

Engagement Plan:

Developing the West Locality Place Based Plan for Primary Care

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1. Introduction

This document sets out the engagement plan relating to the development of a sustainable primary care in Witney and the surrounding area in West Oxfordshire: This plan is designed to:

- Describe the approach to the engagement
- Describe the materials to be produced to support the engagement
- Set out a timeline for the engagement

2. Background

2.1 Primary Care in Oxfordshire

Oxfordshire Clinical Commissioning Group (OCCG) has 70 GP practices serving its 733,000 patients. Each practice has a practice boundary and only patients who live in that boundary can register with that practice. Most patients have a choice relating to which practice they register with.

As demand on GP services continues to increase, there is a need for it to change and to encourage patients to self-care and access the health services at the most appropriate point. Along with GP colleagues, OCCG have developed a Primary Care Framework to provide strategic direction for a sustainable GP service in Oxfordshire. It describes a number of operational principles all of which will be important to the sustainability of GP care in the county. These include practices working together to share resources and share workload to provide a better service and manage demand; delivering care closer to home via a multidisciplinary neighbourhood team supported by a modernised IT system and investment in estates.

The aim of the Framework is to set the strategic direction for Primary Care over the next 5-10 years so that it can steer localities in achieving sustainable primary care to best meet the needs of the local populations which will result in a general practice that is fit for the future and at the heart of the NHS in Oxfordshire. Work is currently being undertaken to develop this framework at a locality level through the Locality Place Based Plans. OCCG is already taking forward analysis, engagement and forward planning for primary care services in and around Witney through this work.

It is recognised, nationally and locally, that primary care, in particularly general practice is under pressure. This is due to an increasing workload from patient demand and complexity of illnesses and conditions, with many GPs working increasingly long hours. In the next five years 30% of GPs plan to retire in Oxfordshire whilst the numbers of trainees wanting to work as GPs or practice nurses is declining. This is leading to problems with patients having difficulty accessing GP services as well as sustainability and workforce issues.

2.2 Deer Park & Independent Reconfiguration Panel Advice

Following an unsuccessful procurement process Deer Park Medical Practice in Witney closed on 31 March 2017. Its patient list was dispersed to surrounding practices. OCCG worked with the GP practice and its 4,399 patients to ensure that the list dispersal was managed in a safe and orderly way. We also worked with the other practices in Witney to help minimise any impact on their services as Deer Park closed.

In December 2016 a member of Deer Park Medical Practice Patient Participation Group requested a judicial review on the decision of OCCG to close services at Deer Park Medical Centre. The judge hearing the case in February 2017 refused permission to bring a judicial review, however the Oxfordshire Health Overview and Scrutiny Committee agreed to refer the matter to the Secretary of State for Health on the grounds that the closure was a substantive change in service. In March 2017 the referral was passed to the Independent Review Panel for initial assessment in line with the protocol for handling contested proposals for the reconfiguration of NHS services.

In a letter to the SoS, the Panel concluded that the referral was not suitable for full review because further local action by the NHS with the OJHOSC can address the issues raised. The SoS responded to JHOSC on 3 July 2017 with a copy of the IRP review and confirming he had accepted their recommendations in full. This letter was shared with the OCCG by OJHOSC, but initially there was no direct communication from the Secretary of State for Health with OCCG.

On 25 July 2017 NHS England (NHSE) wrote to the CCG confirming their expectations that OCCG would address the recommendations from the IRP and in particular:

- The CCG must continue actively to pursue the objective that all former DPMC patients are registered as soon as possible (*this is currently in progress*)
- The CCG should immediately commission a time limited project to develop a comprehensive plan for primary care and related services in Witney and its surrounds. At the heart of this must be the engagement of the public and patients in assessing current and future health needs, understanding what the options are for meeting their needs and co-producing the solutions. This work should seek to produce a strategic vision for future primary care provision in line with national and regional aims and should not preclude the possibility of providing services from the Deer Park Medical Centre in the future. (*NHSE added that this needs to be linked to, and integrated with, the wider OCCG and STP plans for the whole of Oxfordshire*).

