

{Smart Guides} to ENGAGEMENT

For better commissioning

## Practices and patient engagement

Part of the **Smart Guides to Engagement** series, this guide helps clinical commissioning groups (CCGs) engage in sustainable and useful ways with patient participation groups (PPGs) in a single general practice or linked together in networks across bigger geographical areas. These could be across CCG localities or the entire CCG.

Engaging with PPGs gives the CCG essential insight into its constituent practices, which are the gateways into healthcare for most local people. Having a close relationship with PPGs, therefore, opens up opportunities for the CCG to listen to patients where they are most likely to have the strongest interest in redesign of services and quality, innovation, productivity and prevention (QIPP) changes. PPGs routinely hear about patients' experiences and perspectives of services and about the health priorities of the local community. A smart CCG cannot do without this ear to the ground.

# Benefits of the PPG model to CCGs include:

- PPGs already collect practice-level patient insights and feedback on patients' experiences, needs and priorities, including those seldom heard or difficult to reach
- Their closeness to both practice and patient means easier access to the patient population
- They are a proven mechanism to gather evidence-based intelligence, often real time, on purchased services, whole care pathways and commissioning proposals
- As intermediaries with patients, working closely with GPs, they improve communication between PPG patients and CCGs
- They are already actively involved in analysing and evaluating patient insight data including annual GP patient surveys
- PPGs are a barometer of the local practice community.
  Many patients engaged with them are often the same people who are active in a wide range of other community groups and organisations
- Virtual PPGs are a mechanism to engage with the wide diversity of the patient population.

### What is a PPG?

There is no standard model for a PPG but typically they comprise a group of volunteers from the practice population meeting together regularly (monthly or quarterly) with the practice manager and one or more of the GPs or other clinicians from the practice. Their particular interest is the services the practice offers and how they could be improved and made more accessible to the practice population to improve the local community's health and make sure the patient experience is as good as it can be.

PPGs aren't forums for complaints, moaners or whingers pursuing individual agendas and special interests. They should be about liaison between patients and the practice for mutual benefit. Patients who need to raise individual issues can do so in other ways.

Over 50% of general practices in England now have a PPG and groups are also starting to develop in dental practices. Group members should reflect the practice population as much as possible to ensure a range of interests, backgrounds and perspectives are represented. The patient participation directed enhanced service (DES) gives advice about how patient groups can be widened to better reflect and represent the practice's population. The CCG and its practices should see active patients as potential patient leaders for change and value their input as patient involvement advisers and critical friends.

Virtual PPGs are now developing alongside real groups, creating dialogue with patients through email networks and social media. This can greatly boost the uptake of patient surveys and targeting of particular groups in the patient population – young families for instance. Many practice websites now have a designated section about what their PPG is doing, how to get involved with it and the results of the patient surveys it has helped the practice undertake.

### What do PPGs do?

Successful practices and active PPGs go hand in hand by:

- Contributing to the continuous improvement of services, ensuring practices are more responsive to the needs and wishes of patients
- Fostering improved communication between the practice and its patients
- Helping patients to take more responsibility for their health
- Providing practical support and help to implement change
- Being varied to suit local needs, with each group determining its own activities according to the needs of the community and the practice
- Building a relationship between the practice and its patients that breaks down barriers and shares information.

#### **CCG** and **PPGs** working together

Dr Andrew Spooner, board member of the South Cheshire Commissioning Group, described the local experience positively: "PPGs have helped understanding of the areas where patients feel customer service needs improvement in a supportive and mature way. They understand the pressures on professionals but are also keen to see improvements for patients. We don't always agree but we have been able to work together as a partnership to improve the focus of local services."

# PPGs create intelligence assets for the CCG

PPGs have particular characteristics, distinct from other patient and community groups such as LINks and local HealthWatch, condition-specific organisations, faith and community groups:

**Target group and scale:** PPGs have a micro focus on individual patients and general practices working from within the practice

**Focus of feedback:** PPGs have direct access to and gather feedback from individual patients specifically about their individual GPs, primary care services and the practice

**Outcomes:** PPGs focus specifically on improving the quality of general practice and primary care localised to their practice. Changes and improvements to services are directed towards and often implemented collaboratively between individual PPGs, GPs and practice teams

**Stakeholder relationships:** PPGs develop a unique relationship with individual GPs and practice teams as partners in improving quality based on mutual trust and respect. PPGs undertake practical activities on behalf of the practice such as conducting surveys, assisting with flu campaigns, running practice health awareness events and so on.

## PPGs add value to commissioning

PPGs offer an essential mechanism for CCGs to engage with patients and the public at member practice level as they are naturally positioned as the closest lay body to the new commissioning architecture. Engaging PPGs assists CCGs to demonstrate how they meet part of the requirements of domain 2 of CCG authorisation about "meaningful engagement with patients, carers and communities".

Working closely with patients and the public is critical to enabling CCGs to bring about real transformational change for their patients and communities. PPGs' positioning at the heart of general practices means they are uniquely placed to represent a collective view of patients' needs and priorities from individual practice populations that reflect the diversity of the practice population.

Engaging with PPGs will also assist CCGs to build their capacity around effective clinical engagement. If GPs and other clinicians are engaged with their patients already, it is much easier to use that as a platform to promote clinical engagement in commissioning.

## PPGs and community networks

PPGs are part of the fabric of the wider community and can help CCGs build relationships with a range of local groups. That is because of the network effect: many patients who are active in PPGs are also involved in other community and user-led initiatives.

