

Evaluation of Bradford Peoples Board - Phase II

**Notes from workshop held on the 9th February 2018 at
Bradford Talking Media**

Leeds Beckett University

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1. Overview

This workshop follows on from the original evaluation of Bradford Peoples Board. Leeds Beckett University were asked to provide the Bradford Peoples Board with a structured workshop which would allow them to consider:

The key findings from the original evaluation with particular reference to two of the areas that the evaluation identified which were:

- For the BPB to consider its relationship with other engagement structures in Bradford
- For the BPB to work together to consider what actions it should take in order to connect more powerfully with strategic priorities in the district

2. Methodology

The Leeds Beckett team interviewed members of the Peoples Board and other key stakeholders to inform a development day which was held on the 9th February and facilitated by the Leeds Beckett team.

The Accountable Officer for Bradford CCGs and the Associate Director for Corporate Affairs attended the last part of the development day to hear presentations from Board members and to discuss with them plans going forward.

The following appendices are attached.

- Development Day programme attached as appendix 1
- Summary of previous evaluation report - Conclusion and recommendations Appendix 2
- Summary of interviews - appendix 3
- List of attendees and apologies - Appendix 4

3. Report on the development day

Relationships with other voice organisations.

Peoples Board members identified three priority areas for developing relationships with other voice organisations in Bradford.

- A. Using raw data**
- B. Healthwatch Bradford**
- C. Patient Participation Groups and Patient Network**

A. Raw Data (NHS Choices, Care Opinion etc)

There are different ways of working with raw data, with key considerations including, the amount of potential information, and avoiding duplication with others that already use it. The first step is to understand what is already being used by the CCG and other key organisations, for what purpose and the extent to which this is available to the Peoples Board.

The Peoples Board will need to be provided with this data in a way that is accessible and consistent with that provided to the CCG and others. In order for this to be systematic and consistent it would need to be allocated as a part of someone's role.

It is important to distinguish between the digital processing of existing data and the gathering of digital data. There may be a role in both but there is potential to get bogged down in the sheer volume of information. For this reason it is necessary to be clear about the purpose and scope of raw data.

The Peoples Board has a role in digital data gathering as part of their wider communications with groups and members of the public in Bradford. With the establishment of an online presence including a section in the CCG website, a twitter account and facebook, there will be data coming in to the Peoples Board directly. It is here there is a need to analyse this alongside the other information to contribute to priority setting and activity planning.

Next steps

For the Board to work with relevant staff at the CCG to understand the story that the data gathered by the CCG tells of how the local health systems responds to health and wellbeing needs in the district.

We suggest that it is important that Board steps back to considers whether the picture that is created by this data creates a sufficiently complete picture of the impact and focus of the health system in the district.

Key success criteria over the next year

To have identified 3 - 6 issues from the raw data and made recommendations for action based on that.

B. Healthwatch Bradford

Some consider that The Peoples Board and Healthwatch Bradford have the greatest potential to duplicate activity and to maximise the effectiveness of public engagement. While there was some discussion about the relative merits of having members on each others boards, it is more important to share some thinking about priority areas of work, opportunities for complementary activity and strengthening influence by working in a complementary way.

The first step is for the Board to be clear about the role of Healthwatch, their aspirations as there have been changes at both board and executive level and why it would be to their advantage to develop a closer relationship with the Peoples Board.

Next steps

- Produce a short discussion paper - Why work more closely with Healthwatch Bradford?
- Bradford Peoples Board officers to meet with the new Chief Officer and Chair of Healthwatch Bradford to share and understand respective roles, priorities and approaches.

Key success criteria

- To have identified at least 1 opportunity for joint working on an issue
- An agreed information sharing and updating approach (joint working protocol)

C. Patient Participation Groups

The Patient Participation Groups and the Patient Network are the primary constituency of the Peoples Board. The Board has its origins in these groups and remain well connected. There is an opportunity to strengthen the relationships by ensuring that all People's Board members are members of their PPG and that there is a more significant presence at the Patient Network meetings. Firstly this requires a clarity of purpose for attendance at the groups and clarity around the role of the PB member. Key areas for development include how to ensure inclusivity, how to be more systematic about collecting and using information in a timely manner.

There is an opportunity to link this area of work into activity relating to both Healthwatch and the more effective and efficient use of raw data.

