

Patient and Public Voice Assurance Group (PPV AG) for Specialised Commissioning

Assurance Report 2017/18

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Background

The Patient and Public Voice Assurance Group was first established in 2014 as a means of strengthening patient and public voice engagement mechanisms within the Specialised Commissioning Directorate within NHS England. The Assurance Group was created at a key point in the strategic review of the specialised commissioning function via the Specialised Commissioning Taskforce. The initial membership was made up of an independent Chair, six representatives of external groups and organisations working within Specialised Commissioning and six individual members appointed via an external recruitment process.

Following an internal review of the work of the Assurance Group and its Terms of Reference in 2016 the decision was made to stand down the existing membership and undertake a refreshed recruitment process. This was intended to better reflect the need to provide greater assurance around internal governance and processes and to strengthen lay representation within the assurance process.

Representation is drawn from PPV members from key groups and committees within the Specialised Commissioning governance structure (including Clinical Priorities Advisory Group, Rare Diseases Advisory Group, the national Individual Funding Requests Panel, the Place Based Commissioning Oversight Group and each of the Programme of Care Boards). This is intended to promote increased communication across these structures and to share emerging concerns around patient and public voice issues at an early stage. This is supported by five independent members recruited via a transparent external recruitment process.

The role of the Assurance Group is to:

- ✓ Deliver a “critical friend” function to NHS England’s Specialised Commissioning Directorate in respect of patient and public participation.
- ✓ Provide levels of assurance to the NHS England Specialised Commissioning Oversight Group around key areas of work.
- ✓ Offer appropriate challenge and potential solutions as and when required
- ✓ Monitor the implementation and operation of NHS England’s Patient and Public Participation Policy and the Participation Framework for Specialised Commissioning.
- ✓ Ensure that patients and members of the public are actively involved in service design, development and review.
- ✓ Act as a central point of reference for patient and public participation across NHS England’s Specialised Commissioning Directorate.
- ✓ Raise and escalate issues and concerns in respect of patient and public participation.

The Assurance Group is directly accountable to the Specialised Commissioning Oversight Group (SCOG) and provides a monthly update report to the NHS England Specialised Services Committee.

The Assurance Group meets on a monthly basis, and minutes of meetings are currently awaiting sign off for publication on the NHS England website.

Membership

The current membership is:

Jason Stamp	Independent Chair
Julia Cons	Representing the national IFR Panel
David Liggins	Representing the Place Based Commissioning Oversight Group
Sue Millman	Representing RDAG
Jane Dalton/ Olive Andrews/ Fiona Barber/ Nason Maani	Representing CPAG
Nick Meade	Representing the Women, Children and Gender Identity Programme of Care Board
Kye Gbangbola	Representing the Blood and Infection Programme of Care Board
Elizabeth Abbott	Independent Member
James Bradley	Independent Member
Ian Gall	Independent Member
Griffith Gay	Independent Member
Suzanna Hopwood	Independent Member

There are current vacancies for Programme of Care Board representation which are in the process of being addressed. Additionally, we will recruit appropriate PPV representation from emerging groups and committees within the Specialised Commissioning governance structure, including the proposed new Quality Assurance Group.

Participation Framework for Specialised Commissioning

The Assurance Group has supported the development and implementation of the internal Participation Framework for Specialised Commissioning which provides a framework for patient and public involvement in the work of the Directorate. The Assurance Group would recommend that this document is reviewed and refreshed on an annual basis in order to

ensure that it remains 'fit for purpose' and meets the changing priorities of both the Directorate and NHS England.

13Q assessment process

The section 13Q duty of the Health and Social Care Act (2012) is aimed at ensuring that NHS England acts fairly in making plans, proposals and decisions in relation to the health services it commissions, where there may be an impact on services. The duty requires NHS England to make arrangements for public involvement in commissioning.

The Assurance Group has supported the development and implementation of an internal assessment process linked to the legal 13Q duty. The purpose of this is to require Commissioners to assess whether they consider that the duty applies in respect of the piece of work being undertaken and if consultation is required the timescales for this and an overview of the plan for how this will take place.

