

London Ambulance Service NHS Trust

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Report to:	Trust Board						
Date of meeting:	26 November 2019						
Report title:	Patient and public engagement						
Agenda item:	08						
Report Author(s):	Antony Tiernan, Director of Communications and Engagement						
Presented by:	Antony Tiernan, Director of Communications and Engagement						
History:	Report considered by the Executive Committee at its meeting on 13 November 2019 (ref: ExCo/19/284)						
Status:		Assurance		Discussion			
	⊠	Decision		Information			
Background / Purpose:							
in the design, development and delivery of services. The voice of patients should be ever-present in all parts of our organisation. This paper outlines plans to, subject to engagement with key stakeholders, create a London Ambulance Service Public and Patients Council. We will also explore the potential for creating a London Ambulance Service Youth Forum. We also outline plans to replace the Service's public and patient engagement strategy.							
Recommendation(s	s):						
The Trust Board is asked to support: the creation of a London Ambulance Service Public and Patients Council (subject to engagement with stakeholders); investigation into the feasibility of creating a London Ambulance Service Youth Forum; and, plans to develop a new public and patient engagement strategy for March 2020.							
Links to Board Assurance Framework (BAF) and key risks:							
N/A							
Please indicate whi	ch Board	Assurance Framework (BAI) risk it	relates to:			
Clinical and Quality	1		⊠				
Performance			⊠				
Financial			<u> </u>				
Workforce							
Governance and Well-led							
Reputation							
Other							

This report supports the achievement of the following Business Plan Workstreams:						
Ensure safe, timely and effective care						
Ensuring staff are valued, respected and engaged						
Partners are supported to deliver change in London						
Efficiency and sustainability will drive us						

Public and patient engagement

Background

- Patients, their families and carers, together with staff and the wider community, should be partners in the design, development and delivery of services. The voice of patients should be ever-present in all parts of our organisation.
- We currently undertake a range of activities to support this, from our work with Healthwatch, Patients' Forum and public education through to social media, coproduction initiatives like 'Whose Shoes' and work with individual patient groups.
- Until August, public and patient engagement was the responsibility of Trisha Bain, Chief Quality Officer. It is now within the remit of the Director of Communications and Engagement.

Introduction

- This paper outlines plans to, subject to engagement with key stakeholders, create a London Ambulance Service Public and Patients Council. We will also explore the potential for creating a London Ambulance Service Youth Forum.
- Both of these would help improve the way we engage with patients and the public with a particular focus on ensuring that we are engaging with people from a wide range of backgrounds who represent the diversity of the population of London.
- 6. In addition, we are in the process of reviewing our wider stakeholder engagement including how we work with VCSE (voluntary, community and social enterprise) organisations, as well as with NHS, health, care and local government partners, including STPs (sustainability and transformation partnerships). This will also include politicians and political organisations, such as the London Assembly and Assembly Members, councils and councillors, and MPs.
- 7. We will also work more closely with the London Clinical Senate Patient and Public Voice (LCSPPV). This is a group of 15 members selected from across the capital. They are typically linked into similar structures within the STP, or provider trusts. Members are appointed for three years (and can be reappointed once) and rotate the chair role. They meet monthly to discuss issues regarding health and services across the capital. Four members sit in the Senate Council and all members attend the Senate Forum meetings held several times a year.
- Finally, this paper outline plans to replace the Service's current public and patient engagement strategy, which is due to run out in 2020. This will include how we could make better use of our 'foundation trust membership'.

Staffing and management

- We employ five staff (band 6, 3.3 WTE) who are directly responsible for public and patient engagement, as well as public education.
- In September, Margaret Luce, Head of Patient & Public Involvement and Public Education, left the Service. John Chilvers, Stakeholder Communications Manager, has taken on interim responsibility for the team.

11. The team will lead on developing the new public and patient engagement strategy through engagement with staff, patients, the Patients' Forum, local Healthwatch bodies and other partners.