Next steps

- Clarify role of attendance
- Produce short paper for discussion at PN
- Create programme of work linked to CCG consultation Programme (need appropriate timescales)

Key success criteria

- Link key issues from PN & PPGs to PB priorities
- Raise profile of PPGs relationship with PB

4. Priority Areas of work

Three potential priority areas of work were identified;

- **Mental Health - Implementation plan**
- **Children and Young People**
- **Prevention / Early intervention**

1. Mental Health Implementation Plan

Having had a high profile involvement in the development and launch of the Bradford mental Health strategy, the Peoples Board felt they had not had the opportunity for an ongoing involvement. A first step in this process would be to receive an update on the mental Health implementation plan and a discussion regarding the specific role that the Peoples Board can play. Possibilities include facilitating closer links with the voluntary sector, ensuring the inclusion of a health inequalities dimension and information sharing.

Reflections

Need to be clear about the role of the peoples board and that they are not trying to take on everyones job. Is it about being the interface between the clinical and VCS? If this is the case how does the Peoples Board balance it's role in relation to the VCS and that of engaging individuals.

2. Children and Young People

The Peoples Board has an aspiration to engage more effectively with young people but needs to decide the most effective way to do this. Options include establishing a satellite group of young people or involving 1 or 2 representatives on the Board. Developing relationships with the existing young peoples groups and forums across the city. Engaging with these groups is one way of capturing the issues and concerns of young people across the city.

At a recent Learning and Innovation event a number of statutory organisations including the CCG and Local Authority made pledges regarding action for young people. The Peoples Board feel they could have a role in holding those organisations to account for the action they take in relation to those pledges.

Young Carers were identified as a priority group that could provide a focus for the Peoples Board to work on. Developing clarity about their issues through capturing their voice and presenting this to the CCG.

Reflections

This might not be about adding people but looking at different ways of working for example increasing the social media presence and connections back into existing groups.

It is helpful to have a focus, for example on Young Carers.

3. Prevention and Early Intervention

There is potential for the Peoples Board to be involved in the prevention and early intervention agenda - this is a huge agenda and one that CCGs often struggle with as there are so many dimensions to it. This requires a high level of collaboration and engagement with other networks e.g. PPGs and Healthwatch. The added value of the Peoples Board is that they are making the links between communities and the planning groups. The first step would be to do some investigative work to identify peoples key issues and then present some ideas as a strategy to the CCG.

Reflections

There is a lack of clarity here about how to address the prevention and early intervention agenda. The CCGs primary focus is about investing in sickness services and they are unclear about what the NHS's role should be in this agenda.

4. Final Reflections

The Peoples Board also discussed how they could take a more systematic approach to their work with regard to the way they investigate specific topics.

The Board recognised that it would be helpful to them and to CCG officers if their methodology ('protocol') was clearer. There was not sufficient time to consider this in the workshop.

There was a recognition that there should be a number of elements to such a protocol:

- How information is presented
- How the Board interrogates the topic
- How their discussion is written up and shared

The Leeds Beckett team agreed to share the Healthwatch Investigations report they had developed with Healthwatch Leeds - this is available here:

http://www.leedsbeckett.ac.uk/files/HW_Investigations_briefing.pdf

Appendix One

Programme - Bradford Peoples Board Workshop - 9th February 2018

Time	Topic	Content	Who
9.30	Welcome and purpose of day		Emma Stafford
9.45	How we got here - evaluation summary, and responses to telephone interviews	Summary of evaluation and recommendations and overview on comments from telephone interviews and feedback from CCG/BPB meeting last year	Mark Gamsu and Jennie Chapman
10.15	Summary of Priorities for Bradford Peoples Board - from questionnaire 2018/9	Presentation	Jennie Chapman
10.30	Where does the Bradford Peoples Board Fit in Bradford?	Group work - what is the role of the following: City Wide PPG network Healthwatch Accountable Care Partnership Overview and Scrutiny Other forums Trust Governors Engaging People	Group Work followed by plenary to create mind map
12.00	Role of Bradford Peoples Board	Discussion - role of Bradford Peoples Board	Plenary Discussion
12.30	Lunch		
13.00	Review Priorities	In the light of the discussion in the morning agree 3 priority areas for Bradford Peoples Board to focus on over 2018	Plenary Discussion
13.45	Planning	Work on priority areas - why has this been chosen, how will BPB tackle these, what actions are required and by whom, what resources are required, who else needs to be involved,	Small Group work
14.45	Break		
15.00	Presentations to Helen Hirst	4 short presentations 1 on role of Bradford Peoples board and 3 on topic areas	Presentations by chair and 3 groups
16.00	End		

Appendix Two

Recommendations for Action (from the report Bringing Public Voice into Health Commissioning - Final Evaluation report Bradford Peoples Board, July 2017, Leeds Beckett University)

For the Peoples Board

Procedures and Processes

We suggest that the Board continues to build on the good work it has done to date by formalising further how it works so that the CCGs, speakers and Board members are clear about their responsibilities. This includes:

- Structure of Meetings
- Role of Presenters
- Role of non-board members who are present in a supporting function
- Capturing action points - emerging from discussions
- How actions arising from discussions are fed back - these needs to be much more specific than it is currently.

