

**DRAFT DOCUMENT**

# **PATIENT & PUBLIC INVOLVEMENT (PPI) STRATEGY DEVELOPMENT PROPOSAL**

## **1. Introduction**

***‘Patients are the most important people in the Health Service. It doesn’t always appear that way. Too many patients feel talked at rather than listened to. This has to change.’***

NHS Plan 2000

The NHS plan outlines the governments’ commitment to create a patient-centred NHS. The vision is to move away from outdated systems which place patients on the outside of decisions taken, and place patients, the public and communities firmly at the centre of decision making.

The Kennedy Report outlines that the involvement of patients and the public must be embedded in the structures of the NHS and permeate all aspects of healthcare. Section 11 of the Health and Social Care Act 2001 states that members of the community using health services should be involved and consulted on, ‘the planning and provision of services, the development and consideration of proposals for changes in the way those services are provided and decisions to be made by that body affecting the operation of those services’

- not just when a major change is proposed, but in ongoing service planning
- not just in the consideration of a proposal, but in the development of that proposal; and
- in decisions about general service delivery, not just major changes.

West Middlesex University Hospital NHS Trust, believes that supporting the involvement of patients and the public in planning, development and decision-making should form a core part of all our business.

The Trust also believes that in order to do that, our statement of proposed aims, scope and timescales, methodology and communication mechanisms are shared as far as possible with all health and social care partners operating within the local health economy. The Trust will show its commitment and support to the involvement of patients and the public by producing and adhering to a statement of principles, objectives and mechanisms, a local strategy, and

Where the term ‘patient’ is used it is representing the wider groups of service users, carers, the general public and voluntary sector groups.

## **2. Proposed Aims**

The West Middlesex University Hospital aims to:

- **Ensure patient and public involvement becomes part of everyday practice**
- **Ensure patients are central to the organisations core activities**
- **Ensure patients have more say in their own care**

### 3. Methodology

We are going to develop a way of working across the Trust which has a straightforward 4-step approach.

What we're going to do	How we're going to do it
<p><b>Step 1 – Gather Information from patients about how we deliver services</b></p> <p>We will collect information from a variety of sources to develop a clear focused strategy. We will be defining and launching the PPI strategy by holding a workshop at the hospital on 15<sup>th</sup> December 2004 to help us carry out a baseline assessment of our current PPI activity.</p>	<p>We will use the information already provided though patient surveys, complaints, PALS, patient satisfaction questionnaires, audit, research, Patient Forum reports and information provided by other methods.</p> <p>We will seek information from all communities including organisations representing people from black and other ethnic minority groups and people who find it difficult to use health services.</p>
<p><b>Step 2 – Share Information with patients</b></p> <p>Without clear, relevant and accessible information involvement will be limited. We will therefore keep you informed about</p> <ul style="list-style-type: none"> <li>• What is happening</li> <li>• Proposed changes</li> <li>• Issues that have arisen and were not expected</li> </ul>	<p>We will provide information in a variety of ways from written documents to workshop presentations, from plain language summaries of lengthy complex documents to visits to local groups. We will use local media, i.e. newspapers and television, e-mail, newsletters, notice boards and meetings.</p>
<p><b>Step 3 – Develop plans with patients</b></p> <p>Talk with patients and carers, listen to what they have to say, use their experiences in the formation of plans and be willing to make changes to plans and proposals as a result of what we have learnt.</p>	<p>We will encourage user representation in all day to day processes at both an organisational and clinical specialty level such as service planning, steering, projects and working groups. We will use the skills and experience of patients in developing staff training and awareness sessions and we will provide support and assistance to user representatives as they find their feet working alongside Trust staff.</p>
<p><b>Step 4 – Ask patients for their response to plans</b></p> <p>As an outcome of the steps detailed above, and before a final decision is made or policy adopted, there will be an appropriate period of time dedicated to sharing the proposal and listening to options and feedback. Views and opinions received during this time (which we will call consultation) will inform the final decision making process.</p>	<p>We will include clear proposals in plain language with a timetable of events and clear statements explaining any limitations of the consultation (for example, where it is not possible to change an outcome due to national policy or legal requirements). We will make sure the views and opinions expressed during the consultation, the final decision and the reasons for it are shared in line with Step 2 – sharing information.</p>

It is proposed that this 4-step approach will become the core or centre of patient and public involvement within the Trust. The amount of action taken will depend on whether we are doing something that will have little if any direct effect on patient services, like changing the way we write internal reports, or commencing a big project which will have an impact on large numbers of the community.