London Ambulance Service Public and Patients Council

- 12. It is proposed that we establish a London Ambulance Service Public and Patients Council to bring broad public, patient and carer's insight and experience into the work of the organisation. A possible terms of reference for the Council is attached (appendix 1).
- 13. It is suggested that we engage with key stakeholders on both the creation of the Council and its terms of reference. Interested parties will include local Healthwatch, Patients' Forum, local council overview and scrutiny committees and health and wellbeing boards, and the London Clinical Senate.
- The costs of the Council would be covered from the patient and public engagement team's current budget.
- A timeline for engagement and, subject to feedback, the launch of the London Ambulance Service Public and Patients Council is attached in appendix 2.

London Ambulance Service Youth Forum

- 16. It is proposed that we explore the creation of a London Ambulance Service Youth Forum to share their views on the services that we provide. A timeline is included in appendix 2.
- 17. NHS Youth Forums are informal groups run by their members, with support from NHS staff. Youth Forums include patients, as well as local children and young people. They can also include children who are interested in a career in healthcare.

Public and patient engagement strategy 2020/21

- 18. The Service <u>current's public and patient engagement strategy</u> is due to expire in March. It is proposed that we develop a new public and patient engagement strategy with input from staff, patients, local people and other stakeholders.
- 19. The scope the strategy will encompass all services including 999 and 111. It will apply to all patient facing clinical and non-clinical services, and to departments whose roles may not be patient-facing, but whose work contributes to patients' experiences, such as education and workforce.
- 20. The strategy is likely to cover a number of broad areas of activity, from individual care and treatment and research through to service delivery, design and transformation to strategy and forward planning. Activity will cover the key elements of the 'involvement' i.e. informing, consulting, involving, participation and co-design.
- 21. As part of the strategy, we will investigate plans to launch an online portal to make it easier for patients and the public to 'sign up' to hear more about our work and shape and influence what we do. This model is exemplified by Surrey Downs STP.

Next steps

- 22. The Board is asked to support:
 - The creation of a London Ambulance Service Public and Patients Council (subject to engagement with stakeholders)

- · Investigation into the feasibility of creating a London Ambulance Service Youth
- · Plans to develop a new public and patient engagement strategy for March 2020.

Antony Tiernan Director of Communications and Engagement





London Ambulance Service Public and Patients Council - Possible Terms of Reference

1. Purpose

- 1.1 The London Ambulance Service Public and Patients Council (the Council) will bring together a range of patients and the public representatives from across London at regular intervals to provide feedback to the Service on the care it provides.
- 1.2 The Council's membership will bring broad public and patient insight and experience to discussions, helping to shape the way care is delivered. They will cover a number of broad areas of activity including:
 - 1.2.1 Individual care and treatment
 - 1.2.2 Research
 - 1.2.3 Service delivery, design and transformation
 - 1.2.4 Strategy and forward planning
 - 1.2.5 Assurance.
- 1.3 The purpose of the Council is to:
 - 1.3.1 Provide a voice for patients, the public and carers in the design, development and delivery of Trust services
 - 1.3.2 Advise the Trust on ways to gain broader engagement, as necessary.
- 1.4 The Council will have an agreed programme of work to allow for tier two engagement activity to be conducted in advance of meetings to help bring wider insight to the membership as appropriate. The Council is not itself responsible for implementation and nor does it cut across the current statutory accountabilities of the London Ambulance Service NHS Trust.

2. Constitution

2.1 The Council is an advisory committee of the Trust's Board of Directors. These terms of reference are subject to amendment at future meetings of the Trust Board.

3. Accountability

3.1 The Council will report directly to the Trust Board.

4. Membership

- 4.1 The Council will have a membership of around 20 people and should ensure a diversity of age, gender, background and experience of health services.
- 4.2 Members are appointed on an individual (not ex-officio) basis but will be drawn from a range of public and patient groups to ensure a plurality of experience.

5. Chair

- 5.1 The Council will be led by two independent Co-Chairs. The Co-Chairs will be appointed through a formal process and will not be drawn from the Council membership.
- 5.2 The Co-Chairs will help build and safeguard the cohesion, reputation and effectiveness of the Council.
- 5.3 The Co-Chairs will have a role both at and between meetings in setting the Council's agenda and ensuring that the Council is influential and impactful.

