

The Patient and Public Involvement Partnership – Update December 2002

To: All members of the Health Overview and Scrutiny Committee

Attached is information relating to the new system of Patient and Public Involvement of which the Overview and Scrutiny Committee is a part.

The latest situation is that the parliamentary process is going ahead on time and the overview and scrutiny powers will come to the County Council on January 1st 2003 as planned. The guidance on the regulations and how overview and scrutiny will work that had been planned to come out at the same time is now more likely to be available in February.

Progress has been made in a number of areas:

- Patient Advice and Liaison Services (PALS) have been put in place in all trusts in Buckinghamshire
- An ICAS pilot is running in Bucks (including Milton Keynes)
- A pilot Patients' Forum is operating in the Aylesbury Vale CHC area
- A Change Assessment Group has been set up by the Thames Valley Strategic Health Authority to begin planning for Patients' Forums

There continues to be uncertainty around a number of issues and some of these are identified below:

- It has been decided to set up the PCT Patients' Forums before those in other trusts. No date has been set for these others to be implemented and there is a view that they may never see the light of day
- No date has yet been set for the abolition of CHCs although it has been stated by the D of H that abolition will not happen until the Patients' Forums are in place and that there will be just one abolition date
- No figure has yet been agreed for funding of Patients' Forums but the suggestion is that there will be one employee per PCT Patients' Forum
- Nothing has been agreed about how Patients' Forum staff will be organised. Will they be working alone or formed into a secretariat that covers all of the PCTs
- The name Patients' Forums is likely to be changed but no decision has yet been made about the final choice of name
- No decision has yet been made about whether there will be any central Government funding for local authority Overview and Scrutiny

PATIENT & PUBLIC INVOLVEMENT: THE FUTURE PICTURE

The *NHS Plan* set out plans to establish a new system of patient and public involvement for England to replace CHC's in England as part of the modernisation programme. The system is also designed to respond to the Bristol Royal Infirmary Inquiry report, which recommended representation of patient interests "on the inside" of the NHS and at every level.

New system of Patient and Public Involvement:

The NHS should put the patient at the centre of everything it does. To embed and sustain this approach within the NHS requires not just a change in attitude among staff but also a new approach to mechanisms for patient and public involvement. The new mechanisms for PPI will enable patients to be as involved as they want to be in decisions about their care and enable communities to be involved in their local health service. The PPI agenda overall supports this vision of a patient-centred NHS.

The new system for PPI will be achieved through the trust, community and national arrangements outlined below:

In each Trust, there will be a Patient Advice and Liaison Service (PALS) providing on the spot help and information about health services and independent complaints advocacy (ICAS) where people can get help to pursue formal complaints. The NHS complaints procedure will be replaced with a more responsive and independent mechanism for dealing with complaints. Likewise, the system for clinical negligence is currently being reformed to ensure disputes are resolved more quickly and more satisfactorily. Patients' Forums will be set up in every NHS trust and PCT to influence the day to day management of health services by the Trust, and will monitor the effectiveness of the PALS and ICAS in their area. Patients' Forums will have a member appointed as a Non Executive Director on the trust board. A new Commission for Patient and Public Involvement in Health (CPPIH), will establish, support and facilitate the co-ordination of Patients' Forums. The forums of PCTs have the responsibility to provide ICAS and commission it where that is appropriate.

In each community, PCT Patients' Forums will be a key resource for local citizens, helping and supporting community groups and promoting better public involvement. They will do this through outreach teams, working in communities with local people. These teams will also help to integrate the work of Patients' Forums and PALS strategically by bringing together data from their activities regularly to share lessons and identify trends. To ensure that the outreach teams respond to local priorities, Patients' Forums will work in partnership across wider health economy areas, to guide local work programmes. An important function for the Patients' Forums will be the reporting of trends and conclusions drawn from the entirety of patient experience data and reporting this to local decision-makers. In particular this will be to the Overview and Scrutiny Committees of local authorities undertaking the role of health scrutiny. OSCs will have new powers to scrutinise and review health services, and will have the power to refer contested service changes to the Secretary of State.

At the centre, the CPPIH will oversee the new system. It will set up, fund and manage patients forums and the delivery of ICAS. It will be a powerful means of aggregating and promoting information picked up from the work of Patients' Forums and from the delivery of ICAS. It will publish its evaluation of the system of patient and public involvement, but importantly it will also have the function of reporting any issue of concern to patient safety and welfare that it becomes aware of through its analysis of patient experience data. In such circumstances it will report to bodies such as the Commission for Health Improvement, the National Patients Safety Agency, and perhaps the Police if that is appropriate.