The West locality plan is already in progress as part of the strategic development of locality place based plans. Patient and stakeholder engagement and involvement is an integral part of this process and plans will be tested with PPGs, local councillors and the HOSC. It is proposed that the draft Locality Plans will be ready for publication (following engagement and input) in early December 2017.

3. Engagement Aim

The aim of the plan is to raise the public's awareness, understanding and active engagement regarding the development of the West Oxfordshire Locality Place based plan.

The objectives of the communications and engagement plan therefore include:

- To identify key stakeholder groups and understand the specific communication needs of each group.
- Put arrangements in place for sharing information with key stakeholders and ensure all messaging is consistent
- To provide regular feedback to all interested parties via a variety of communication methods.
- Ensure there is an appropriate response to media enquiries and to identify and support key spokespeople to deliver the messages.
- To identify any communication risks and issues associated with the development and delivery of West Oxfordshire Primary Care Locality Plan.

4. Key Stakeholders

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 (although not an exhaustive list):

- Patients, public and carers within the West of Oxfordshire area
- Public & Patient Partnership West Oxfordshire
- Veterans
- Seldom heard groups in the West community
- Healthwatch (Oxon, Swindon & Gloucestershire)
- Carers Oxfordshire
- Oxfordshire Association of Care Providers (OACP)
- Chipping Norton Action Group
- Burford Town Council
- Carterton Town Council
- Witney Town Council
- Charlbury Town Council
- West Oxfordshire District Council and associated Councillors
- County Councillors for the area
- Local MP
- Community First Oxfordshire (Formerly ORCC)
- Oxfordshire Community & Voluntary Action (OCVA)
- Gypsy Traveller Advocate
- Oxford Council of Faiths

- Age UK Health and Social Care Panel Members
- Age UK Oxfordshire
- Oxfordshire MIND
- Restore
- Young Carers, Oxfordshire County Council (OCC)
- VOXY (Voice of Oxfordshire Youth), OCC
- Abingdon and Witney College
- Yellow Submarine
- My life my choice

5. Key Messages

The key messages to be used during the engagement:

- Explaining the need to develop sustainable primary care services against a backdrop of:
 - shortages in workforce and difficulty in recruiting staff contributes to problems of access for patients;
 - increasing demand as a result of patients requesting same-day access for urgent care, who are generally 'low-intensity patients' or 'low complexity patients'
 - increasing pressure in managing complex, frail, or elderly patients who require continuity and co-ordination of care, who are generally 'high-intensity patients' or 'high-complexity patients'
 - the need to update premises and other infrastructure.
 - a lack of investment to allow General practice to thrive
- There is a finite amount of money available for health services; we will need to make decisions, sometimes, difficult decisions about how and where services are provided.
- Explaining why practices in Witney and the surrounds working together could deliver improved service that will lead to more patients having their needs met.
- OCCG is leading positive changes to deliver sustainable primary care that is safe, efficient, value for money and offers an improved service and the most appropriate care for patients.
- An emphasis on the benefits both to patients/public and to clinician/GPs of new models of primary care that delivers sustainable, improved and enhanced primary care service to patients.
- How any new models of care might work differently (and what might be the same) for patients, staff and organisations involved
- Reassurance to patients that primary care services are the bedrock of NHS care and so any changes that might result from the new model will be ones that will ensure services are sustainable for the future.

5.1 Risks

It is important to consider and plan for any risks that may arise though the engagement with different audiences. These risks may include but are not limited to things such as:

- Unrealistic raising of expectations of how things might improve for patients/the local population
- The media promoting negative messages associated with old Deer Park Medical Centre
- Confusion among patients and public about what change will mean for them.
- Practice staff concerned that it may affect jobs
- Patients and/or staff losing confidence in primary care due to uncertainty of what is happening – particularly if there is negative media activity.

