

# Update on implementation of the PPI Strategy

Trust Board paper K

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Director of Communications and Marketing

## Executive Summary

### Context

In April 2015 the Trust Board approved a new Patient and Public Involvement (PPI) Strategy and implementation plan. This paper provides an update to the Trust Board on the implementation plan for Quarter 1.

### Questions

1. Is the Board assured that implementation of the PPI Strategy is on track for Quarter 1?

### Conclusion

1. Implementation is largely on track for the first Quarter with some slight slippage arising from a delay in recruiting to a Band 5 post to support the strategy.

### Input Sought

The Board are requested to comment on the actions taken to date and consider whether they are assured that the PPI strategy is being enacted.

# For Reference

Edit as appropriate:

1. The following **objectives** were considered when preparing this report:

Safe, high quality, patient centred healthcare	[Yes]
Effective, integrated emergency care	[Not applicable]
Consistently meeting national access standards	[Not applicable]
Integrated care in partnership with others	[Not applicable]
Enhanced delivery in research, innovation & ed'	[Not applicable]
A caring, professional, engaged workforce	[Not applicable]
Clinically sustainable services with excellent facilities	[Yes]
Financially sustainable NHS organisation	[Not applicable]
Enabled by excellent IM&T	[Not applicable]

2. This matter relates to the following **governance** initiatives:

Organisational Risk Register	[Yes]
Board Assurance Framework	[Not applicable]

3. Related **Patient and Public Involvement** actions taken, or to be taken: [Insert here]

The implementation plan explicitly develops the Trust's engagement with patients and the wider public. It was developed in collaboration with our Patient Partners.

4. Results of any **Equality Impact Assessment**, relating to this matter: [Insert here]

The implementation plan seeks to ensure that the Trust's PPI activity is inclusive and recognises the differing needs of our diverse population. For example, it sets out a developing programme for community engagement.

5. Scheduled date for the **next paper** on this topic: December 2015

6. Executive Summaries should not exceed **1 page**. [My paper does comply]

7. Papers should not exceed **7 pages**. [My paper does comply]

## **UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

**REPORT TO:** Trust Board

**REPORT BY:** Mark Wightman, Director of Communications and Marketing

**AUTHOR:** Karl Mayes, PPI and Membership Manager

**DATE:** 3 September 2015

**SUBJECT:** Update on implementation of the PPI Strategy

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### **1. Introduction**

**1.1** In April 2015 the Trust Board approved a new Patient and Public Involvement (PPI) Strategy. The strategy;

- Outlined the mechanisms by which the Trust communicates and engages with its stakeholders.
- Outlined the ways in which the Trust involves its patients and the wider community in its service development
- Set out the Trust's plans to achieve high quality stakeholder, patient and public involvement over the next 3 years.

**1.2** A three year implementation plan was approved alongside the strategy. This paper provides an update to the Trust board on this plan.

### **2. Update on the implementation plan**

**2.1** The implementation plan for year one is presented below with updates on each action for Quarter 1 of the financial year. A further update will be presented to Trust Board for Quarter 2 in due course.

## Update on PPI Strategy Implementation Plan (Year 1, Quarter 1)

Priority	Actions	Target date	Update
<b>Year 1: 2015 / 16</b>			
1. <b>CMG ownership of PPI</b>	<ul style="list-style-type: none"> <li>Standing agenda item on PPI at CMG Board meetings</li> <li>CMGs to nominate delegates to coordinate PPI at service level</li> </ul>	September 2015 September 2015	<ul style="list-style-type: none"> <li>CMGs have been asked to confirm that PPI is now a standing agenda item on CMG Boards and to nominate PPI leads at service level</li> </ul>
	<ul style="list-style-type: none"> <li>PPI performance reviewed at Confirm &amp; Challenge meetings</li> </ul>	September 2015	<ul style="list-style-type: none"> <li>TBC</li> </ul>
	<ul style="list-style-type: none"> <li>Develop training and support programme for CMGs</li> <li>Roll out to CMGs</li> </ul>	September 2015	<ul style="list-style-type: none"> <li>Training and support programme in development. Will be in place by the end of September 2015</li> </ul>
	<ul style="list-style-type: none"> <li>Review of KPIs in quarterly CMG (PIPEEAC) reporting template</li> </ul>	April 2015	<ul style="list-style-type: none"> <li>Complete</li> </ul>
	<ul style="list-style-type: none"> <li>Review of PPI section on Trust Board templates</li> <li></li> </ul>	July 2015	<ul style="list-style-type: none"> <li>TB Cover sheet recently updated.</li> </ul>
	<ul style="list-style-type: none"> <li>Patient Partner s sit on CMG Boards</li> </ul>	September 2015	<ul style="list-style-type: none"> <li>Most CMGs now have Patient Partner representation on their Boards. Forthcoming Patient Partner recruitment will encourage full compliance.</li> </ul>
2. <b>Developing the “Involvement into Action” process</b>	<ul style="list-style-type: none"> <li>Engage Listening in to Action team / Patient Partners &amp; develop co – design process and supporting materials</li> </ul>	September 2015	<ul style="list-style-type: none"> <li>The PPI &amp; Membership Manager has been working with the LiA team to develop “Involvement in to Action”. An initial “Listening Event” was held in July 2015 with a further event targeting CMG Heads of Operations to follow. Themes from these listening events will inform the development of a clear PPI process. Patient Partners will be involved in this development.</li> </ul>
	<ul style="list-style-type: none"> <li>Develop “train the trainer” programme for CMG PPI leads</li> </ul>	September 2015	
	<ul style="list-style-type: none"> <li>Roll out training to CMG PPI leads</li> </ul>	October 2015	
	<ul style="list-style-type: none"> <li>Recruit first cohort of Involvement in to Action teams</li> </ul>	February 2016	<ul style="list-style-type: none"> <li>TBC</li> </ul>