In more detail:

In the last two sessions, the Government has legislated to abolish CHCs and establish the new system of public and patient involvement (Health and Social Care Act 2001, NHS Reform and Health Care Professions Act 2002). The overall position once fully implemented will now be:

A Patient Advice and Liaison Service in every NHS trust and PCT, to:

- resolve concerns on the spot before they become major problems;
- provide information to patients, carers and their families about local health services and put people in contact with local support groups;
- tell people about the complaints procedure and inform people about independent complaints advocacy support;
- act as an early warning system for trusts and Patients Forums by monitoring trends and highlighting gaps in service and making reports for action to trust management.

Independent Complaints Advocacy Services (ICAS):

The Health and Social Care Act 2001 places a duty on the Secretary of State for Health to make arrangements for advocacy services to be provided to people wishing to make a complaint about their NHS care or treatment. The service has been piloted this year and will be introduced nationally once PCT patients' forums are established in 2003/04.

We have recently funded 113 pilots across England. Evaluation of these will inform development of national standards by the Commission for Patient and Public Involvement in Health.

A Patients' Forum in every Primary Care Trust and NHS trust, to:

- monitor and review the services arranged and or provided by the trust from the perspective of the patient – this includes both the range and operation of services;
- seek the views of patients receiving services provided or arranged by the trust;
- inspect premises where NHS services are delivered;
- make reports and recommendations based on the views and experiences of patients and carers to the trust management. These may be included in the Trusts annual prospectus, along with the Trust's response;
- refer matters of concern to OSCs and the CPPIH (below), Strategic HAs, CHAI and the National Patient Safety Agency etc – and to any other person or body the forums deem appropriate, including the media;

- be represented on trust Boards at Non Executive Director level (Forums will select one of their number to be put forward for appointment to Trust boards by the Appointments Commission. Their appointment be treated in exactly the same way as every other Non Executive Director).

PCT Patients Forums at PCT level will monitor and review the services commissioned from Trusts by the PCT and, in addition:

- promote the involvement of the public in decisions and consultations on matters affecting their health, not just the NHS;
- provide training and support to empower local communities, and in particular excluded groups, to identify issues affecting their health, and take action to influence change on those issues;
- Provide independent complaints advocacy and where appropriate commission from specialist providers ;
- identify trends and concerns resulting from PPI activity and make reports to decision-makers;
- Work with the other trust forums in their areas to ensure a strategic and cohesive view is taken and acted upon;
- provide a one stop shop service by providing advice and information to the public about public involvement and information and support about complaints;
- Monitor and review how well the NHS is meeting its duty to involve and consult the public – section 11of the Health and Social Care Act.

A new independent body to oversee the system of PPI – the Commission for Patient and Public Involvement in Health (CPPIH) will:

- set up, fund, staff and performance manage all patients forums and thereby the delivery of ICAS;
- appoint all members to patients forums;
- set quality standards for, and issue guidance to Patients' Forums and providers of independent complaints advocacy support;
- submit reports to the SofS on how the whole system of patient and public involvement is working and advise him about it;
- make reports as it sees fit to other national bodies such as CHAI, the National Care Standards Commission, the National Patient Safety Agency and any other body (inc. the media) on patient and public involvement issues and issues that in its opinion give rise to concern about the safety or welfare of patients
- carry out national reviews of services from the patient's perspective – collating data from forums and making recommendations to the Secretary of State and to other bodies and persons it considers appropriate.

Sharon Grant has been appointed Chair designate of the Commission – and Laura McMurtrie as Chief Executive, Designate. Commissioners will be appointed shortly. The Commission will go live in January 2003.

Overview and Scrutiny Committees (OSC)

From January 2003, all local authorities with social services responsibilities (county councils, London Borough Councils and unitary authorities) will have the power to scrutinise health services. This contributes to their wider role in health improvement and reducing health inequalities for their area and its inhabitants. These powers come with additional teeth.

In summary, OSCs will:

- take on the role of scrutiny of the NHS – not just major changes but the ongoing operation and planning of services;
- be able to refer contested service changes to the SofS;
- be able to call NHS managers to give information about services and decisions;
- report their recommendations locally;
- have to be consulted by the NHS where there are to be major changes to health services.

A statutory duty on the NHS to consult and involve patients & the public:

Section 11 of the Health and Social Care Act 2001 places a duty on NHS trusts, Primary Care Trusts and Strategic Health Authorities - to make arrangements to involve and consult patients and the public in service planning and operation, and in the development of proposals for changes. This is a new statutory duty, which means consulting and involving:

- not just when a major change is proposed, but in ongoing service planning
- not just in the consideration of a proposal, but in the development of that proposal; and
- in decisions about general service delivery, not just major changes.

The duty to involve and consult will be commenced from the 1 January 2003.

Guidance has been developed by an expert group, with a view to issuing this to the NHS in January.

**Department of Health
Patient and Public Involvement Branch**