Date:	20 April 2017				
Meeting:	Joint Commissioning				
	Committee				
Item Number:					
Public/Private:	Public ⊠ Private □				

Author: (Name, Title)	Julie Killingbeck – Head of Primary Care
GB Lead: (Name, Title)	Dr Jaggs-Fowler

Report Title:
Consultation and engagement plan for Market Hill
procurement up-date

Decisions to be made:

JCC is asked to:

- Approve the draft consultation and engagement plan
- Agree to virtually approve consultation documentation
- Accept further up-dates on the progress of the consultation process
- Receive an options appraisal and recommendation for the future procurement of Market Hill practice in August 2017

Continue to improve the quality of services	\boxtimes	Improve patient experience			
Reduced unwarranted variations in services	\boxtimes	Reduce the inequalities gap in North Lincolnshire			
Deliver the best outcomes for every patient	\boxtimes	Statutory/Regulatory			

Executive Summary (Question, Options, Recommendations):

The attached draft consultation and engagement plan provides an overview of the up-coming patient consultation and engagement exercise the CCG will be undertaking with patients and key stakeholders to inform the decision relating to the long term Market Hill practice procurement (from April 2018).

The CCG will be consulting with patients and key stakeholders on proposals to introduce a practice boundary (Scunthorpe) and re-align the current opening hours to reflect core GMS contracted hours. Consultation documentation will be presented to the JCC for comment and approval prior to commencement of the consultation. It is anticipated that this will need to be presented virtually, given the time frames surrounding the procurement.

It is anticipated that the results of the consultation will inform a paper to the JCC with an options appraisal and recommendation for the long term future procurement of the Market Hill practice in August 2017. JCC is asked to:

- Approve the draft consultation and engagement plan
- Agree to virtually approve consultation documentation
- Accept further up-dates on the progress of the consultation process
- Receive an options appraisal and recommendation for the future procurement of Market Hill practice in August 2017

practice in a	August	2017							
Equality Impact	Ye	s 🗆 N	No ⊠						
Sustainability	Ye	s 🗆 N	No ⊠						
Risk	Ye	s 🗆 N	No ⊠						
Legal	Ye	s 🗆 N	No ⊠						
Finance	Ye	s 🗆 N	No ⊠						
	Patie	ent, Pub	lic, Clin	ical and St	akeholder Engagemen	t to dat	te		
	N/A	Y	N	Date		N/A	Y	N	Date
Patient:	\boxtimes				Clinical:	\boxtimes			
Dublice					Othor	\square			



Market Hill GP practice - proposed service changes

Communications and Engagement Plan

PLEASE NOTE THIS IS A DRAFT VERSION - TO BE FINALISED BY 21st April 2017

Objective – to carry out public consultation with patients and stakeholders around the proposed changes to the arrangements for GP services at Market Hill specifically:

- > Communicate the 'case for change' to patients and stakeholders
- > Communicate the proposed practice boundary changes to affected patients
- > Communicate the proposed changes to opening hours and access for patients from April 2018
- > Carry out formal consultation process to meet statutory duty to consult and NHS good practice
- Respond to comments/questions/concerns from patients and stakeholders

Key Stakeholders – public/patients (inc PPG), practice staff, North Lincolnshire Council Scrutiny Committee, NHSE, Healthwatch

Timescales

- > Stage 1: Pre-engagement/planning and development of public information 10/4/17 to 5/5/17)
- ➤ Stage 2: Formal consultation period (8/5/17 to 16/6/17 TBC see critical risk factors)
- ➤ Stage 3: Analysis of findings report/evaluation (16/6/17 14/7/17)
- > Stage 4: Communicate decision and next steps

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Stage 1 – Pre-engagement/Planning (10/4/17 to 3/5/17)

Actions/Details	Date	Led by	Comments / Progress
Engagement with current provider		JK/NHSE	Meeting taken place – meeting with Staff planned for 18/04/2017
PPG liaison	3/5/17	JK/TW/SC	Engagement re C&E plans. PPG involvement in developing FAQs - can provide insight as a patient on what people will want to know
Preliminary discussions with Scrutiny	10/4/17	JK	
Brief MP		JK	Ensure MP fully briefed on plans (early engagement will reduce likelihood of MP letters/enquiries later)
Liaison with Healthwatch		JK	
Develop/agree stakeholder list and key		JK/TW/SC/MH	
contacts			
Arrange dates/staffing for 'drop-in'	21/4/17	TW	Dates/times and locations will be included in patient letters, must
patient information session at practice			include evening/weekend options
and date of formal public meeting			
Book venue for public meeting			
Source Interpreters for above where	21/4/17		
required			

