

Brent local plan for engagement

Sustainability and Transformation Plan



Brent Sustainability and Transformation Plar Communications and Engagement Clinical Communications

Brent Clinical Commissioning Group

NHS Brent CCG and Adult Social Care work together in **collaborative partnerships** with local patients, carers, the public, clinicians and local statutory and non-statutory stakeholders including: Healthwatch and the Voluntary Sector in the planning, commissioning and delivery of local health and care services. We recognise that the STP aims can only be achieved through stakeholder engagement and partnership working.

Co-production with patients and the public is intrinsic to our decision making and takes place through a wide range of avenues including Lay Partners Forums, workshops, digital platforms, outreach to seldom heard and vulnerable groups and practice participation groups.

To date we have engaged on the STP with local people and partners through the Health and Well Being Board, Health Partners Forum (120 patients in attendance) and annual Adult Social Care Service User and Carer Summit (150 Brent residents). We have engaged our GP members on the STP at the GP Forum.

We plan to continue these conversations with people in Brent during the development of the STP and its implementation.

We have joint governance and leadership across the communications and engagement work stream, which is led by the CCG's Director of Communications and Engagement. This work stream is supported by a steering group including leads from the CCG and local authority communications and engagement teams, Healthwatch and CVS Brent.

In developing this communications and engagement plan we have referred to the *Brent CCG Equality, Engagement and Self-Care Strategy*, and *Engaging local people: A guide for local areas developing Sustainability and Transformation Plans* guidance produced by NHSE.

Having established the delivery areas in the checkpoint submission, the purpose of this phase is to engage our partners, staff, patients and residents on whether our focus is right, what more they would like to see and co-designing approaches to the delivery of new models of care.

We will be building engagement plans for each of Brent's big ticket items, which will need to reflect the specific nature of the proposals to ensure that we deliver a customer focused, design led approach to developing the detail of these individual projects through meaningful engagement with the public and other stakeholders.



The Brent five Big Ticket items

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It is proposed that the Brent STP will be the overarching strategic plan for Brent. The STP has to reflect and respond to three gaps: Health and Wellbeing, Care and Quality and Finance and Efficiency.

The local STP Group has identified five 'big ticket' items, e.g. those that will have the greatest impact on closing the gaps and that can only be delivered fully from working as a collective.

1. Prevention and Self-Care

These items reflect the need for a step change in behaviour across the system to manage demand which will include:

- Making Every Contact Count (MECC) i.e. use every opportunity to achieve health and wellbeing, and involve systematic promotion of benefits of healthy living
- Workplace based Health Promotion programme i.e. adapted version of London Healthy Workplace Charter for small businesses in Brent; contracts issued with workplace health and wellbeing as a 'social value' requirement
- Widen the scope of SIBI SIBI currently delivers a 2nd tier service, but the service can be re-aligned to support 1st (signposting and advice, with links to existing services) and 3rd tier patients (intensive support for short periods (6weeks to 3 months) using multi-agency approach
- Self-Care as part of Whole Systems Integrated Care

- 2. Renew the ambition and focus in Brent's Better Care Fund schemes to ensure we are tackling the care and quality gap, which will include:
- A renewed focus on Nursing and Care Home Provision, this will build on the current Better Care Fund scheme 3 and link to the NWL market management ambition of jointly commissioning all out of hospital care jointly
- Lead the way in the implementation of the West London Alliance integrated discharge pilot, which proposes to cut through the complexities of cross borough provision with one Borough discharging all social care placements for west London
- Develop a Frailty Model in tandem with CMH development, responding to changing needs of local demography, to include the services and pathways that address the needs of this cohort which will enable a focus of resources on this cohort of population with the highest demand through
- Re-confirm the original vision for Whole Systems Integrated Care (WSIC) building on the work done with primary care to full integrate Primary Care Transformation + community based acute prevention and discharge services, social care, housing and voluntary services in to a single pathway.



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- 3. Recognise the significant impact we could have by working together in a OnePublic estate model, and deliver an exemplar of the approach Central Middlesex Hospital:
- Redevelop the Central Middlesex Hospital (CMH) site into a Brent Health & Well-Being Centre providing a range of local services (including the Urgent Care Care)
- Broaden the scope of existing discussions to take in the wider CMH site, to include the new nursing home and extra care facility opposite in order to do two things: 1) focus on the place shaping opportunity to make this a better place to live and work, and 2) make very strong links between the acute and primary services at CMH and the social care facilities to ensure high quality services.
- 4. Ensure that mental health and wellbeing has the same focus as physical health and wellbeing:
- Start from the principle that housing, and for people of working age employment, underpin mental health and wellbeing and therefore, this needs to be fully integrated into the current health and care models
- We need a different system wide response to improve and sustain discharge from secondary mental health services so people can live independent lives
- Ensure we work across primary care and employment and housing services to support people with common mental illness
- •Make Brent a Dementia-Friendly Borough.