3.	<b>Patient Partners</b>	<ul style="list-style-type: none"> <li>Review and develop Patient Partner role outline</li> </ul>	July 2015	<ul style="list-style-type: none"> <li>Complete – role outlined reviewed by Patient Partners and PPI &amp; Membership Manager</li> </ul>
		<ul style="list-style-type: none"> <li>Develop branding and promote Patient Partner role internally / externally</li> </ul>	August 2015 / ongoing	<ul style="list-style-type: none"> <li>Branding developed and agreed. Internal promotion campaign planned for September to coincide with Patient Partner recruitment</li> </ul>
		<ul style="list-style-type: none"> <li>Agree recruitment / contract process for Patient Partners</li> </ul>	April 2015	<ul style="list-style-type: none"> <li>Complete – HR Recruitment have identified a clear process for future recruitment</li> </ul>
		<ul style="list-style-type: none"> <li>Develop induction And training programme for Patient Partners</li> </ul>	July 2015	<ul style="list-style-type: none"> <li>Induction programme outline has been developed with support from Organisational Development. To commence once new Patient partners are recruited.</li> </ul>
		<ul style="list-style-type: none"> <li>Recruit to bring Patient Partner group to 20 members</li> </ul>	December 2015	<ul style="list-style-type: none"> <li>Recruitment to commence in September 2015</li> </ul>
4.	<b>Establish Patient Partnership Forum</b>	<ul style="list-style-type: none"> <li>Establish and promote quarterly Forum meetings</li> </ul>	April 2015 / ongoing	<ul style="list-style-type: none"> <li>Complete - Programme of quarterly Engagement Forum meetings has been established. First meeting was held on 13/08/15</li> </ul>
		<ul style="list-style-type: none"> <li>Patient Partner group to contribute agenda item for each meeting</li> </ul>	April 2015 / ongoing	<ul style="list-style-type: none"> <li>Complete – Patient Partners now contribute agenda item for each Engagement Forum</li> </ul>
		<ul style="list-style-type: none"> <li>Review of Patient Partner meetings to focus on development and support / administration</li> </ul>	June 2015	<ul style="list-style-type: none"> <li>Complete – Currently negotiating frequency of Patient Partner meetings</li> </ul>
5.	<b>Create E-Advisor role</b>	<ul style="list-style-type: none"> <li>Develop role and “rules of engagement” for E-Advisors</li> </ul>	October 2015	<ul style="list-style-type: none"> <li>TBC</li> </ul>
		<ul style="list-style-type: none"> <li>Brand and promote the role (internally to CMGs + externally)</li> </ul>	January 2016 / ongoing	<ul style="list-style-type: none"> <li>TBC</li> <li></li> </ul>
		<ul style="list-style-type: none"> <li>Recruit &gt;50 E-Advisors</li> </ul>	April 2016	<ul style="list-style-type: none"> <li>TBC</li> </ul>
6.	<b>Community Engagement</b>	<ul style="list-style-type: none"> <li>Develop / maintain community stakeholder database</li> <li>Establish programme of “outreach” community engagement</li> </ul>	March 2015 / ongoing September 2015 / ongoing	<ul style="list-style-type: none"> <li>Community database is being updated on a rolling basis.</li> <li>Ongoing – Community engagement has been focused on Maternity Services (Better Care Together pre-engagement) recently. Forthcoming Engagement with</li> </ul>

				Somali community.
		<ul style="list-style-type: none"> <li>• Three Trust Board meetings to be held in community venues</li> </ul>	March 2016	<ul style="list-style-type: none"> <li>• Early discussion with UHL Chairman. Community Board meetings to commence in 2016.</li> </ul>
		<ul style="list-style-type: none"> <li>• Trial of "Mini surgery" events with community groups (minimum of four)</li> </ul>	March 2016	<ul style="list-style-type: none"> <li>• TBC</li> </ul>
		<ul style="list-style-type: none"> <li>• Establish partnerships with PPGs (minimum four engagement opportunities)</li> </ul>	March 2016	<ul style="list-style-type: none"> <li>• TBC</li> </ul>
		<ul style="list-style-type: none"> <li>• Develop standards / toolkit for Community engagement</li> </ul>	March 2016	<ul style="list-style-type: none"> <li>• TBC</li> </ul>

## **4. Summary**

**4.1** Reviewing the implementation plan for Quarter 1, actions are largely on track. The focus for Quarter 2 will be securing CMG support for the strategy. Patient Partner recruitment will begin in earnest during September 2015 with an aspiration to recruit eight new Patient Partners. A second Listening event will inform the development of an “Involvement in to Action” process which will joint the growing “family” of Listening in to Action initiatives. Patient Partners will be involved in this process.

**4.2** The PPI and Membership Manager is working with HR to expedite the recruitment of a Band 5 post to support implementation of the PPI Strategy. The new post holder will also support engagement with the Trust’s public membership and wider stakeholders.

**4.3** A recent Trust Board thinking session on how we listen and respond to patient and public feedback brought a number of patient representative groups together with UHL staff. Engagement during the session was positive and has been useful in building support for the strategy and its aims.

**Karl Mayes**  
**PPI & Membership Manager**  
**August 2015**