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Actions/Details	Date	Led by	Comments / Progress
Confirm timescales with Practice Manager re printing and mail out of letters to patients	17/4/17	TW	Critical risk factor – Practice must have capacity to print and fulfil mail out to patients by start of formal consultation period
Confirm with practice accessibility needs of patients re written communications (Accessible Information Standards)	17/4/17	TW	Critical risk factor - time scales for is the development of alternative formats (language translations/Easy Read) of the formal consultation materials to meet requirements of Accessible Information standards and be fit for purpose (will translated letters need to be notorised for assurance re content?)
Development and 'sign off' patient letters re changes to core hour GP services from April 2018	4/5/17	JK/MH	Timely 'sign off' of consultation materials is a critical risk factor (see above)
Development and 'sign off' letters to patients impacted by proposed boundary change	4/5/17	JK/MH	Timely 'sign off' of consultation materials is a critical risk factor (see above)

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Actions/Details	Date	Led by	Comments / Progress
Development and 'sign off' FAQs	4/5/17		Public consultation information to include Case for change – why? Options being proposed for consideration by patients Financial implications Impact on safety/quality if any Impact on Patient Choice Opening hours and accessing services –making appointments Continuity of services Benefits/drawbacks for patients How to comment Feedback form (*FREEPOST) Practices to meet duties re Accessible information standard
Develop formal briefing for OSC	4/5/17	JK/MH	To inform of rationale and consultation plans
Develop written briefing note for MP	4/5/17	JK/MH	To supplement/support verbal briefing
Develop staff briefing note for practice staff/continuing care etc	4/5/17		It is important that all staff who come into contact with patients are fully briefed and information/messages are consistent – particularly staff who visit frail/frail elderly patients in their homes
Media briefing/release	4/5/17	МН	Consider face to face media briefing with Scunthorpe Telegraph
Develop systems to gather/collate and respond to comments	4/5/17	SC	Written comments could be directed to the C&E Freepost address (NL to be recharged by NEL) and logged centrally Email comments/enquires to nlccg.embrace@nhs.net and logged centrally – enquiries will be forward to JK to respond Telephone enquiries/comments – Engagement team 0300 number as this will be charged at the local rate 0300 3000 567

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Actions/Details	Date	Led by	Comments / Progress
Carry out EIA of for C&E Plan	4/5/17	??	To be completed prior to formal consultation and adjustments made to project plan accordingly
Appoint external provider for Engagement Analysis report?	By 28/5	SC	

Phase 2 – Formal Consultation period 8/5/17 to 16/6/17

Actions/Details	Dates	Led by	Comments / Progress
Launch of 6-week consultation - upload media release on to	8/5/17	JK/MH/SC/T	
CCG website		W	
Information out to stakeholders			
Patient Letters mailed out	By 8/5/17	AB	
Patient consultation sessions	TBC	JK/MH/SC/T W	
Collate responses/respond to enquiries	8/5/17 to 16/6/17	Engagement team to collate and forward to JK to respond	

Phase 3 – Analyse and consider consultation findings (16/6/17 - 14/7/17)

Actions/Details	Dates	Led by	Comments / Progress
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Actions/Details	Dates	Led by	Comments / Progress
Analysis of consultation findings and development of findings report	16/7/17 -		J
Consideration of consultation outcomes	ТВС		Gunning Four - decision-makers to give conscientious consideration to what they have heard in the consultation.
Independent evaluation of processes?			Would this be something we could ask Healthwatch to do?
Communicate outcomes (will need to develop a C&E plan to deal with implementation of decision and timetable – must inform patients of outcome)			

Contact list – project team

Organisation	Name	Role	Contact
NL CCG	Julie Killingbeck	NL Primary Care lead	Julie.killingbeck@nhs.net
NLCCG	Sally Czabaniuk	NL CCG engagement manager	Sally.czabaniuk@nhs.net
NLCCG	Melanie Hannam	NL CCG communications manager	Melanie.hannam@nhs.net
Core Care Lincs	Andrea Berry	Market Hill 8-8 PM	
NL CCG	Tracey Wartnaby	NL CCG Primary Care Manager	
NL CCG	Janet Gaiger	Engagement support Officer	



NL CCG	Anneline Wilson	Communications Support Officer	





Stakeholder list (inc staff teams)

Organisation/Stakeholder	Name	Role	Contact
NLC OSC	Dean Gillon	OSC officer	dean.gillon@northlincs.gov.uk
MP	Nic Dakin	MP	nic.dakin.mp@parliament.uk
NLCCG	Ian Reekie	Lay member (Primary Care)	lan.reekie@nhs.net
Healthwatch North Lincolnshire	Kirsten Spark	Manager	kspark@healthwatchnorthlincolnshire.co.uk enquiries@healthwatchnorthlincolnshire.co.uk
Healthwatch Lincolnshire	Mark Lupton		
North Lincolnshire Council		Elected members – Town Ward	
Humberside Probation Service			
Continuing Care Team	Catherine Wylie	Director of Nursing and Quality	Catherine.wylie@nhs.net
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