

Involving for Improvement

Framework for Personal and Public Involvement (PPI) in the Southern Health and Social Care Trust

November 2017

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Introduction

Personal and Public Involvement is a statutory duty. The Health and Social Care (Reform) Act (Northern Ireland) 2009 places a requirement on all health and social care (HSC) bodies to effectively involve local people in plans and decisions about service provision in their area.

The duty to engage, consult and involve is also reflected in equality and human rights legislation: NI Act 1998 Section 75 (Equality of Opportunity and Good Relations) Disability Discrimination Act (1995) Disability Duties and the Human Rights Act 1998. It is also one of the three core elements of quality as defined by the DHSSPS Quality 2020 (Nov 2011) ten year strategy to protect and improve the quality of health and social care in Northern Ireland.

Since the publication of the Southern Health and Social Care Trust's Strategic Action Plan in 2010 there have been a number of key regional developments that have influenced the further development of PPI within Health and Social Care. Therefore in June 2017, the Trust in partnership with its PPI Panel carried out a review of its 2010 PPI Strategic Action Plan which can be located at the following address:

http://www.southerntrust.hscni.net/pdf/Review_of_Strategy_to_enhance_PPI_within_Trust_June_2017.pdf

One of the recommendations from this review was:-

“to strengthen links with Patient Client Experience programme, Equality Unit, Quality Improvement and Complaints and Compliments departments.”

This new framework for Personal and Public Involvement (PPI) within the Southern Trust together with the framework for Patient and Client Experience underpins the Trust's Quality Improvement Strategy 2017- 2021 and should be read in conjunction with these documents and the Trust's Consultation Scheme all of which can found at the following address <http://www.southerntrust.hscni.net/about/1600.htm>

What is PPI?

PPI stands for Personal and Public Involvement

Personal and Public Involvement (PPI) is about people and communities influencing the planning, commissioning and delivery of health and social care services. It means Trust staff actively engaging with the public and those who use our services.

<p><u>Personal</u></p>	<p>Personal refers to service users, patients, carers or any other term to describe people who use Health and Social Care Services as individuals or as part of a family.</p>
<p><u>Public</u></p>	<p>Public refers to the general population and includes locality, community and voluntary groups and other collective organisations. Individuals who use health and social care services are also members of the general public.</p>
<p><u>Involvement</u></p>	<p>Involvement means more than consulting and informing. It includes engagement, active participation and partnership working.</p>

Why is PPI important?

There are many reasons why it is important to engage, consult and involve patients, service users, carers and the public.

It is good practice:

People's lives can be transformed when they have the knowledge, skills and confidence to manage their own health and are able to help shape their care and treatment to fit in with what is important to them. Service users and carers bring “**expertise by experience**” which can be critical to areas such as accurate diagnosis and development of appropriate care plans.

If you want to know how well a pair of shoes fit do you ask?

The person who made them?

or

The person who wears them?



It is evidence based:

When health outcomes are agreed, needs are better met and people can be supported to manage their own care. There is a growing body of literature¹ to show that good quality PPI can lead to improved health outcomes, a more effective and efficient system and improved quality of life for service users, their families and carers, the community and all of Health and Social Care.

Involvement is also recognised as a key component of quality. It has been shown to improve quality and safety of care resulting in a reduction of complaints and serious adverse incidents (SAIs).

¹ Duffy, J., Gillen, P., Agnew, C., Casson, K., Davidson, G., McGlone, A., McKeever, B. (2017). ***Personal and Public Involvement (PPI) and its impact***. Monitoring, measuring and evaluating the impact of PPI33 in Health and Social Care in Northern Ireland.
<http://www.publichealth.hscni.net/publications/personal-and-public-involvement-ppi-and-its-impact>

Chapter 3: Literature review (pages 36 - 75)

Chapter 4: Research Findings (pages 77 - 107)

Chapter 5: Best Practice in PPI in NI (pages 120 - 130)

Chapter 6: Conclusion and Recommendations (pages 134 - 135) and;

Appendix 5 References (pages 161 - 171)

It is a statutory requirement:

From 1st April 2009, the Health and Social Care (Reform) Act (Northern Ireland) 2009 placed a duty of public involvement and consultation on all health and social care organisations and some special agencies including NI Ambulance Service, NI Guardian Ad Litem, NI Blood Transfusion Service and NI Medical and Dental Training Agency.