- 5. Integrated Workforce and Organisational Development, which underpins all of the above:
- Shared intelligence and understanding of the workforce, based on joint modelling using the Healthy London Partnership workforce model, which fully integrates assumptions across health and social care and allows integrated workforce planning and career paths
- Through Making Every Contact Count ensure that there is accountability to the customer, not the service, in everything we do
- Define the roles, and train the people needed to deliver the new models of integrated
- Find ways to develop a multi-disciplinary workforce and teams, for example, in mental health, which focus not only health, but also on housing and employment
- Work together to define and tackle the growing challenge we have to find key workers essential to success – homecare, residential and nursing workers, nurses and doctors.



Brent STP engagement so far

To date in Brent we have already engaged with patients, the public and partners as follows:

- 27 April: Health Partners Forum (120 patients)
- 1 June: Brent Governing Body Seminar
- 7 June: Brent Health & Well-Being Board
- 5 July: Adult Social Care Provider Forum update (150 providers)
- 13 July: Brent GP Forum
- 27 July: LNWHT AGM
- 10 August: Face to face meeting with Brent Patient Voice representatives
- 2nd September: BHeard
- 13th September: Brent Adult Social Care's Annual Participation Day (150 residents)
- 21 September: Brent Overview and Scrutiny Committee
- On-line resident survey, coordinated by Brent Healthwatch



Next steps: Engagement Phase (September 2016 to March 2017)

With patients and residents:

- 26th September we will hold a town hall style meeting working closely with the local authority, Healthwatch and CVS Brent, inviting local residents to ensure we get meaningful input from the local community in Brent
- 19th October we will hold a Health Partners Forum the STP will be the context as we engage on our commissioning intentions
- 25th January we will hold a Health Partners Forum
- We will do outreach to seldom heard groups to ensure as broad a range of voices as possible
- Feedback from all these activities will used to shape the plans and implementation of the STP going forward

We will be carrying out engagement for each of Brent's big ticket items, which will need to reflect the specific nature of the proposals to ensure that we deliver a customer focused, design led approach to developing the detail of these individual projects through meaningful engagement with the public and other stakeholders.



Next steps: Engagement Phase (September 2016 to March 2017) Clinical Commissioning Group

With Partners:

- We will design a programme of more deliberative-style events looking at bringing together different groups in different ways e.g. clinicians from across sectors/organisations; all those involved in care for people with mental health conditions as well as older people - to more directly shape further development and implementation of the STP
- · Working with local government partners we will continue to review the assumptions underpinning the changes to acute services and the delivery of local services

With staff:

- We recognise that cultural change is a key factor in achieving change in the system, and clinicians and NHS staff are central to the design and implementation of our plans. Our best advocate for the STP is our staff, spread across multiple locations and in a range of different roles. Each of our partners – whether in health or local government – is working up plans for specific staff engagement.
- · We will run a series of workshops with clinicians and local government officers to engage them on the STP
- STP updates are already a regular staple of all our internal communications materials and moving into the autumn we will be promoting workshops and updating on progress through internal newsletters and bulletins, weekly/monthly updates from Chief Executives and Chief Operating Officers, and online.
- · We are also working in tandem with our GP networks to engage primary care providers

Patients and residents:

- · We will host a town hall style meeting, Health Partners Forums and other face to face events in Brent, with patient groups and residents associations to ensure that we get real input from the local community
- · As well as having events in Brent we will also work in collaboration with NWL to engage residents across the footprint.
- We will exploit the variety of networks available to us from patient representative groups to local authority engagement networks to maximise public involvement
- · Feedback from all these events will be made available to help shape the discussion

And online:

- We will provide information and updates on the CCG website and partners' websites and promote events being organised for targeted audience. We will work with Healthwatch to develop an online survey so that we can reach those residents who want to get involved but may not attend events
- NWL online engagement tool will promoted across Brent
- · We will promote the engagement programme through our digital media channels e.g. twitter, which already exist across both health and local government
- The focus of this engagement phase will be to test Brent's five big ticket items and the delivery of local services based on new models of care.





