

HEALTHIER COMMUNITIES SELECT COMMITTEE			
Report	Lewisham Clinical Commissioning Group		
Ward	All	Item No.	3
From	Diana Robbins, Lay Member and Public Engagement Lead, Lewisham Clinical Commissioning Group Martin Wilkinson, Managing Director (AO), Lewisham Clinical Commissioning Group		
Class		Date	

1. Recommendations

1.1 Members of the Healthier Communities Select Committee are recommended to review the Lewisham Clinical Commissioning Group (CCG) Engagement Strategy.

2. Purpose

2.2 The CCG Public Engagement Strategy will ensure that the organisation realises its duty to involve and engage the public (Lewisham People) in commissioning and improving their services.

2.3 Informing and engaging the public is important for the development of the CCG – effective communication and engagement is about getting the right messages to the right audiences through the most appropriate channels at the most appropriate time. It is to reach out to all sections of our many communities and ensuring that people are supported and informed enough to engage productively. Fundamentally, a two way process – informing and sharing, listening and responding to incoming communications is essential.

2.4 The strategy aims to support the delivery of the CCGs mission, values and aims as stated in the CCGs Constitution. Ensuring that patients, public and staff are engaged with commissioning decisions at every level from the individual's involvement in his or her own care to statutory engagement through bodies such as HealthWatch. As well as listening and responding to patient feedback and continually working with providers to implement 'lessons learnt' to improve patient care and experience.

2.5 There are a number of requirements that must be met when discussions are being made about the development of services, particularly if any of these will impact on the way these services can be accessed by patients. Such requirements include;

- Section 242 of the NHS Act 2006
- Section 244 of the NHS Act 2006
- Section 234 of the Local Government and Public Involvement in Health Act 2007
- The four 'tests'
- The NHS Constitution

2.6 **Section 242** of the NHS Act 2006, (previously section 11 of the Health and Social Care Act 2001) places a duty on NHS bodies to involve patients and the public in the planning and development of services, particularly if a proposal would have impact on: The manner in which the services are delivered to users of those services, or The range of health services available to those users.

2.7 **Section 244** of the NHS Act requires health organisations to request the appropriate local authority's health overview and scrutiny committee to review and scrutinise proposals which result in service change. Where such changes are considered to be 'a substantial variation' there is a requirement to carry out a formal process of public consultation.

2.8 **Section 234** of the Local Government and Public Involvement in Health Act 2007 requires health bodies to (it states strategic health authorities and primary care trusts so it can be assumed that this requirement also relates to specialised commissioning) to prepare a report: on the consultation carried out, or proposed to be carried out, before a commissioning decision is made, and on the influence that the results of the consultation have on commissioning decisions.

2.9 The duties to involve and consult were reinforced by the **NHS Constitution** which stated: 'You have the right to be involved directly or through representatives, in the planning of healthcare services, the development and consideration of proposals for changes in the way those services are provided, and in decisions to be made affecting the operation of those services'.

3. Stakeholder Involvement

3.1 The Lewisham CCG Public Engagement Strategy was developed in partnership with the Lewisham Public Engagement Group (PEG). The group's purpose is to ensure that the CCG has the mindset, the structures and processes in place to achieve a high level and quality of patient and public engagement and that its approach to engagement promotes the reduction of health inequalities. The group provides assurance to the CCG Governing Body and Committees.

3.2 The strategy has been approved by the CCG Strategy & Development Committee.

3.3 The LCCG Public Engagement Group (PEG) membership is as follows as per the Terms of Reference as set out in the CCGs Constitution;

Dr Hilary Entwistle	Clinical Director, LCCG
Diana Robbins (Chair)	Lay member, Public Engagement, LCCG
Diana Braithwaite	Commissioning Director, LCCG
Lorna Hughes	Head of Public Engagement, LCCG
Miriam Long	Healthwatch
Dr Alfred Banya	Public Health
Janette Haworth	Lewisham Healthcare PPI Lead
Josephine Edun	Lewisham Healthcare Health Promotion and Engagement Lead
James Ellis	SLAM PPI Lead
Dr Petula Peters	London Borough of Lewisham Officer with responsibility for Health and Wellbeing Board and link to Borough insights into Lewisham
Mark Drinkwater	Voluntary Action Lewisham – Head of Health and Social Care Forum

Grainne Bellenie
Kerry Scanlon

Engagement Officer, LCCG
South London CSU Communications and Engagement Lead
relating to Lewisham

4. Next Steps

- 4.1 Work will commence shortly on the development of a two year work programme to deliver the strategy. This work will be underpinned and supported by the recent appointment of a Head of Public Engagement for Lewisham CCG.
- 4.2 The strategy and subsequent work plan will be driven and monitored by the CCGs Public Engagement Group.
- 4.3 The strategy will be published in an *easy read* version with diagrams and tables where appropriate.
- 4.4 The CCG Governing Body will be recommended to endorse the strategy in October.