Sections 19 and 20 of the Reform Act place a statutory requirement on each organisation involved in the commissioning and delivery of health and social care to:

- 🌈 provide information about the services for which it is responsible
- 🌈 gather information about care needs and the efficacy of care
- 🌈 support people in accessing that care and maintaining their own health and wellbeing

The legislation requires that service users and carers are involved in and consulted on:

- 🌈 the planning and provision of care
- 🌈 the development and consideration of proposals for change in the way that care is provided
- 🌈 decisions that affect the provision of care



This statutory requirement extends to the development of a Consultation Scheme, which must set out how the organisation involves and consults with service users, carers, the public and the Patient and Client Council about the health and social care for which it is responsible.

The Southern Trust's Consultation Scheme is available to download from the Trust website using the following link <http://www.southerntrust.hscni.net/about/1600.htm>

In March 2015, regionally agreed PPI Standards were launched. These outline the minimum requirements for health and social care organisations under 5 key themes:

1. Leadership
2. Governance
3. Opportunities and Support for Involvement
4. Knowledge and Skills
5. Measuring Outcomes



PPI Connections

How does PPI link with Patient Client Experience, Co-production, Community Development and Quality Improvement?



PPI, Personal and Public Involvement, Service User Involvement, PCE, Patient Client Experience, Co-production, Engagement, Community Development, Quality Improvement.... and the list goes on.

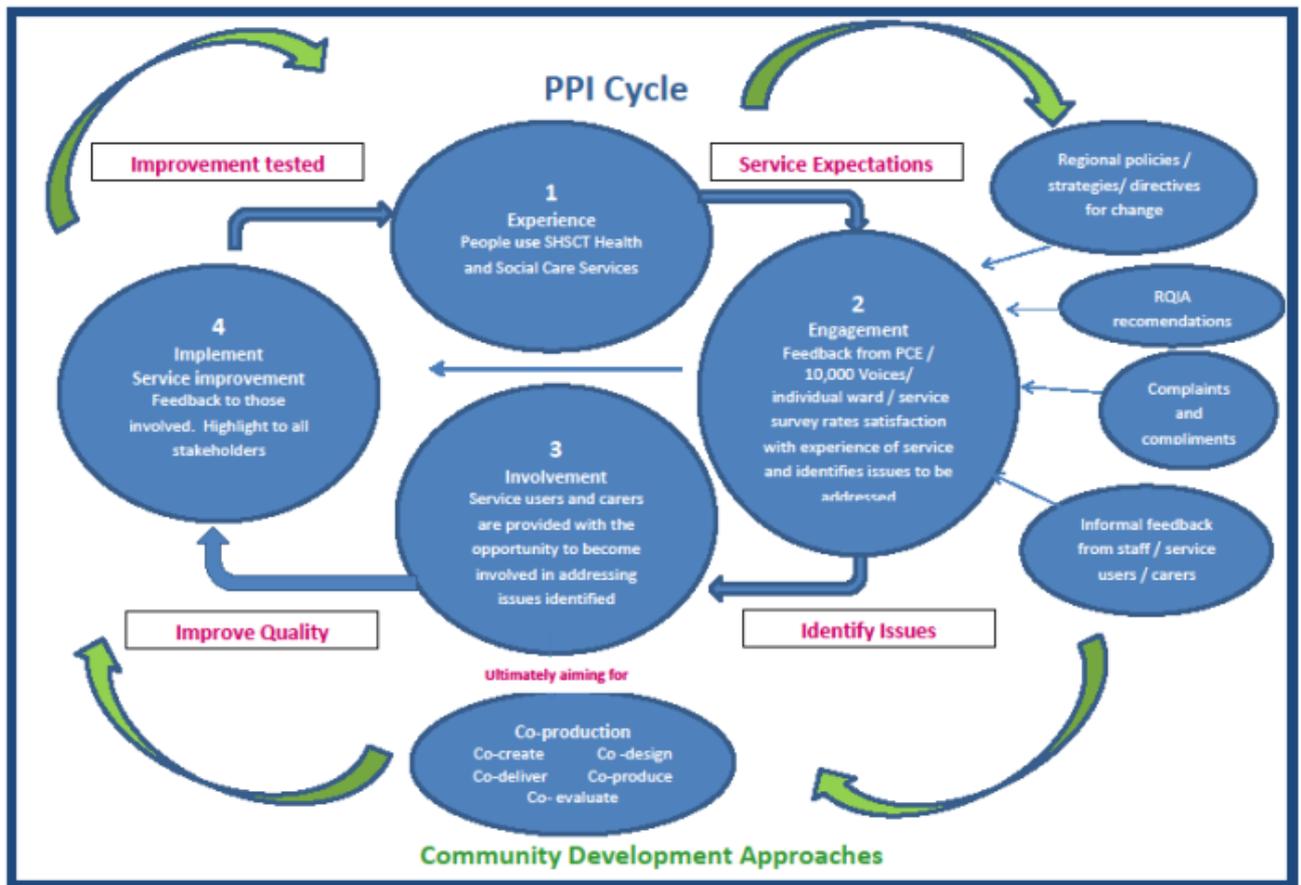
There are so many terms used now to describe and define the process of engaging and involving those who use health and social care services. Ultimately the purpose of such involvement is to ensure that those who use our services have a positive experience and receive safe high quality care to meet their needs. However, we acknowledge that the language of involvement has become crowded and possibly confusing