In reviewing the 13Q assessments formally presented to the Assurance Group we would make the following observations:

- There has been considerable progress in embedding early consideration of the 13Q duty in specialised commissioning and commissioners appear to have an increased awareness of the need to engage and consult in a timely fashion. However, there are still instances where consideration of the 13Q duty takes place at a later stage and there is a need to develop a greater understanding of proposed consultation timescales in terms of both proportionality to the work undertaken and managing levels of risk should this not be carried out effectively.
- In instances where the Assurance Group has disagreed with a Commissioners 13Q assessment, we have provided advice and guidance on the reasons for this and suggested ways in which the 13Q duty can be implemented.

PPV assurance framework

Over the past year a key function of the Assurance Group has been to develop a comprehensive framework to measure assurances against communication and engagement plans linked to commissioning policies and service reviews within Specialised Commissioning. The Assurance Framework measures plans, policies and strategies against set criteria in order to provide one of three levels of assurance:

- **Fully assured** – the plan is of a high quality and takes into account the specific needs of the target group

- **Assured with recommendations** – there are suggested areas for improvement or other areas for consideration which should be implemented prior to the work taking place
- **Not assured** – the plan is not ‘fit for purpose’ and requires further review and revision before being re-presented at a future Assurance Group for further consideration.

The following have been considered for assurance over the past year:

May 2017	Gender Identity Service Specification	Assured with recommendations
	Genetic Laboratories	Assured
June 2017	Radiotherapy	Assured
	Intestinal Failure Service Specification	Assured
July 2017	Communications Plan for the Specialised Commissioning Narrative	Assured with recommendations
August 2017	Hyperbaric Oxygen Therapy	Assured with recommendations
	Spinal Cord Injury	Assured
	Interim Service Specifications for High Consequence Airborne Infectious Diseases for adults and children	Assured
	Rare Diseases Strategy Implementation Plan	Assured with recommendations
October 2017	Genetic Laboratories	Assured
	Haemoglobinopathies Service Review	Assured
	Specialised Complex Urogynaecology Conditions	Assured
	Implementation phase of Transforming Care	Assured
November 2017	Methods for determining product selection for High Cost Tariff Excluded Services	Assured with recommendations
	Rare Diseases Strategy Implementation Plan	Assured with recommendations
	Children and Young People’s Cancer Services	Assured
January 2018	Sarcoma 13Q assessment	Assured
	Osophageal and Gastric Cancer Surgery service review 13Q assessment	Assured
	Children and Young Persons Cancer Services - consultation plans	Assured
February 2018	Sarcoma consultation plan	Assured
	Paediatric Critical Care	Assured

	CAMHS Tier 4	Assured
	Congenital Gynaecological Abnormalities – Period of consultation undertaken on advice of PPVAG	Not assured
	Genetic Testing Directory	Assured
March 2018	Oesophageal and Gastric Cancer Surgery Service Review consultation plan	Assured

Our assessment of the process is that it is working well and is a systematic and evidence based framework for formal assurance. The Assurance Group receives regular updates on how its recommendations and suggestions for how consultation and engagement activity could be strengthened have been incorporated.

Based on our review of our work to date, we have highlighted the following areas for consideration:

- Ongoing work needs to take place with commissioners to ensure that the assurance function is embedded in all aspects of the work and that all consultations, policies and service reviews take into account PPV assurance at an early and appropriate stage.
- Issues of equality, diversity and tackling health inequalities (incorporating NHS England’s statutory responsibilities) are more clearly addressed in consultation plans, especially where plans potentially impact on protected characteristics.

Feedback from commissioners

“As the communications and engagement lead on service reviews, I regularly need to present my plans to PPVAG. Involving the public in our decisions is not an exact science, and you need to unpick some of the complexities to understand the potential impact our commissioning decisions can have for patients and carers. PPVAG members provide that essential ‘critical friend’ role through good conversations, helpful challenge and a consistent approach to what good engagement should look like. Whilst this is part of our formal assurance, for me it’s a genuinely productive and supportive way of checking I’m properly considering our legal duties and working towards best practice”.

