

Urgent Care Programme

Out of hours (OOH) GP services communications and engagement plan

A conversation with local stakeholders, interested parties and service users



Introduction

NHS Vale of York Clinical Commissioning Group (CCG) is exploring the opportunity to commission an integrated Out of Hours (OOH) Urgent Care Service. This new approach will provide professional health advice, diagnosis and treatment without patients needing to attend A&E services in a hospital.

Remaining true to its engagement promise – '**no decision about me**, **without me**', it is important that the CCG works closely with patients, the public, partners, and other stakeholders to develop and shape services.

The following plan will ensure the CCG engages and involves the local community as widely as possible.



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The CCG's duty to involve

Due to the very nature of Out of Hours care, the service is accessed by a wide range of people. The views, opinions and experiences of Out of Hours Care service users / patients have been captured by the CCG in various formats in recent months. Where relevant, this activity will be included in the final outcomes from this plan, providing the baseline for decision making.

Satisfying the CCG's duty to involve patients and the public in its decision making processes*, this plan supports and complements the overall strategic vision of the CCG, its clear and credible plan and associated communications and engagement and equality strategies and impact assessments.

This communications and engagement plan is not fixed – it is designed to be interchangeable to fit with any micro, meso or macro influences that may occur throughout its course.

* section 242 of the NHS Act 2012

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Communication and engagement objectives

Underpin the CCG's value driven commitment engage, involve and communicate with courage, empathy, equality, innovation, integrity, measurement, prioritisation, quality and respect, providing the local community with opportunities to have their say about out of hours GP services in the Vale of York.

Be transparent and provide clarity at all times through two-way, open and honest conversations with local people and patients.

Provide robust qualitative and quantitative data that will assist in development of innovation, improvement and commissioning plans that will ensure local people have access to the right care, in the right place and at the best time.

Engage the right audiences and deliver clear communication messages.

Collate important feedback and opinions for analysis and evaluation; which can be used to help shape the CCG's decisions



trategic communication messages

rovide clear messages about what urgent care / OOH GP services are and are not:

OH GP services and A&E are not an alternative to a GP appointment.

hen a condition **does not** require immediate attention, wait for an appointment with a GP or go to a narmacist

OH GP Services and A&E are not an extension of the usual service provided at local practices.

any pharmacies are open until midnight (is this correct in Vale of York please?)

rgent care/ A&E / OOH GP services **are** for patients with a sudden illness or injury that cannot wait to e treated by a GP or pharmacy or managed at home.

rgent care OOH GP services **are** for illnesses and injuries that are not considered to be a 999 mergency

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Strategic communication messages

The CCG has a responsibly explore; openly and transparently, the quality and suitability of nealthcare services and aims to secure the best value and benefit for the local population, ensuring he effective planning, buying, monitoring and evaluation of healthcare services that are in line with public regulations and best practice.

The opinions and needs of the community are central to any decisions that are made around how ocal healthcare services are delivered. This is why the CCG wants to talk to as many local people as possible and understand the public's view of local OOH GP services.

The CCG is focusing on the services that are critical to the achievement of local strategic aims and objectives and will be gaining views from the public to inform the way future community services are bought (commissioned).

mproving the patient experience when using urgent care services is one of the main drivers for CCG, such as reducing waiting times and the need for patients to be redirected to other services.



Strategic communication messages

There will be a clear and open dialogue with stakeholders and members of the community.

This is key to success in delivering services that will provide the best outcomes and services for people, amilies and communities.

Central to the work around OOH GP services are the strong relationships that the CCG has with local beople, partners and healthcare providers. That is why it is important that the CCG involves everyone; giving them opportunity to be part of the conversation at every stage in its work.

The CCG needs to know what 'good' out of hours GP services looks like, i.e. what meets their needs.

This is an appropriate time to change as the current contract expires soon.

The views and opinions of stakeholders will be used to develop a specification that will be used to secure a nealthcare service provider for OOH GP services.

The CCG will be publishing the feedback it collects from the people who give their views and opinions.



trategic communication messages

rgent care / OOH GP services have shorter waiting times than if you were to attend A&E

is important to reduce the pressure on A&E departments by encouraging patients with minor juries and illnesses to use other ways to treat or care for these.

&E doctors can dedicate their time to treating patients with serious health needs



SELF CARE AND STAY WELL

Strategic communication messages

Provide messages around self care that will enhance and support other work around winter pressures and on-going service improvement schemes, campaign work and communications in 2014.



Are you or have you been

suffering from diarrhoea and/or

vomiting in the last 48 hours?



If you have, please do not go to A&E

By doing so you will pass the virus onto staff and other patients.



Return Home

Drink plenty of water to avoid dehydration and let the illness run its course - usually three days.