Narrative and accountability

We suggest that the Board considers how it can develop stronger links with external stakeholders and what issues might be most likely to bring these stakeholders to engage with them.

We have suggested in the report that a shared narrative developed with key external citizen stakeholders such as the Healthwatch Board, NHS Trust Governors and the Health Overview and Scrutiny Committee might helpful here.

Roles

The Peoples Board needs to consider how it maintains a balance between its collective approach and the specific roles of individual members - for example it could consider planning its forward agenda around some of these individual responsibilities.

For the CCGs

If the People Board is to continue to develop and bring further added value the CCGs need to maintain specialist engagement and administrative support and ensure that there is more consistent support given to external communications such as reporting on Peoples Board activity on the website.

Further, the CCGs need to do more to train their staff - so that they understand how they can make best use of the Peoples Board.

The CCGs needs to consider how they can be accountable for the actions they take following discussions at the Peoples Board. CCG staff need to ensure that they feedback in a systematic and consistent manner with regard to what they have done with the issues that were raised with them. A general feedback 'it was helpful to talk to the board' does not help the Peoples Board assess how it could improve or promote its effectiveness and purpose to stakeholders.

One of the actions that the CCGs could consider is to more formally incorporate a record of discussion with the Peoples Board into the front sheet of all reports to Governing Body and

to give a specific role to lay members to test and challenge Peoples Board involvement there.

We suggest that in order to maintain the developmental momentum of the Peoples Board that some form of continued independent formative evaluation would be helpful.

Finally, the CCGs need to consider how they will bring Airedale, Wharfedale and Craven CCG on board. It is important to do this in a systematic way, using the learning from the establishment of the Peoples Board to date.

Appendix Three

Summary of key points from interviews with Bradford Peoples Board Members and key Stakeholders prior to Workshop

Leeds Beckett conducted 14 interviews as follows:

7 with Peoples Board Members
4 with CCG officers/lay members
2 with external partners

Successes?

- Prescribing
- Mental Health Strategy (& launch)
- Gluten Free Prescribing
- Maintained a form and identity becoming more established e.g. with e-mail accounts etc
- Maintained presence and successes in key events,
- Achieved objectives and activities relating to internal functioning
- A recognised presence at programme boards
- Maintained levels of activity
- Valuable contribution to CCG work
- Input with Quip
- Difficult to say

Challenges?

- Peoples Board still lacks clarity of purpose
- Uneven workloads – differences in contribution (both in and outside of meetings)
- Not taken seriously enough or supported enough by CCG
- Spread too thinly - need to prioritise and focus - about 3 key issues
- Mixed view of work with programme boards - mostly unclear what this has achieved
- Not currently using key strength which is the collective voice
- Not using peoples strengths and experiences effectively
- Still not engaged at an early enough stage in the commissioning process or throughout the process
- Relationship with AWC

Priorities going forward?

- Mental Health Implementation plan
- Planned Care Implementation
- Accountable Care Partnerships
- Integration of Health and Social Care
- Developing external relationships (VCS, Healthwatch Bradford)
- Strengthening relationship with the PPG network
- Internal processes:
 - Clarify purpose and priorities and communicate these clearly
 - AWC relationship – to be defined / negotiated
 - Programme Board attachment ‘vs’ collective contribution
 - Recruitment and recommitment – Inclusive methods method

Appendix Four

List of attendees at development day

Bradford Peoples Board

Emma Stafford
Rubina Burhan
Aisha Asurtee
Abdul Ismail
Huma Malik
Sam Samociuk
Adam Deacon
Karol Wyszynski
Mohammed Mahboob
Humera Khan

Bradford CCGs

Jess Drinkwater
Victoria Simmons
Arron Dulay
Fiona Jeffreys
Helen Hurst

Bradford Talking Media

Sue Crow

Apologies

Stella Hall
Dave Gorol