, service standards and the existing and potential future challenges of care provision, including financial pressures.

These new models of care and vision for 2020 will form the basis of an Oxfordshire health and care transformation case for change and inform a process to further develop and test any possible options and service changes over the early summer of 2016.

The Transformation Programme is aiming to go out to public consultation from October 2016³. This would be a three month public consultation minimum with decisions being made in early 2017.

The process described above and the conclusions drawn about resulting service change will be subject to an assurance process involving NHS England and the Thames Valley Clinical Senate.

Decisions about the content of any formal public consultation would be taken by the Board of OCCG, as the statutory decision maker and NHS Foundation Trust Boards.

3. The Duty to Involve

NHS organisations have a duty to involve patients and the public in:

- Planning the provision of services
- The development and consideration of proposals for changes in the way those services are provided
- Decisions to be made by the NHS organisation affecting the operation of services.

Involving patients and the public early on in options development will also help to demonstrate point two of the Secretary of State's four key tests for service reconfiguration set out in the revised Operating Framework for 2010/11: strengthened public and patient engagement.

Notwithstanding statutory obligations, involving and engaging will help to:

- Create understanding of the need for change and the case for developing new models of care to transformation health services in Oxfordshire
- Better inform the development of new models of care
- Enable the Transformation Programme to work in partnership with the public to ensure the successful implementation of any service change projects.

4. Talking Health and Care in Oxfordshire: previous engagement and consultation on health and care strategies

There is a rich source of feedback and insight which has been provided by patients, the public and stakeholders over recent years⁴.

³ Subject to NHS England Assurance Framework approval

⁴ 2013 to 2016

Communities have already provided a wealth of feedback on strategic direction. It is important to acknowledge this feedback has been considered and to explain how it is now time to move the conversation on to help inform how to deliver change.

OCCG has a well-established and large online community of people who wish to engage on a range of health and care topics and issues. More than 2,500 individuals and organisations are members of Talking Health and regularly engage and take part in surveys, patient advisory groups, discussion groups and engagement events.

Each Foundation Trust has its own large and extensive membership network and other ways of engaging patients who use their services. Likewise, Oxfordshire County Council has a long track record and extensive experience of engaging and consulting local people.

Any engagement activities should maximise the use of these well-established networks to full effect – both to reach out to a broad range of people and to help identify and work with current or recent users of services who may be affected by change and be the focus of public consultation.

5. Lay representation on the Oxfordshire Transformation Board

Involving patients and the public should be at the forefront of the Programme's governance arrangements. All participating organisations have their own Boards and non-executive Directors who have statutory responsibilities to discharge, including having Lay Representatives for patients and the public.

The Oxfordshire Transformation Programme recognises that its Board arrangements would benefit from the inclusion of representative voices of patients and service users. There are two Lay Representatives on the Oxfordshire Transformation Board – the Executive Director of Healthwatch Oxfordshire and a Lay Chair of one of OCCG's Public Locality Forums. Their role is to:

- Provide views and feedback on what matters most to patients and the public about future configurations of services
- Work with the Transformation Programme Director and senior leaders to ensure the experiences and views of patients, carers and the public are considered in the development of ideas and proposals for the transformation of Oxfordshire health and care services
- Review and provide feedback on proposals to engage with and consult with patients, carers, the public and stakeholders
- Review and provide feedback on the development of associated public facing information, specifically consultation materials

- Provide views on the appropriate and proportionate engagement of key stakeholders and patients in assessing the available options and that the options are shaped by patient and public engagement

This arrangement is in addition to the formal scrutiny of the Oxfordshire Transformation Programme by the Oxfordshire Joint Health Overview and Scrutiny Committee and the Boards of all partner organisations.

6. Aims of the strategy

- To create awareness of and understanding about the benefits and challenges facing health and care services in Oxfordshire
- Make the wide and varied communities in Oxfordshire and its borders aware of the case for change, new models of care and options for the future and to give feedback on what matters most to patients and local people
- Enable all partner organisations to meet their statutory and legal obligations to involve and engage appropriately and proportionately
- Ensure the rich feedback and insight already provided by patients, the public and stakeholders over recent years⁵ is considered by the Oxfordshire Transformation Programme in its thinking and development of any proposals for future models of care
- Enable the voice of service users or representative voices and stakeholders⁶ to be listened to and considered as the programme's thinking develops over the coming months in preparation for public consultation - this includes development of plans and materials, as well as models of care and service redesign options
- Enable the voice of service users or representative voices and stakeholders to be listened to and considered throughout any public consultation process and subsequent decision making process
- Ensure the expectations of the NHS England assurance process are met⁷

⁵ 2013 to 2016

⁶ The term stakeholder is used to describe representatives of statutory, local and national organisations with whom the Transformation Board has an ongoing relationship with e.g. local government organisations, MPs, the voluntary and community sector.