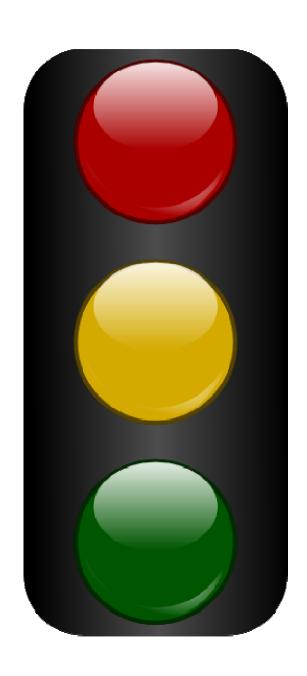
Norovirus is unpleasant but rarely serious.
If you are worried call NHS 111

For more information visit www.valeofyorkccg.nhs.uk



Strategic communication messages

Provide messages around admission / attendance avoidance that enhance and support other work and messages



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Strategic communication messages

Develop materials that can help the public make an informed decision about the need to call OOH GP Services and link with messages around admission / attendance avoidance and self care.

i.e. a traffic light decision making tool as suggested by Dr Phillip

(NY CCG comms leads do not seem interested in being part of developing materior a wider North Yorkshire message. Perhaps the wider involvement could be encouraged by linking directly with GP leads and Project Managers instead?)



Reputation management

Carrying out this engagement exercise will:

- Prevent any risk of intervention from NHS England / Area Team for not upholding section 242 of the NHS Act
- Encourage support from stakeholders (being open and transparent)
- Avoid local resistance, lobbying, adverse media interest and activity through digital / social media platforms
- Uphold the CCG values, engagement promise and mission
- Help towards creating a solution that local patients, service users and other stakeholders have helped to shape decision making and can feel part of.



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Organisation/group	Stake in project	Engagement/communication approaches			
CYC, NYCC, East Riding councils as well as Selby, Pickering and Pocklington town councils	Councillors and cabinet members are interested parties as are council leaders	 Health and Wellbeing Scrutiny Committee updates Face-to-face meetings with interested members and officers 			
Healthwatch	Position statement to Healthwatch leads Councillors and cabinet members are interested parties as are council leaders	 Face-to-face meetings Email updates Position statements 			
MPs	As above	 Face-to-face meetings Written briefings 			
Current NHS providers of urgent care	The current provider of urgent care services need to be kept updated in order to inform affected members of staff.	 Face-to-face meetings Bulletin updates Close links with provider comms managers 			
Current provider	Need to know what the CCGs intentions are and why this engagement is taking place – position statement? Need to be included in messages of progress updates	 Face-to-face meetings Bulletin updates for onward cascade to staff 			
Yorkshire Ambulance Service (YAS)	Any conversation with the public about urgent care provision should be shared YAS – position statement?	 Bulletin updates Close links with provider comms managers 			





nisation/group	Stake in project	En	Engagement/communication approaches	
ent Care Board	This board will need to be kept informed of developments around the project.	۰	Urgent Care Board meetings	
bers of the public quent users of nt care services	We know that certain demographics use urgent care services more often than others, such as families with young children, people aged 18-24 (students) A&E as the first port of call for treatment.	•	Targeted engagement with these group using focus groups/interviev Visits to Sure Starts, two universities and local colleges Messages to Care Homes – D&V, Traffic Light System	
staff	CCG staff will need to understand the impact of the proposed changes on their own areas of work. They will also need to know about the main aspects of the project in order to relay accurate information to other stakeholders.	•	Messages on local university websites, engagement through Team meetings Email updates	
ia	The media will expect timely information about the project at key milestones of delivery.	•	Briefings Press releases Invitations to events	
rella voluntary or organisations	York CVS, York Mind, Older Peoples Forum etc (see contact list)	•	Briefings Updates for inclusion in newsletters/websites	
Practice staff	GP Practices will need to be aware of any change to urgent care services in order to signpost patients appropriately	•	GP Practice newsletter	
ıl universities	Known as regular service users	•	Targeted engagement and messages in January and February 2014	
Patient reps p	The CCG's patient reps group will expect to be informed of progress. They will also be able to relay information to their own GP Practice group.	•	Updates at patient reps meetings	

Communications and engagement plan – high level detail

Task	Start date	Lead
Engagement to start	6 January	SH/ES
Online survey live and past OOH service user phone surveys	From 6 January	SH / ES
Urgent care / OOH service user face to face surveys	w/c 13 January (at least five nights)	SH / ES / CSU engagement support
Focus group with local parents of young children	Mid February	SH/ES/BC/AP/KM
Focus group with students, student support staff and student union reps	24 February	SH/ES/BC/AP/KM
York Healthwatch Assembly – briefing to members and staff. Bulletin.	21 February	SH / BC
Communication messages via bulletin One to one briefing to care homes (via Becky Allright?)	Throughout January and February	SH / ES / BA?
Messages to local community through council's resident newsletters, promoting self care, D&V, and encouraging views on services 'what does good look like?'	December, January and February	SH
SMS text service – tell your views by text	Jan and Feb	SH / ES
Media releases, twitter messages, online content	Dec, Jan and Feb.	SH
Evaluation report of findings	End of February?	SH/ES

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- Briefing papers and position statements
- General survey (hard copy and online) to understand user needs and 'what good looks like'
- Stakeholder letter(s)
- Web content CCG and partner sites
- Regular media releases / social media activity
- Articles and adverts in PPE newsletters.
- A feature in CCGs new supplement in York Press
- Posters in practices
- Development of traffic light system info leaflet that is easy to understand for patients, the public and target audiences.