Are they the same thing? Are they different? Do they connect?

The 'PPI Cycle diagram' overleaf has been developed to outline the Personal and Public Involvement Cycle within the Southern Trust highlighting the connections between the Patient Client Experience, 10,000 Voices, Complaints and Compliments, Co-production and Quality Improvement, all of which are underpinned by the use of community development approaches throughout.*

The PPI Cycle

Community development approaches*are used throughout the PPI Cycle



***Community development approaches aim to re-shape relationships within and between communities and organisations to strengthen the foundations for collective action and partnership working. This includes changing power in relationships as well as extending the reach of social networks**

The table overleaf outlines the component parts of the PPI Cycle diagram above.

<p>1. <u>Experience</u></p>	<p>People who use health and social care services have expectations of the service. People can have a good experience, a bad experience or a mixture of good and bad experiences throughout their treatment and care.</p>
<p>2. <u>Engagement</u></p>	<p>A range of formal and informal methods are used to gather feedback from staff, service users and carers. These include the 10,000 Voices surveys, local service questionnaires and focus groups and compliments or suggestions received. All of this feedback provides the Trust with information on what works well and identifies issues that need to be addressed.</p>
<p>3. <u>Involvement</u></p>	<p>Service users and carers are provided with the opportunity to become involved in addressing the issues identified. <i>This is also an opportunity for the Trust to check that the right issues have been identified.</i> In some cases, issues such as staffing, staff training, disciplinary matters, team structures, internal processes, new ways of working etc. can be addressed directly by the Trust and contribute to service improvement. Others require the involvement of those who have experience of the service to tease out the issues and develop a solution that will meet the needs of the Trust and those who use the service. We aim to Improve Quality through co-design and/or co-production where possible.</p> <p><i>PPI, completed well, will lead to co-production as the pinnacle of the engagement and involvement process.</i></p>
<p>4. <u>Implement Service Improvement</u></p>	<p>Service is improved, feedback provided to those involved and improvement highlighted to all stakeholders. The improvement is tested when people use the service. The PPI Cycle continues. Services are continually improved.</p>

Embedding PPI in Southern Trust

How does the Southern Trust make sure that PPI is used in the planning, delivery and evaluation of its services and that it complies with the legislation and regional PPI Standards?

Leadership

In line with the regional PPI Standards key performance indicators, the Trust has a PPI Leadership structure in place which includes:

- 🌟 Named executive and non-executive PPI Lead at board level; with clear role descriptions and objectives
- 🌟 PPI operational lead
- 🌟 PPI leadership structure throughout the organisation including regular leadership walks

Governance

In line with the regional PPI Standards key performance indicators, the Trust has:

- 🌟 Governance and corporate reporting structures in place for PPI
- 🌟 A corporate and individual Directorate action plans with defined outcomes developed to demonstrate the impact of PPI
- 🌟 An annual report demonstrating evidence of compliance with PPI responsibilities and the work undertaken to address challenges in this area

Opportunities and Support for Involvement

In line with the regional PPI Standards and key performance indicators, the Trust:

- 🌟 Maintains an up-to-date register of existing and future opportunities for involvement at all levels across the organisation, which is accessible by the public
- 🌟 Supports the involvement of service users, carers and the public to include:

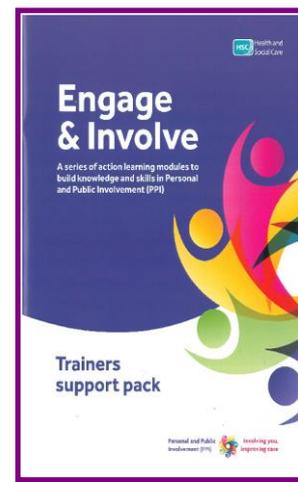
- 🌟 **Clarity on roles/responsibilities for those participating**
- 🌟 **Training, support and advocacy if required**
- 🌟 **Use of accessible communication mechanisms and procedures**
- 🌟 **Good Meeting Etiquette**
- 🌟 **Application of interim service user, carer and stakeholder reimbursement guidelines and procedures for HSC organisations**

- 🌸 Provides named points of contact for each individual engagement exercise
- 🌸 Provides feedback to those involved in each engagement as standard practice
- 🌸 Identifies barriers to involvement and develop action to overcome these

Knowledge and Skills

In line with the regional PPI Standards key performance indicators, the Trust:

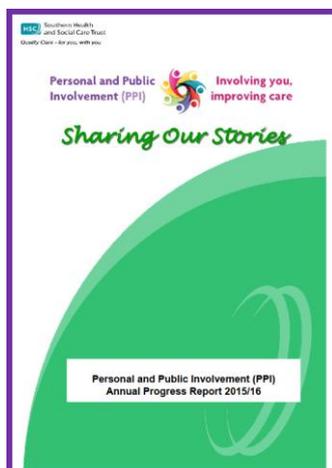
- 🌸 Integrates basic PPI awareness training into induction arrangements for all new staff
- 🌸 Evidences compliance with any annually agreed regional targets for the provision of and access to PPI training
- 🌸 Ensures a mechanism is in place to capture information on the up-take of PPI training
- 🌸 Demonstrates service user and carer involvement in the design, delivery or evaluation of PPI training



Measuring Outcomes

In line with the regional PPI Standards key performance indicators, the Trust:

- 🌸 Evidences service user and carer involvement in the monitoring and evaluation of PPI activity
- 🌸 Demonstrates through its annual report:



- How the needs and values of individuals and their families have been taken into account in the development and delivery of care.**
- The outcomes and impact achieved by using PPI approaches in respect of policy, investments, decisions and service delivery across the organisation.**

Effectiveness of PPI

How does the Southern Trust know if these structures and mechanisms are effective?

Internally

The Trust has a **PPI Panel** that consists of 18 service users and carers across all programmes of care, Trust localities and section 75 groupings. This Panel works with the Trust to enhance PPI across all of its services. Trust staff across the programmes of care have attended PPI Panel meetings to provide progress up-dates on PPI within their area of responsibility.

-  All PPI action plans, progress reports, resources and training are discussed with and approved by the PPI Panel
-  The PPI Panel is also involved in the annual PHA PPI monitoring process; overseeing the completion of the self-audit questionnaire and participating in the verification visit.

Four PPI Panel members are full voting members of the **Patient Client Experience Committee (PCEC)** which is responsible for leading the coordination, development, implementation and monitoring of the Trust's PPI Action Plan across the organisation as well as the Patient Client Experience Standards and Complaints and Compliments.

The Trust also has a number of other strategic reference groups that work to shape specific areas of interest such as Mental Health, Carers, Racial Equality, Travellers, Children and Young People's services, Disability services and Older people's services. These also include service users and carers from the relevant programmes of care.

Externally

The Public Health Agency (PHA) has responsibility for leading implementation of policy on PPI across health and social care and ensuring that Trusts meet their PPI statutory and policy responsibilities/obligations. The PHA in turn provides assurances to the Department of Health, Social Services and Public Safety (DHSSPS) in this regard through established accountability arrangements.

The PHA, through the regional PPI Forum has produced a PPI Monitoring Framework and on an annual basis develops a PPI Monitoring Report for each Trust.