⁷ NHS England Planning, Assuring and Delivering Service Change for Patients 2015
<https://www.england.nhs.uk/wp-content/uploads/2015/10/plan-ass-deliv-serv-chge.pdf>

7. Target audiences

This strategy focuses on patient, public and external stakeholder engagement.

For the purposes of this strategy, patient, public and external stakeholders are taken to be:

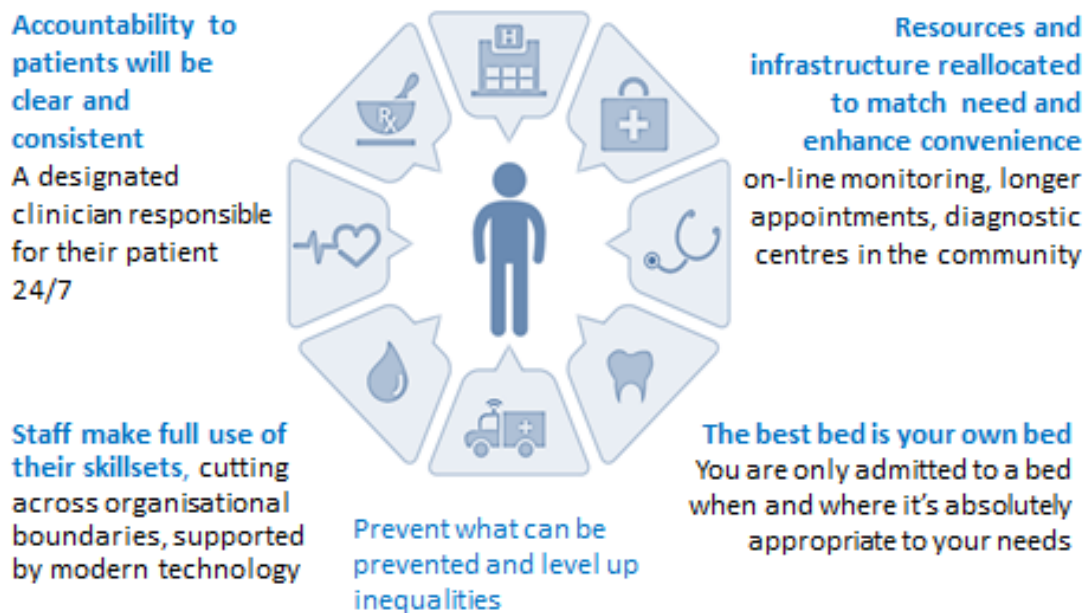
- Individual residents within the county
- Current and previous service users of health services – particularly those who have had direct experience of services affected by any proposed changes
- Oxfordshire Talking Health members
- Patient Participation Groups
- Oxfordshire’s Locality Patient and Public Forums
- Foundation Trust members
- Community Hospital League of Friends
- Healthwatch
- Community sector groups and their members
- Voluntary sector groups and their members
- Seldom heard groups or representatives working with these communities
- Faith communities
- Groups or individuals with protected characteristics as described by the Equality Act 2010
- Oxfordshire’s Health Inequalities Commission
- Representatives of Oxfordshire County Council: elected members and paid staff
- Representatives of Oxfordshire’s District Councils: elected members and paid staff
- The Oxfordshire Joint Health Overview and Scrutiny Committee
- The Oxfordshire Health and Wellbeing Board
- MPs
- Representatives of the housing and care home sector
- Representatives of education providers
- Representatives of Oxfordshire’s employers
- Neighbouring health and care systems along Oxfordshire’s county boundaries.

It is the responsibility of each Transformation Programme partner to ensure its own staff are involved and informed.

8. Branding and messages: ‘the Oxfordshire story’

The Oxfordshire Storyboard was published towards the end of 2015 and sets out the vision for transformation in Oxfordshire and the case for change. It has been presented to a range of key stakeholder meetings and public forums and contains a number of overarching messages.

The Vision for 20/21:



This vision is underpinned by the following principles:

- Responsible: we are responsible for and are enabled to take care of our own and each other's health
- Innovative: we participate in healthcare innovation for the benefit of ourselves and our communities
- Expert: we receive urgent and/or complex care in the right place, at the right time
- Personal: we have equitable access to healthcare at home and in our communities.

The need for change – why now?