6. Attendance

- 6.1 Officers from the London Ambulance Service NHS Trust and other health and social care system partners will participate in all sessions of the Council in attendance (in limited number).
- 6.2 Experts may be invited to meetings or sessions of meetings on an ad-hoc basis to provide opinion, information and evidence on specific matters.

7. Quorum

- 7.1 The meeting will be guorate provided that the following are in attendance:
 - 7.1.1 One of the Co-Chairs of the Council; and
 - 7.1.2 At least one-third of the total membership of the Council.

8. Meeting administration

- 8.1 A member of the Corporate Governance Team will act as the secretary to the Council, ensuring the agreement of the agenda with the Co-Chairs of the Council and attendees, collation of papers, taking minutes and keeping a formal record of matters arising and issues carried forward.
- 8.2 The draft minutes and action points will be available to the Council within ten working days of the meeting.

9. Notice of meetings

- 9.1 Meetings of the Council shall be called by the secretary of the Council at the request of the Co-Chairs.
- 9.2 Unless otherwise agreed, notice of each meeting confirming the venue, time and date together with an agenda of items to be discussed, shall be circulated to each member of the Council, any other person required to attend, no later than seven calendar days before the date of the meeting. Supporting papers shall be sent to Council members and to other attendees as appropriate, at the same time.
- 9.3 Late and additional papers will be tabled at the discretion of the Co-Chairs of the Council.

10. Frequency of meetings

10.1 Meetings of the full Council will be typically held four times per annum.

11. Duties

11.1 TO BE DEVELOPED BY THE COUNCIL.

12. Review and reporting responsibilities

- 12.1 The minutes of all meetings of the Council shall be formally recorded and submitted to the Trust Board.
- 12.2 The Council will report annually to the Trust Board in respect of the fulfilment of its functions in connection with these terms of reference. This will include an evaluation of its performance according to a standardised framework and process.
- 12.3 All terms of reference will be reviewed annually with any changes submitted to the Trust Board for approval

13. Equality and diversity

13.1 The Council will have regard for the NHS Constitution and ensure that it complies with relevant legislation and best practice in the conduct of its duties.

TO BE Approved by the Board at its meeting on xxx

ANNEX

Principles of membership

Members must at all times:

- Observe the values and respective behaviours of the London Ambulance Service respectful, professional, innovative and collaborative
- Observe the highest standards of impartiality, integrity and objectivity in relation to the advice they provide
- Be accountable for their activities
- Not misuse information gained in the course of their membership of the Council for personal gain or for political purpose, nor seek to use the opportunity of public service to promote their private interests or those of connected persons, firms, businesses or other organisations
- Not hold any paid or high-profile posts in a political party, and not engage in specific
 political activities on matters directly affecting the work of the Council. When
 engaging in other political activities, members should be conscious of their public role
 and exercise proper discretion.

Declarations of interest

Upon appointment all members of the Council will be formally required to complete a Declaration of Interest Form and a Register of Members Interests will be established and updated on an annual basis. It is the responsibility of members to declare any new interests as and when they arise and to ensure that the Register of Members Interests is kept up to date.

The Chairs will be responsible for managing declarations of interest and any conflicts of interest within the meeting and determine on what basis a member declaring a relevant interest can participate in discussion.

APPENDIX 2

Below is a timeline for the activities outlined in this paper:

November	December	January	February	March	April onwards
Agree proposal at ExCo and Board	Engage on plans for a London Ambulance Service Public and Patients Council (LASPPC)	Advertise for LASPPC chairs/ members	Select LASPPC chairs/ membership	Launch LASPPC	Host first meeting of the LASPPC
	Investigate plans for a London Ambulance Service Youth Forum			Include plans for Youth Forum in new public and patient engagement strategy (if appropriate)	
	Engage on new public and patient engagement strategy	Engage on new public and patient engagement strategy	Engage on new public and patient engagement strategy	Approve new public and patient engagement strategy ExCo and Board	
	Complete stakeholder mapping	Complete stakeholder mapping	Approve stakeholder map at ExCo		