The report is based on evidence gathered through:

- 🌸 A PPI self-assessment monitoring return (approved by the PPI Panel and the Patient Client Experience Committee)
- 🌸 Information collated during a verification monitoring visit by the PHA and its service user and carer panel
- 🌸 Additional evidence supplied by the Trust



These reports are available to download from the PHA website
<http://www.publichealth.hscni.net/directorate-nursing-and-allied-health-professions/allied-health-professions-and-personal-and-publi-5>

The PHA PPI Monitoring Report for Southern Trust May 2015 stated:

“The (Southern) Trust has demonstrated leadership and has regularly shared good practice in this field across the HSC system. The strength of their commitment to service user and carer involvement has been demonstrated through its structures, through its monitoring and reporting arrangements and through the production of a wide range of support and guidance materials for staff and service users.” and

“On the basis of the evidence provided, the SHSCT is the most advanced Trust in relation to complying with the Statutory Duty of Involvement and Consultation. PPI is clearly on the agenda of the senior management team and widely embedded within policy and practice in the organisation.”

The PHA PPI Monitoring Report for Southern Trust May 2016 further stated:

“On a review of the evidence, the Southern Trust continues to be the most advanced Trust in relation to complying with the statutory duty of involvement. PPI continues to be embedded into the Trust governance and decision making processes and is a core action and reporting element within each Directorate.

“It is apparent that the resources dedicated to PPI continue to make a significant difference to the culture and practices operating within the organisation. The development of a PPI Action Plan within each Directorate puts a clear focus on the actions required to appropriately involve service users and carers. The monitoring team welcomed the opportunity to engage with service user and carer representatives involved in the Trust and it was clear to see the impact of their involvement in different service areas.”

“In particular the governance model in operation, truly demonstrates how a large organisation can incorporate the voice of service users and carers at a strategic level and this is to be congratulated.”

Looking Forward

How will the Southern Trust ensure that it continues to promote and embed PPI across all of its services?

The Trust will continue to enhance the involvement of service users, patients, carers, communities and other stakeholders and partners in the planning, development, delivery and evaluation of its services by:

- developing and implementing an annual corporate PPI Action Plan based on the 5 regionally agreed PPI Standards and recommendations from the research report “*Personal and Public Involvement and its Impact*”¹ and the *PHA PPI Monitoring reports*²
- developing and implementing annual directorate operational PPI Action Plans focusing on 4 key areas which have specific PPI Indicators to be met:
 - **Information**
 - **Service user and carer involvement**
 - **Training and development**
 - **Monitoring and evaluation**
- building on the progress made under the Promoting Wellbeing PPI Strategic Action Plan 2010
- embedding PPI within the Quality Improvement Framework
- exploring and supporting Co-Production opportunities both within the organisation and externally with other partners
- seeking to improve how we measure the impact and effectiveness of PPI in terms of the service user, the carer, the service and HSC more widely
- continuing to review and develop our PPI structures, mechanisms and resources in line with available funding
- continuing to work with the PPI Regional Forum and share good practice to develop PPI mechanisms and resources to support wider HSC practice.

² <http://www.publichealth.hscni.net/directorate-nursing-and-allied-health-professions/allied-health-professions-and-personal-and-publ-5>

Where can I get further information?

PPI & Community Development	
Carolyn Agnew	<u>Head of User Involvement & Community Development</u> Tel: 028 3756 4469
Neil Gillan	<u>User Involvement Development Officer</u> Tel: 028 3756 4471
Esme Brown	<u>Administration</u> Tel: 028 3756 4472
Email:	firstname.surname@southerntrust.hscni.net
<p>Access the Involving You Section of the Trust's website: http://www.southerntrust.hscni.net/about/1600.htm</p>	
Patient Client Experience	
Mairead Casey	<u>Patient Client Experience & 10,000 Voices Coordinator</u> Tel: 028 3756 6764 Mob: 07789505502 Email: mairead.casey@southerntrust.hscni.net
Quality Improvement	
Jacqueline Morton	<u>Head of Continuous Improvement</u> Tel: 028 3756 0060 Ext: 60060 or Blackberry: 07920875792 Email: JacquelineT.Morton@southerntrust.hscni.net
PPI e-Learning and other related training	
Anne Forsythe	<u>Senior HR Manager (Workforce & Organisational Development)</u> Tel: (028) 3756 4158 Ext: 64158 or Mob: 07525 298861 Email: anne.forsythe@southerntrust.hscni.net
<p>A Training Booklet outlining the training and resources to support staff to understand and incorporate PPI into their work practices is available to download on the Southern Trust website at: Southerntrust.hscni.net or on SharePoint at: Sharepoint/PersonalandPublicInvolvement</p>	

SHSCT PPI Structures & Accountability Flow Chart - Appendix 1

Information on the Trust's opportunities for involvement is available on the Trust website <http://www.southerntrust.hscni.net/about/1600.htm>