- Increasing demand
- Increasing complexity
- Increasing cost
- Workforce under pressure
- Current models of care are under pressure
- Slow progress in delivering more anticipatory care and managing local population health
- Do nothing is not an option

Our key messages include:

- Although most patients currently receive good care in Oxfordshire, achieving the **best standards of care** for everyone is becoming increasingly difficult.
- Pressure on services is increasing, particularly where demand is more highly concentrated among older people – our review of health and care is being **driven by clinicians** who see patients every day and see how services could be improved.
- Fundamentally it's about **improving quality and reducing inequality** of health and care services – there is currently too much variation in the care that is provided across Oxfordshire.
- We need to help prevent people getting avoidable diseases by supporting **healthier lifestyles** – the people in Oxfordshire need to be a partner in this or we will not succeed.
- We **want to work with local people** to shape the future of health services and develop local solutions in response to local needs - it is vital that the patients, the public and stakeholders get involved in the development of the ideas and proposals in the emerging case for change and possible options.

It is proposed the branding for the engagement and consultation will be 'The Big Health & Care Conversation'.



9. Approach

The proposals contained in this strategy cover three phases:

- Pre consultation engagement and awareness-raising
- Public consultation
- Decision making and implementation

Phase One: Pre consultation engagement and awareness-raising

9.1 Communications and engagement priorities for phase one

- Ensure the rich feedback and insight already provided by patients, the public and stakeholders over recent years⁸ is considered by the Oxfordshire Transformation Programme in its thinking and development of any proposals for future models of care
- Ensure involvement in the development of future models of care
- Ensure information about proposals for new models of care and the development of service options is explained in a clear, public-friendly and accessible way
- Ensure stakeholders are involved in the development and testing of options before public consultation in a timely and appropriate way that gives sufficient opportunity for feedback to be given and reflected upon by the Transformation Programme – particularly current and previous service users of those services affected by any proposed changes
- Ensure this information is shared as widely as possible through a range of communications and engagement channels and mechanisms e.g. face to face briefings, newsletters, website, social media
- Ensure stakeholders are aware of the Oxfordshire Transformation Programme, the emerging case for change and care closer to home strategy and are kept updated
- Ensure all feedback provided during Phase One is considered by the Transformation Programme and Transformation Board at key points in the decision-making process
- Ensure robust record keeping of all communications and engagement activities

⁸ 2013 to 2016

9.2 Pre Consultation communications and engagement activities

- On-going awareness raising and information sharing about the Oxfordshire Transformation Programme, its ambitions, challenges and benefits for patients and carers
- A stakeholder event in early June to share emerging models of care and gather views and insight
- A follow-up stakeholder workshop in to ensure involvement in the development of options
- Working with Healthwatch and the Transformation Board Lay Representative to gather their views on what communications approaches and engagement activities would be proportionate and beneficial for full public consultation, including reviewing public facing communications materials (such as any public consultation document)
- One public engagement event per locality to discuss possible options and criteria
- Gathering feedback from key affected groups e.g. maternity service users, stroke service users, those with long term conditions
- Presentation and discussion at meetings of key community and voluntary sector groups
- Face to face briefings with Oxfordshire's District Councils and with Oxfordshire County Council to ensure key councillors are sighted on options and can give their feedback
- Briefing Oxfordshire MPs to share models of care, options and gather views
- A full engagement report of all activities and feedback received to be written and included in the pre-consultation business case.
- Updates and reports to Oxfordshire's Joint Health Overview and Scrutiny Committee, including a discussion at the June meeting about the plans for pre-consultation engagement planned for the summer period and initial thoughts and ideas for full public consultation; also to include a discussion at the September meeting about the options and plans for consultation
- Communications to raise awareness of the programme and how to get involved through channels such as media, social media etc

Phase Two: Public consultation

9.3 Communications and engagement priorities for Phase two

- Ensure the engagement report of all activities and feedback received throughout the pre-engagement period is used to inform the options within the consultation
- Ensure information within the consultation and the options are explained in a clear, public-friendly and accessible way
- Ensure stakeholders are involved in the consultation and are able to give their feedback on options freely and in different ways – particularly current and previous service users of those services affected by any proposed changes
- Ensure information about the consultation is shared as widely as possible through a range of communications and engagement channels and mechanisms e.g. face to face briefings, newsletters, website, social media
- Ensure stakeholders are aware of the Oxfordshire Transformation Programme and the consultation on proposed service changes and are given the opportunity to feedback
- Ensure all feedback provided during Phase Two is considered by the Transformation Programme and Transformation Board at key points in the decision-making process
- Ensure robust record keeping of all communications and engagement activities

9.4 Consultation communications and engagement activities

There will be a range of key stakeholder communications and engagement activities which should take place during consultation which are outlined below; a separate action plan will be developed to support this once the timeframe is confirmed.

