

# Engaging patients and the public in commissioning a new model of care for community and integrated care services

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## Introduction

Community and integrated care service provision (out of hospital) across the North East Hampshire & Farnham CCG geography is complex, with multiple providers working to deliver against multiple specifications. As part of the procurement cycle, the community service contracts are due for renewal and a refresh of service specifications is required.

Since 2015, the CCG has been a Vanguard organisation working to transform local services and deliver new models of out of hospital care, primarily based on a locality approach. Several pilots have been funded as part of the Vanguard and Integrated Care Teams have been a key part of this model. Coming to the end of Vanguard funding coincides with the end of the current community services contracts which gives the CCG the opportunity to align the two and develop a sustainable model for integrated care and community services with and for local people.

## Project goals

1. To engage patients and the public throughout the commissioning cycle
2. To influence CCG colleagues to have patients and the public at the forefront of our thinking in our day to day work



## Evaluation

The evaluation plan is still to be developed but will include evaluation (questionnaires) after engagement activities and I want to evidence at the end of the full procurement that we have engaged with patients and the public throughout the commissioning cycle

### Monitor and learn

To increase the use of patient experience data in contract management of community services and influence providers to engage with service users to improve their services. I am going to regularly participate in Clinical Quality Review Meetings and use feedback on current services such as patient experience and quality data to inform contract management.

## Credits

Many thanks to Jessie Cunnett, Sue Newell and Steve Manley for their expertise and guidance. Also thanks to my fellow empowering engagement programme colleagues for their support and challenge

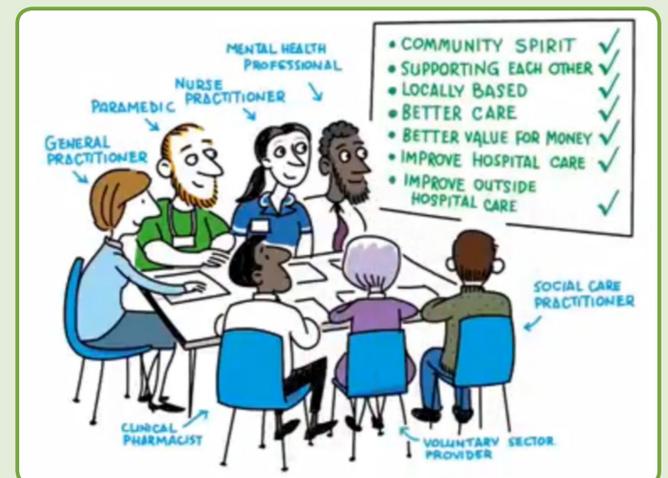
## Key findings

My key learning points from taking part in this programme so far are:

- Working with colleagues from other directorates has enabled me to make the links and reduce silo working within the CCG
  - I have effectively used the theory on transactional analysis (Parent, Adult, Child - Eric Berne) as part of a difficult conversation with system partners
  - The community services re-procurement is an extensive piece of work requiring a team effort but what can I contribute? My focus will be on integrated care teams
- It has been a challenge to find the time to do this project doing a busy job. Knowing how energised I've felt during the programme days has reconfirmed how important this is to me. I'm trying to hold on to this and prioritise my work doing more of what is important (end user perspective) and less of what is 'urgent'

### Analyse and plan

To take learning from the empowering engagement programme to influence CCG colleagues to start thinking differently about how we commission a sustainable model for integrated care and community services with and for local people. In order to achieve this I am planning a workshop for CCG colleagues and partners to get people thinking differently based on reports like NESTA's People Powered Health and the New NHS Alliance's Health Creation. The aim is to move from passive (done to) to pro-active management (active engagement) with patients.



## Conclusion

Patient and public engagement is important to me because it helps me to improve all aspects of health and care giving people the power to live healthier lives. I will use my learning from this programme to make it business as usual for me and my team and influence CCG colleagues to do the same.

## References

- In Health Associates - The engagement cycle
- NESTA - People Powered Health
- New NHS Alliance - A Manifesto For Health Creation
- Eric Berne - transactional analysis

### Design and improve

To engage service users in the design and development of the integrated care team service specification as part of the community services re-procurement.  
Proposed engagement methods:

- Comment on the service specification through a focus/discussion group
- Help develop the criteria for the tendering and bidding process - specifically around the KPIs that relate to service quality - through a group discussion
- Involve 2/3 service users in the procurement panel appraising the bids