Next steps: New models of care engagement (September – March)

Timeline:

- As part of our on-going engagement programme we want to have a conversation about new models of care focussed on the delivery of local services.
- We have undertaken extensive engagement on new models of care using a co-design approach with partners, clinicians, patients and the public developing the whole systems programme.
- In tandem with this piece of work is the NWL Implementation Business Case (ImBC), which is the request for the capital needed to implement the changes to buildings that support some of the clinical service changes which the Secretary of State for Health endorsed in October 2013.
- NWL plan to submit the ImBC to the NHSE Investment Committee in October 2016. It is also expected to reference a 'business as usual' bid for Northwick Park Hospital and Central Middlesex Hospital for essential maintenance and modernisation (examples include boilers and pharmacy

 updating and expanding both to meet current need and be more efficient in future)
- · NWL expect to make the ImBC public from this time onwards

Engagement

- We have already undergone a range of engagement meetings with key stakeholders in the Borough on the original proposals underpinning the ImBC, and have continued to engage. That process of continuous engagement now needs to focus on the delivery of local services within the wider new models of care
- The engagement programme will be for staff, stakeholders, partners, patients and the wider public to help us co-design the services and make a real positive case for change

With staff:

- Our clinicians are central to this process and have already played a part in the development of the plan so far and its important that they have a further opportunity to co-design the resulting local services and what is needed on hospital sites to make them work.
- As plans are developed we will continue to work with clinicians and staff to codesign interventions and services in order to generate buy-in to change the impact of proposals from a frontline perspective. This includes change in culture to achieve parity of esteem
- Updates on the process will be part of all our internal communications materials and online.
- We are also working in tandem with our GP networks to engage primary care providers in particular on how local services should look and feel

With partners and stakeholders:

- We will look to build an understanding amongst our Brent partners of the development of the ImBC, offering workshops and attending seminars and governing body meetings
- We'll continue an open dialogue with our local politicians both in formal meetings such as the Oversight and Scrutiny Committee (OSC) and through regular one to one meetings

With our patients and residents:

- In tandem with the wider engagement events we are having on the STP we will run
 a town hall style meeting and other face to face events. We will bring the STP as
 the context for our commissioning intentions at the Health Partners Forum in
 October 2016 and January 2017.
- We will set out a programme of targeted outreach engagement for seldom heard groups, patient groups and residents associations to ensure that the local community has a real opportunity to co-design the local services.
- Feedback from all these events will be made available to help shape the discussion
- We will also use our digital media channels to ensure coverage of seldom heard groups.



Next Steps: Media; Fol; and Political engagement

Media handling

- As we approach the completion of the STP media relations will become more important, but at this stage the focus of our activity must be on engagement with our stakeholders, patients and residents rather than on media announcements
- We will still look for positive opportunities to promote the collaborative approach we are taking, and will identify the right spokespeople - whether clinical or professional leaders - to promote the STP in the public arena.
- We will produce a script and full Q&A to be used for media briefings in support of the period of public engagement

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 Given the plan will be published and available to everyone once it has been completed, assured and finalised, and in accordance with guidance from NHSE, we don't envisage releasing early drafts of the plan to any Fol requests.

Political engagement

- Throughout the process our local political leaders in both the local authorities and Parliament will be kept full briefed and updated on all developments and milestones
- This engagement will be through regular face to face meetings between the STP leadership team and local councillors and MPs.
- We will also ensure that the STP is a discussion item for the local authority overview and scrutiny committee as plans develop.



Programme of Activity

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Public meetings

- 26 September Brent town hall style event
- 19 October Brent Health Partners Forum
- 25 January Brent Health Partners Forum

Public Outreach

- Three pop up shops/stalls with Brent CCG Chair Ethie Kong and Cllr Hirani:
 - Sunday 02 October, 1-3pm at Wembley Asda
 - Tuesday 04 October, 10-12pm at Central Middlesex Hospital
 - Wednesday 05 October, 5-7pm at Kingsbury station
- Further events to be set up

Locality meetings with GPs

 The STP with be itemised on the agendas in Oct and November

Online

- 17 August NWL online engagement tool launched
- Over 900 visitors to the site already
- Supported by Facebook advertising
- 16,116 people have seen the ad either on FB or on other FB platforms (eg. Instagram).
- FB says 419 have taken action after seeing it (this is either them clicking through, sharing, commenting, liking etc.).
- It says 106 people have clicked through to the tool.