- On-going awareness raising and information sharing about the Oxfordshire Transformation Programme, its ambitions, challenges and benefits for patients and carers
- Six public events (one in each Locality) to outline and review the options in the consultations with members of the public; it is suggested these would be workshop style events to debate the options but this is dependent on numbers attending and resources available
- Working with Healthwatch and the Transformation Board Lay Representative to ensure communications approaches and consultation activities, including reviewing public facing communications materials (such as any public consultation document)

- Identifying and gathering feedback from key affected groups e.g. maternity service users, stroke service users, those with long term condition
- Identifying and gathering feedback through outreach work from seldom heard groups
- Presentation and discussion around the options at meetings of key community and voluntary sector groups
- Face to face briefings with Oxfordshire's District Councils and with Oxfordshire County Council to ensure key councillors are sighted on options and can give their feedback
- Engaging with Oxfordshire MPs to ensure they are sighted on options and can give their feedback
- A full consultation report of all activities and feedback received to be written and presented to the Transformation Board and the Boards of participating organisations
- Communications to raise awareness of the consultation and how to get involved through channels such as media, social media etc
- A full consultation report of all activities and feedback received to be written and presented to the Transformation Board and the Boards of participating organisations

Phase Three: Decision making and implementation

9.5 Communications and engagement priorities for phase three

- Ensure the consultation report and all feedback provided during Phase Two is considered by the Transformation Programme and Transformation Board at key points in the decision-making process
- Ensure information within the consultation report and decision making process is explained in a clear, public-friendly and accessible way
- Ensure stakeholders are aware of the consultation report and decision making process
- Ensure information about the consultation report and subsequent decision making process is shared as widely as possible through a range of communications and engagement channels and mechanisms e.g. face to face briefings, newsletters, website, social media

- Ensure information about the implementation process is shared widely with all stakeholders and those who participated in the consultation

9.6 Communications and engagement activities for phase three

- On-going awareness raising and information sharing about the Oxfordshire Transformation Programme, its ambitions, challenges and benefits for patients and carers
- Face to face briefings with Oxfordshire's District Councils and with Oxfordshire County Council to ensure key councillors are sighted on the consultation report and options and can give their feedback
- Engaging with Oxfordshire MPs to ensure they are aware of the consultation report and timeline for decision making
- Updates and reports to Oxfordshire's Joint Health Overview and Scrutiny Committee, including a discussion at an appropriately timed meeting to ensure they are aware of the consultation report and timeline for decision making
- Communications to raise awareness of the decision making process including timeline, followed by outcomes / implementation
- Presentation and discussion around the consultation and the decision making process including timeline, followed by outcomes / implementation at key community and voluntary sector groups

10. Communications and engagement channels

Throughout the programme of engagement and consultation we will use the following communications and engagement channels – the list is not exhaustive as we would always strive to develop / use more channels where new methods were identified or the opportunity arose.

- Give a 'face' to the Transformation Programme by developing a pool of spokespeople (managerial and clinical) across partners
- Website: a website is being developed as a central point for all information relating to the Transformation Programme. Each partner will link to the site from their own website
- Newsletters: the use of all NHS and partner organisations newsletters and through voluntary and community newsletters where possible
- Public events: as outlined above for phase one and two

- Face to face meetings: we will attend, where possible, face to face meetings with voluntary and community sector meetings
- Focus groups: we will use focus groups to work with affected groups and seldom heard groups
- OCCG Equality & Access Team: the team will outreach as part of their community work to engage with seldom heard groups
- Surveys: as part of the pre-engagement phase and consultation phase, surveys will be used to test emerging models, options and evaluation criteria
- Leaflets / posters: a case for change leaflet will be developed for phase one; for phase two leaflets and posters will be used to advertise the consultation and how to get involved. This will be available on request in different languages but will be available in easy read
- Media: deliver a pro-active media campaign to publicise the programme and ways people can get involved as well as responding to media enquiries in a timely way
- Social media: deliver an active digital / online presence to promote the programme and opportunities to get involved with a diverse audience through Twitter and Facebook and other online platforms where appropriate
- Memberships & existing patient groups: use all existing memberships (e.g. Foundation Trust members), GP patient participation groups and public Locality Forums to raise awareness of the programme and opportunities to get involved

11. Monitoring

The OCCG Programme Director for Transformation will have overall responsibility for the Strategy. The Transformation Board will monitor the delivery of the strategy at its monthly meetings.