**Keri Lewis, Communications Lead, Service Transformation Team
Specialised Commissioning, NHS England**

“From a commissioner perspective, PPVAG always provides challenging but supportive comments on proposed service changes and developments. The group carefully considers proposed future service changes and ensures the described case for change is clearly articulated in a way that would make sense to patients and the public. Feedback from PPVAG has been key in developing consultation plans and ensuring appropriate stakeholder involvement. Comments from members of the group have also been vital in shaping public consultation guides”.

**Rupinder Dev, National Programme of Care Manager – Cancer
Specialised Commissioning, NHS England**

Analysis of formal responses to consultations

In addition, the Assurance Group has considered and commented on the following NHS England responses to public consultations:

- Generic Commissioning Policies
- Revised Individual Funding Request policy

Strategic overview / deep dives

Over the past year the Assurance Group has been consulted as part of a wider engagement process around key strategic issues within Specialised Commissioning. These have included:

- The Transforming Care Programme – particularly focusing on how patients and users of services were being supported at a regional/ local level.
- Measuring Patient Outcomes – members of the Assurance Group participated in a national development workshop around identifying patient outcomes and measuring patient experience within Specialised Commissioning.
- Place Based Commissioning – the Assurance Group has received updates on the on-going development of this programme, particularly linked to public facing information and the role that the Assurance Group could potentially take in the future around assuring plans for place-based service delivery.
- Review and comment of public facing information including the animations on the work of Specialised Commissioning, the IFR process and prioritisation.

The Assurance Group has appreciated the opportunity to be actively involved in key strategic plans at an early stage and to offer advice, guidance, support and challenge around these areas of work from a PPV viewpoint. We also believe that this has helped move towards the integration of the PPV perspective into strategic planning processes.

Specialised Commissioning Oversight Group (SCOG)

The independent Chair of the Assurance Group and one other Assurance Group representative are members of the Specialised Commissioning Oversight Group. For the period 2017/2018 this has been Julia Cons. We have attended all meetings and participated fully in discussion as well as contributing to the decision-making process. We have valued the opportunity to work with key senior leaders to develop a greater awareness of patient and public voice issues and to support activity to embed this in day to day work.

“Over the last few years I have been impressed by the level of public and patient involvement at all levels across specialised commissioning, and the really important contribution all our PPV members make to improving specialised services. The active participation and constructive challenge of the PPVAG members at the Specialised Commissioning Oversight Group ensures the patient voice remains central to our decision making.”

**John Stewart, Acting Director of Specialised Commissioning
NHS England**

Patient and Public Voice (PPV) Conference

NHS England hosted a conference for Patient and Public Voice partners on 21 March 2018, part of which was a specific afternoon session for patients and members of the public working within the Specialised Commissioning Directorate. This included members of Clinical Reference Groups, Programme of Care Boards, working groups and strategic committees. 49 people attended this session. This has also been supported by a survey of Chairs and PPV members from across NHS England, the results of which will be published in the near future.

Delegates were provided with an opportunity to hear about developments within Specialised Commissioning via a question and answer session with John Stewart (Interim Director of Specialised Commissioning) as well as consider the proposed strategic priorities for Specialised Commissioning over the next year.

Participants were also asked to reflect on their experiences of working as a PPV partner within Specialised Commissioning. Feedback was largely positive:

29 delegates responded to the question:

“I think that the patient and public voice is valued by the group that I am part of”

76% of those responding strongly agreed or agreed with this statement

31 delegates responded to the question:

“I am able to speak freely in the group I am part of”

80% of those responding strongly agreed or agreed with this statement

31 delegates responded to the question:

“I think my contribution has made a positive difference to the group I am part of”

64% of those responding strongly agreed or agreed with this statement

31 delegates responded to the question:

“I believe that PPV involvement leads to better outcomes for specialised services”

71% of those responding strongly agreed or agreed with this statement

Based on their experiences delegates had a number of suggestions as to how their experience of working as a PPV member could be improved. These included:

- Sharing of good practice examples of how PPV involvement has made a positive difference so that these can be celebrated and learnt from.
- Working with the Chairs of groups to ensure they have a good understanding of the PPV role and opportunities for involvement in the wider work of the group.
- Ensuring that meeting papers are available in advance of the meeting and that wherever possible the amount of paperwork is kept to a minimum.
- Ensuring that all PPV members have access to induction, on-going training and support to allow them to continue to develop their skills, knowledge and experience.
- Creating more networking opportunities for PPV members across Specialised Commissioning in order to develop a consistent, joined up approach.
- Consider developing systems and processes to measure the impact and outcomes of PPV involvement in specialised commissioning.

