

**REGIONAL HEALTH AND SOCIAL CARE
PERSONAL AND PUBLIC INVOLVEMENT FORUM
(Regional HSC PPI Forum)**

Monday 22 June 2015 at 2.00 pm

PHA, Linenhall Street, Belfast

PRESENT:

Public Health Agency (PHA)

Mary Hinds	Executive Director of Nursing, Midwifery and Allied Health Professionals
Michelle Tennyson	Assistant Director, Allied Health Professions and Personal & Public Involvement
Martin Quinn	Regional PPI Lead
Claire Fordyce	Senior PPI Officer

Trusts

Martine McNally	Northern Health and Social Care Trust (NHSCT)
Siobhan O'Donnell	Western Health and Social Care Trust (WHSCT)
Sandra McCarry	Belfast Health and Social Care Trust (BHSCT)
Carolyn Agnew	Southern Health and Social Care Trust (SHSCT)
Elaine Campbell	South Eastern Health and Social Care Trust (SEHSCT)
John Gow (Deputy)	Northern Ireland Ambulance Service (NIAS)
Jarlath Kearney	NIAS

Health & Social Care Partners

David Best	Department of Health, Social Services & Public Safety (DHSSPS)
Jacqueline Magee	Health and Social Care Board (HSCB)

Jackie McNeill	Patient and Client Council (PCC)
Brenda Horgan	Northern Ireland Social Care Council (NISCC)
Christine Goan	Regulation and Quality Improvement Authority (RQIA)
Angela Drury	Northern Ireland Practice & Education Council for Nursing & Midwifery (NIPEC)

Charles Kinney **Northern Ireland Blood Transfusion Service (NIBTS)**

Service User/Carer Representatives

Don Harley	BHSCT
Brian O’Hagan	RQIA
Peter Donnelly	SHSCT
Caroline Kelly	WHST (via video conference)

Guest speaker

Corrina Grimes	PHA
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APOLOGIES:

HSC Partners

Fionnuala McAndrew	HSCB
Michael McCluskey	NI Guardian Ad Litem Agency (NIGALA)

Service Users/Carers Representatives

Ann Gamble	SEHSCT
Anne Marie Murray	PCC

1 Welcome and introductions

Mary Hinds welcomed members in attendance and informed the group that she had returned to the PHA and was delighted to be chairing the group again.

2 Actions of last meeting

Members agreed the minutes. Matters arising were noted as:

- Engage - The PHA has written to DHSSPS regarding the Engage website and associated outreach programme and are awaiting a response.

Action: PHA to share Engage correspondence with members.

- Participation/access to meetings – video conference facilities for meetings are now in place and Mary welcomed Caroline Kelly who joined the meeting remotely.

Action: Tel/video conference facilities will be available for all future meetings.

- Action plan 2015/16 – circulated to all members and no further comments were received. Members approved the Action Plan.

3 Sharing best practice in PPI

a) Corrina Grimes (PHA), Informing commissioning and service re-design to improve the experiences of people with palliative and end of life care needs.

Corrina presented an overview of the work undertaken to involve service users/carers in informing commissioning and service re-design for palliative and end of life care. The programme was funded by the PHA, PPI grant programme and undertaken in partnership with the All Ireland Institute for Hospice and Palliative Care. Service users/carers were involved in helping to shape the questions and the Sense Maker tool was used to collect participant responses. A report will be published to show how practices have changes as a result of the work and a number of recommendations have been made to support work going forward. Phase 2 will be implemented using similar involvement techniques. Members complimented the work and the involvement of service users/carers from the start of the project. A discussion followed particularly in relation to the involvement of carers.

Action: Claire to send Caroline Kelly's contact details to Corrina to continue discussions regarding carer involvement.

b) PCE/PPI Leaflet

Carolyn Agnew (SHSCT) informed the group that a leaflet had been developed in partnership between the SHSCT and the PHA with input from service users/carers. The purpose of the leaflet is to promote understanding of what

PPI and PCE are, their relationship and the difference between the concepts. Members welcomed the development.

Comment was also made about the lack of investment in driving forward PPI, which is a Statutory duty. Discussion followed and members agreed that it was now an ideal time to reinforce the need for additional resources for PPI, given the recent Standards launch and also the findings from the monitoring process, to enhance the momentum for PPI. Members agreed to discuss this point further under the monitoring agenda item.

Action: PHA to share the PCE/PPI leaflet with Regional Forum members.

4 PPI Standards

Claire led discussion on this agenda item. The PPI Standards were launched on 4 March by the DHSSPS and leaflets have been circulated across all HSC organisations. Members in attendance were thanked for contributing to the event and in particular for hosting information stands to showcase PPI in practice. A plan of work is to be developed to continue to raise awareness about the Standards to embed into HSC culture and practice.

Action: PHA to procure and supply further Standards leaflets to HSC partners ASAP.

5 PPI Communications update

Claire informed members that the Annual Report 2013/14 is now available on the PHA website. Communications sub-group members have agreed to meet to discuss the 2014/15 Annual Report and also develop guidance on using the PPI brand for HSC organisations. A communications plan will also be developed to help raise awareness of PPI across HSC as per the Action Plan.

Action: Communications sub-group to develop the 2014/15 Annual Report and review PPI Brand guidance for HSC organisations.

Action: Communications sub-group to review the inclusion of the PPI brand in HSC Trust websites.

Action: Communications sub-group to develop a communications plan.