Clear and consistent messages will help to minimise some of these risks alongside continuous engagement with those stakeholders most closely affected.

6. Communication and Engagement Methods

A document will be developed explain the background and plan for the West Locality Place Based Plan and ways the public can get involved and feedback. A number of different communication and engagement methods will be used to reach patients and the public in West Oxfordshire:

6.1 Newsletters/websites and email communications

Practice newsletters will be an important communication tool for sharing information with patients about the engagement. For patients with an email address, this same information can be shared with them electronically. All information about the engagement will also be published on the practice and OCCG websites. *(To note, OCCG does not hold patient contact addresses so this will need to be done through the GP practices).*

6.2 Talking Health engagement website

OCCG has an area on their website for engaging the public called Talking Health. This is where surveys can be placed and space will be made available to hold information about this engagement and all relevant information can be hosted on this page.

For example this may include:



- **Frequently Asked Questions (FAQs)** – to ensure the facts are clear.
- **A questionnaire** – to gather views from patients



6.3 Social Media

Social media such as Twitter and Facebook is capable of reaching large and varied audiences very quickly e.g. OCCG has over 7,600 followers on Twitter. Using all social media sites reaches a great number of patients and community and voluntary organisations quickly.

6.4 Media communications

A press release will be issued at the start of the engagement to ensure local media provide coverage and help to raise awareness about the engagement and dates for events etc. It is suggested that

6.5 Open meetings

Two public events will take place at the beginning of November (1 & 8). These will be publicised widely and will be open to patients and the public. A follow-up meeting will be held in December 2017.

6.6 Posters

A poster advertising the engagement and ways to get involved will be distributed to practices. Posters will also advertise the public events.

7. Timeframe

The public engagement will run throughout the development and approval of the plan leading up to implementation. However an engagement report will be written in December following the engagement activity undertaken during September, October and November 2017.

8. Responsibilities

All actions in the communications and engagement plan will be managed and co-ordinated by the Head of Communications at OCCG. An action plan and timeline is available in Appendix A.

9. Analysis and reporting

A report will be produced describing the engagement activities, the responses received and how the feedback will be incorporated into the developing plan. This will be published in mid-December.

The following will be monitored and analysed:

- Quantitative and qualitative analysis of media coverage.
- Quantitative and qualitative analysis of social media coverage.
- Quantitative and qualitative analysis of the reach of communications materials via stakeholder networks and channels such as websites and newsletters.

| | Preparation | | | | | Public and stakeholder Engagement | | | | | | | | Report on engagement | |
|--------------------------------------|-------------|-------------|-------------|-------------|---|---|------------|------------|-------------------|-------------------|--------------------------|------------|------------|----------------------|--------------------|
| | w/c 4 Sept | w/c 11 Sept | w/c 18 Sept | w/c 25 Sept | w/c 2 Oct | w/c 9 Oct | w/c 16 Oct | w/c 23 Oct | w/c 30 Oct | w/c 6 Nov | w/c 13 Nov | w/c 20 Nov | w/c 27 Nov | w/c 4 Dec | w/c 11 Dec |
| Witney | | | | | | Send out invitations and advertising for events | | | Public Event 1/11 | | | | | | |
| Carterton | | | | | | Send out invitations and advertising for events | | | | Public Event 8/11 | | | | | |
| Wrap-up event | | | | | | | | | | | | | | Public Event tbc | |
| media: | | | | | | | | | | | | | | | |
| Press release | | | | | Draft | Send out press release announcing engagement | | | | | Provide updates to media | | | | |
| Other engagement activity: | | | | | | | | | | | | | | | |
| PPPWO engagement | | | | | develop plans with LFCs and Healthwatch | Continued engagement with PPPWO | | | | | | | | | |
| Attend meetings/events by invitation | | | | | | | | | | | | | | | |
| Report on Engagement | | | | | | | | | | | | | | | Draft and sign off |