Empowering Engagement Focus Projects
Extended Access - Lauren Pennington

NHS
North East Hampshire and Farnham Clinical Commissioning Group

Project introduction

The CCG is required to extend access to primary care services for patients by September 2017. On weekday evenings access must be available from 6.30-8pm. At the weekend access must be available according to local need. This local need hasn't yet been determined. Patient engagement is essential in order to determine local need.

Project description

There are a lot of assumptions made about local need with little hard evidence supporting these assumptions. In order to commission a value for money and relevant service we needed to understand "local need" better.

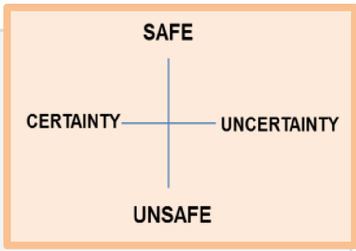
The purpose of this focus project is to determine **what role patient engagement should have in determining local need**. I also wanted to learn about what methods could be used to engage with patients in a modern, fresh way. This is particularly important for this project as it is likely to be the younger and working age patients that will benefit most from the change in service.

My two **project goals** are:

1. To determine what role patient engagement should have in determining local need
2. To consider what methods could be used to engage with patients in a modern and fresh way that is appropriate to their age group and lifestyle

Useful reference:

Barry Mason: Human Systems



Key findings

A helpful suggestion from one of the workshops was to review all of the current sources of patient opinion before deciding what engagement is required. **We are looking to identify what we *do* know before asking "ok, so what *don't* we know".** It will be the what don't we know that we then seek to discover through patient engagement.

This was the first step in my focus project. We used one locality as a prototype; gathering all of the data we held about patient opinion to create a story. This included a CCG survey (102 responses from Fleet residents), a locality survey (2600 responses from Fleet residents), nhs.uk feedback, the GP patient survey results, A&E and Out of Hours activity data.

In the prototype locality we identified that it was commuters and parents with young children that didn't appear to have yet been engaged with thoroughly. Once identified this meant that we could plan engagement activities appropriate to them.

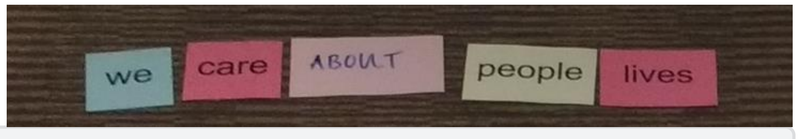
Concluding thoughts

I really liked the logic of firstly identifying what we *do* know before asking what we *don't* know. I found that this approach really worked. It has meant that on a locality basis we have been able to identify key population groups whose voice has not yet been heard. Our engagement plan for the project can now be focussed on tapping into these groups effectively. For the first time I feel confident that the engagement we are going to undertake is relevant and will truly guide our commissioning decisions. I will use this as a blueprint for future engagement projects

With thanks …

To my fellow empowering engagement programme alumni and our inspiring coach. Together we are like these lightbulbs – inspiring and encouraging each other to make a difference

Patient engagement is a complex subject. Perhaps that's why in the NHS we struggle to do it well consistently. This course has helped me to understand more about why it is so complex and what steps I can take to spread a culture of meaningful patient engagement throughout the organisation



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