A separate event report and action plan will be produced focusing on the outcomes of this event but from a strategic assurance point of view:

- PPV members attending the event appear to have responded positively to the changes brought about by the CRG review in 2016 and believe that the new system provides greater opportunity for meaningful PPV participation.
- PPV members welcome the opportunity to meet with senior officers to hear about strategic developments and key challenges as well as identifying opportunities for future involvement.
- Communication and engagement has improved but there is still a need to be able to share information, minutes and other publications in a timelier fashion. The animations around the work of specialised commissioning, the IFR system and the prioritisation process were welcomed.
- PPV participation was becoming better integrated into the work of the Specialised Commissioning Directorate but further refresher work with Chairs and Lead

Commissioners was suggested as a means of ensuring a consistent approach across the system.

- The decision-making structure within the Directorate was seen as complex and PPV members would welcome the opportunity to better understand how and where decisions are made and how their contribution fits into the bigger picture.

The Assurance Group recommends that consideration be given to hosting an annual Specialised Commissioning PPV Conference as a means of strategic engagement with PPV partners, a celebration of learning and good practice and an opportunity to obtain direct feedback from a PPV member perspective.

Priorities for 2018/19

In addition to continuing to provide levels of assurance around plans for future commissioning, service reviews and policy development the Assurance Group has identified the following priorities for the next year:

- To begin the process of providing assurance of regional activity within Specialised Services via regular reporting and presentations from regional communications and engagement leads within Specialised Commissioning. This will focus on nationally commissioned activity being delivered on a regional level and look to mirror the national assurance process.
- To support the implementation of the recommendations arising from the recent Patient and Public Voice Partner conference.
- To strengthen relationships between PPV members across the system and support ongoing training and development opportunities.
- To review the Participation Framework for Specialised Commissioning.
- To continue to work with commissioners to ensure that the assurance function is embedded in all aspects of the work and that all consultations, policies and service reviews take into account PPV assurance at an early and appropriate stage.
- To gain assurance that PPVAG recommendations are implemented within communication and engagement plans and to develop a process that monitors the outcome and impact of our work.
- To support PPV engagement and participation in the development of the Genomics Programme of Care Board.
- To continue to contribute to the development of patient outcome measures within Specialised Commissioning.

Conclusion

Over the past year the development of the patient and public voice function within the Specialised Commissioning Directorate has been a significant achievement.

The review of the structure of Clinical Reference Groups and Programme of Care Boards has supported the development of a system which provides a range of opportunities for patients, users of services and members of the public to actively contribute to the commissioning process. Feedback on the new way of working has been positive and PPV members report that they feel that their contributions are valued and have made a difference.

A diverse range of consultation and engagement activity has taken place and there is evidence that an understanding of the legal duty to involve patients and members of the public is becoming embedded in the day-to-day business of the Directorate.

There have been a number of high profile consultations this year (including Congenital Heart Disease and Gender Identity Services) which have demonstrated the ability to engage creatively and effectively with diverse groups of people, working alongside key stakeholders and the clinical community. These are areas of good practice and should be pro-actively shared as key learning for both the Directorate and NHS England.

We acknowledge that despite considerable progress there is still a significant amount of work still to do and that there are key challenges ahead. We believe that this Annual Report demonstrates that the Assurance Group is achieving its key purpose and functions as outlined in its Terms of Reference and that we have contributed to the development and implementation of a firm foundation for patient and public involvement in all aspects of the work of NHS England's Specialised Commissioning Directorate.

Jason Stamp, Independent Chair
Patient and Public Voice Assurance Group
Specialised Commissioning
NHS England