#### **4. How will patients get involved?**

A broad list of the work we are proposing to undertake over the next three years is detailed in the following Implementation Plan but the starting point will be the PPI workshop and the baseline assessment. Much of this is already underway. There will be many opportunities for people to get involved in a variety of ways.

#### **5. What is our outline plan?**

This is a list of actions that we intend to take over the next three years that will help the Trust show how it is trying to put patients at the heart of everything we do. Some of the actions are required by law, some are part of the government's NHS Modernisation Plan and the rest are ways we feel will improve how the hospital works with patients.

### **2004/05**

- Identify PPI leadership at all levels of the organisation.
- Produce a Joint PPI Strategy with our local Patient forum and other stakeholders and hold a workshop in December 2004.
- To build on the good work already underway with initiatives such as the Cardiology Discovery Interview initiative, the Death & Dying Group and the Stroke Group.
- Set up the groups and improve ways of working as described in the PPI Strategies.
- Start work on producing an up-to-date computer database of PPI activity across organisation.
- Undertake patient surveys set out in the NHS national programme of surveys; study the results and produce plans for improvement to the services provided.
- Work closely with Patient Forum, supporting it as it grows and provide training facilities and expertise.
- Work with other public sector organisations to establish the principles of the Local Compact, which is an agreement on the ways in which the public and voluntary and community sectors will work together for the benefit of the local community.
- Working with the PCT extend the Expert Patient Programme within the Trust.
- Participate in national PPI programmes, e.g. Patients Accelerating Change (which looks at the information provided to patients regarding their medication) and NHS Live (which is looking at producing a Hospital Electronic Library for Patients called HELP!).
- Put into practice a way of working which allows patients to receive copies of letters written about them by their doctors.
- Identify what PPI training is required for staff and users and plan training programmes to deliver this.
- Work closer with local voluntary and community groups in order to reach as many members of the public as possible.
- Work with other public sector organisations and voluntary and community groups to find ways to reach people who find it difficult to use health services, including black and other ethnic minority groups.

## **2005/06**

- Increasingly work towards ensuring that all lessons learnt from patients' experiences are incorporated into regular reports, service improvements and organisational control systems.
- Complete patient surveys, study the results and produce plans for improvement to the services provided.
- Integrate Expert Patient Programmes into agreed programmes of care.
- Work with Patient Forum to establish clear work programmes.
- Progress work on PPI database.
- Progress work on HELP! Hospital Electronic Library for Patients and the Public.
- Deliver PPI training programmes to staff and users.
- Plan and extend joint working with other public service organisations.
- Set up clinical specialty user groups across the organisation.
- Review Implementation Plan 2004 – 2007.

## **2006/07**

- Work to achieve greater equality and representation in involvement so that all sections of the community are included.
- PPI Database fully functional providing accurate and timely information on PPI activities.
- HELP! Hospital Electronic Library for Patients and the Public fully functional providing clinical information and links to other providers of information.
- Be able to show how lessons learnt through patient, public and carer involvement have improved services and how the improvements have been embedded into the delivery of those services.
- Continuation of programme of formal public consultation in support of Trust 2010.
- Undertake evaluation of PPI work over previous three years and commence work on producing PPI implementation plan for 2007 – 2010.

The yearly actions are not set in stone and may be fast-forwarded, delayed, added to or deleted should new legislation, government or local targets be required of the Trust.

## **6. Conclusion**

We know that there are pockets of good practice across the Trust in terms of patient and public involvement. By holding this workshop we will showcase some of that good work that has already been achieved and define a mechanism and structure for PPI involvement through which we will be able to identify and achieve clear priorities for service improvement.