6 PPI Monitoring

Martin up-dated the group on the monitoring process and thanked the monitoring sub-group and other partners who contributed to the development of the programme of work. The PHA in conjunction with service users/carers has undertaken the PPI monitoring process with the 5 HSC Trusts and the reports will be included as part of the Trust Accountability meetings with the DHSSPS. Reports will be made publicly available on the PHA website after the Accountability meetings.

The key points from the monitoring process were noted as:

- A range of work is being undertaken across the organisations to meet the Statutory Duty of Involvement.
- Given limited resources available, Trusts are working to put in place processes to integrate PPI.
- Processes to share best practice within and across organisations are weak.
- Training staff is a big factor to help integrate PPI.
- Resources available to embed PPI are a major concern.

Don Harley contributed to the monitoring process as a service user/carer and provided an overview of his experience/thoughts on it. This included organisations undertaking a self-assessment report and then a verification visit with Assistant Directors and PPI Leads in each Trust. As part of the verification visit, Cancer services representatives and service users were also engaged to review PPI in practice. Don commended the process, citing its value and the importance of the direct involvement of service users and carers.

The Chair suggested that it may be timely to meet with each HSC Trust to reinforce the Statutory duty in advance of the organisation business planning activities to review the recommendations outlined in the monitoring reports. The PPI Leads in attendance provided positive feedback on the monitoring process and noted that the work had helped to raise the profile of PPI internally in organisations. A formal evaluation will be undertaken to review the process.

A number of members again expressed reservations about the ability of the HSC system to fully embrace PPI and for it to be embedded into HSC culture and practice, in the continued absence of investment in PPI infrastructural capacity across the system.

Action: HSC Trusts to incorporate recommendations from the monitoring reports into their Action Plans moving forward.

Action: PHA to review the actions which HSC Trusts will undertake in response to the monitoring report recommendations.

Action: PHA to consider a follow-up visit by the Regional PPI Forum Chair to discuss the action plan in place to progress PPI.

Action: PHA to place PPI Monitoring Reports on PHA website after the Accountability meetings.

7 PPI Training

Members were up-dated on the development of the PPI training programme. It is anticipated that the full programme will be disseminated with HSC Trust colleagues at the beginning of July for comment and the final programme of work will be completed in the Autumn. The e-learning programme is also currently being up-dated and a draft will be available in the summer to pilot. A launch will take place in October/November. HSC Trusts have offered to pilot the e-learning programme it was agreed that it would also be useful to pilot with non-executive Directors.

Action: PHA to circulate final draft of materials to HSC Trusts in early July, with comments back by end July.

Action: Organisations to be identified to pilot the PPI e-learning programme.

8 Reimbursement, remuneration and recognition

The paper circulated has been jointly developed by PHA and HSCB colleagues to look at a framework for remuneration within mental health services. Briege Quinn, PHA – nursing, the co-author of the report, will be invited to the next Regional Forum meeting to discuss the paper and welcomed comments from Forum members to input into the paper. Members initially commented that the paper needs to be clearer, particularly in respect of the role of the experts by experience, how they differed from other service users/carers in the wider Involvement sense and how they would be recruited/resourced. David advised that there were no plans for further guidance of this matter from the DHSSPS.

Action: All members are to submit comments by end of July on the paper to Claire, for sharing with Briega. Briega Quinn will be invited to the next meeting.

9 Membership

The Chair highlighted that service user/carer/voluntary group representation was a concern due to low attendance. The PHA has written to HSC organisations in relation to attendance, but there has been little response. There is a need to ensure that service users/carers are engaged in the work of the Forum and if the current system of representation/involvement is not working, then it should be reviewed.

Action: HSC organisations with service user/carer representation on the Forum, are to review membership and to advise of new/additional nominations by end August.

The Chair has written to HSC partners to secure attendance by the accountable Director/Assistant Director for PPI at a meeting of the Forum once a year. This will provide a strategic overview of the work of the Forum and PPI in general. Correspondence will be sent to the identified Officers to secure a meeting in Autumn 2015.

Action: HSC partners to ensure they respond promptly to the Chair's letter.

Action: PHA to set up meeting with accountable Directors for Autumn.

A proposal was tabled as per previous discussion by the Forum, on the establishment of an e-Forum. The purpose of the e-Forum is to facilitate participation of voluntary sector partners in the work of the Regional HSC PPI Forum.

Members reviewed and discussed the proposal to establish an e-Forum. Members agreed that further discussion was required to ensure it would not duplicate existing arrangements such as the PCC membership scheme.

Action: PHA to discuss e-Forum proposal with PCC colleagues.

Action: Forum members to feedback views/suggestions on e-Forum to Claire by end July.

Action: Communications sub-group to develop questionnaire to disseminate to members to ascertain thoughts/comments on Forum meetings.

10 Any Other Business

The Chair raised the recent Human Rights Enquiry report into Emergency Care and the links between the recommendations and PPI. Recommendation 3 and 7 in particular refer to strengthening the patient voice and ensuring access to information systems. Members noted the importance of these particularly in relation to the need to progress the Engage website.

Action: PHA to disseminate the Human Rights Recommendations Paper.

11 Date and time of next meetings

Monday 19 October 2015	1.30 pm	Conference Rooms 2 & 3, PHA, 12-22 Linenhall Street, Belfast
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NB: Plans are being looked at in respect of the introduction of a 4th meeting of the Forum each year, which would involve Directors/Assistant Directors from HSC organisations and which would bring a strategic oversight to the work. This may result in changes to the proposed dates for the other meetings.