In some places, networks of PPGs are developing to bring together all PPGs from those practices within a CCG locality to provide a collective mechanism for engagement between PPGs and locality stakeholders. These networks can be a CCG-wide repository and focus for patients' views from individual practice-based PPGs.

Networks offer PPGs an opportunity for mutual sharing and support as well as a stronger unified collective voice on primary care issues.

The concept of PPG virtual networks is also being tested using technology to reach wider cross-sections of the population within a locality to gather real-time intelligence on a community wide rather than practice basis. Investing in supporting and developing one or more PPG networks across its geographical communities would be a smart investment for any CCG as it will create an intelligence asset and a means to communicate with the grass roots that is not available elsewhere.

# Models of CCG engagement with PPGs

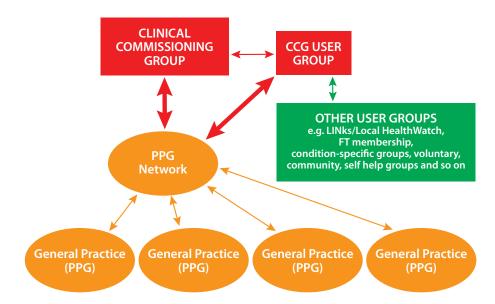
There are a number of potential models for CCGs to engage with PPGs:

- Developing relationships and engaging directly with PPG networks where they exist
- Inviting representatives from the PPG network or individual PPGs to join the CCG user panel or equivalent
- Inviting/electing PPG representatives (minimum of two) on to the CCG board as champions/catalysts for engagement alongside the lay member on the board who will have oversight for this. This must avoid tokenism.
   The CCG should also have a systematic mechanism in place for regular and on-going meaningful engagement between the board and PPG networks/user groups
- Combination of all these approaches.

In Southwark, south London, the CCG has created an engagement structure whereby nearly all practices have a PPG and each PPG chooses one or two representatives to attend one of four locality PPGs. Each of these elects two representatives to sit on the engagement and patient experience sub group of the clinical commissioning committee, chaired by the GP who is the clinical lead for engagement and communications.

Further examples of PPG engagement with CCGs can be found at: www.napp.org.uk/resources/commissioning

This diagram shows how individual PPGs and PPG networks can relate to the CCG and to other representative and community bodies such as local HealthWatch.



# Growing your locality PPG community

To maximise and enable effective engagement with patients and the public at a practice level, it is in the interests of CCGs to have access to a full complement of high quality, healthy PPGs in *every* practice within their commissioning locality. A pool of well informed patients working closely with GPs at their practice will provide CCGs with an instant resource to draw upon.

CCGs need to encourage their member practices to develop effective core groups of patients, particularly where no group exists, that meet routinely with GPs and practice teams, and not to rely solely on virtual groups. Practices should also be encouraged to regularly audit the effectiveness and representativeness of their PPGs.

There are various ways to contact PPGs and networks in your area:

- Check with individual practices in your locality whether they have a PPG and if they are part of a wider PPG network. The practice manager is often the lead individual on the practice side. Most PPGs have a chairman and/or a lead patient representative who is responsible for liaison between the PPG and the practice and other stakeholders.
- N.A.P.P (National Association for Patient Participation) has contact details and access to a wide membership base of PPGs and PPG networks. N.A.P.P can also provide support to practices and CCGs in engaging with PPGs and PPG networks
- Many PPGs have a dedicated page on the practice website which should provide contact details
- Most PPGs produce a patient/practice newsletter, which should contain contact information
- The PCT may have details about which practices have PPGs and the practices that have signed up to achieve the patient participation DES. PCTs are responsible for monitoring practice progress against the DES milestones and confirming qualification for the DES payment
- PCT and SHA patient and public engagement leads should be aware of any PPG networks that exist.

# Engaging with PPGs – steps CCGs should be taking now:

- Develop a strategy and systematic approach that integrates patient and public engagement into all aspects of CCG business rather than a standalone activity
  - Ensure patient and public engagement is a standing item on all agendas, not just at the board
- Develop structures, processes and approaches for patient and public engagement in all aspects of the commissioning cycle
  - Use a range of engagement methods to reach all sections of the population to ensure diverse views are represented and heard, particularly sections of the population that are harder to reach or hear
- Develop methods of communicating and giving and receiving feedback with and between patient groups and the CCG
  - Identify a named lead for PPE at the CCG and identify CCG champions for engagement in the clinical community

- Provide information (simplify complex issues and use plain English where possible and different formats and languages for those with communication difficulties or using languages other than English)
  - Provide appropriate support and training to build capacity of patient reps to help them engage effectively and become patient leaders
- Build relationships with PPGs and their networks
  - Be aware of protocols for joint working with PPGs/local HealthWatch
- Agree expectations on both sides
  - Decide the aspects of decision-making PPGs can influence
- Settle on the level of influence that PPGs and patient groups can have on decisions. Be honest and realistic about what is possible and always provide feedback about what happened to the views that people provided.

### Get Smarter - find out more

National Association for Patient Participation (N.A.P.P) www.napp.org.uk

Patient participation DES for GMS contract 2011-2013

http://bit.ly/dKEjsU

Growing patient participation campaign (N.A.P.P/RCGP/BMA/NHS Alliance) www.growingppgs.com/home

MAC Partnership LLP 2010. Get Off on the Right Foot With Your Patient Participation Group

http://bit.ly/KsHAgK

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Smart Guides to Engagement are a co-production by organisations and individuals passionate about engaging patients, carers and the public more fully in healthcare. The series editors are Andrew Craig and David Gilbert.

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