1. Introduction

2017 was a truly amazing year both for the city of Hull and for NHS Hull Clinical Commissioning Group. The city played host to the biggest celebration it has ever seen with 365 days of events to celebrate its status as UK City of Culture. By signing up as a major partner in Hull 2017, Hull CCG played a key role in shaping the community programme.

The CCG itself was also celebrating in November 2017, when it was announced as the winner of HSJ CCG of the Year, which followed off the back of an ‘outstanding’ rating from NHS England. These accolades were an acknowledgement of our strong clinical, system and financial leadership as local commissioners, and the HSJ judges in particular recognised our desire to capitalise on culture’s potential to empower people and communities. Further on in this report we describe some of the tangible health outcomes from our city of culture year.

NHS Hull CCG would like to acknowledge the strong partnership approach to communications and engagement with Hull City Council, and in particular our joint delivery of the People’s Panel, the Hull 2020 Champions programme and the Hull Place Plan. With the support of our other partners; our local health service providers, Humberside Fire and Rescue Service, Humberside Police, the Office of the Police and Crime Commissioner and our many voluntary and community sector organisations we are able to work collectively to ensure that local people and communities truly have a voice in the development of local plans and services and are at the heart of everything we do.

Before the end of 2018 the Communications and Engagement Strategy will be reviewed and refreshed and will set out our ambition for further developing all of our partnership working and building on our already strong community connections.

2. Having your say

NHS Hull CCG continues to meet its duty under section 14Z2 of the Health and Social Care Act and publishes the outcomes of our engagement work on our website www.hullccg.nhs.uk/have-your-say. The CCG was rated ‘Good’ under the NHS England Assurance Rating Patient and Community Engagement (2016-17).

The CCG has a strong record of local engagement and partnership working and continues to build on its well established links with local communities, specialist interest groups, voluntary sector organisations, local businesses and our wider stakeholders and partners. The introduction of a new robust equality impact assessment process further strengthens the engagement process and ensures that we identify and speak to the right people, at the right time and in an inclusive and accessible way.

Our CCG Governing Body has three lay representatives, including one with specific responsibility for Patient and Public involvement. The CCG is required to seek the views of the local Overview and Scrutiny Committee in regard to its formal duty to consult with the public, and provides regular updates on its informal engagement activity.
The CCG also works closely with Healthwatch Kingston upon Hull, as the independent voice of the community on health and social care matters, and Healthwatch has senior level representation on its Primary Care Commissioning Committee.

There are lots of ways that people can share their experiences of care. This can be through the providers of that service (hospitals, community services, mental health services and GP practices), through the CCG’s Patient Relations Service, via Healthwatch, by completing a national survey for example the GP Patient Survey, the National Impatient Survey etc.

People can get involved in one of our many engagement activities, for example, attending one of our public events, joining the People Panel, becoming an Ambassador or a Hull 2020 Champion or encouraging their employer to sign up to Working Voices.

3. Increasing community involvement

The Five Year Forward View sets out a commitment to create new relationships with communities and citizens, rethinking the boundaries between health professionals and patients, carers and the voluntary sector, involving them much more effectively in decisions about health and care services.

NHS Hull CCG has a number of programmes which embrace our inclusive approach to community involvement:

3.1 Hull 2020 Champions

The Hull 2020 Champions are community groups and individuals who are supported to develop their ideas to improve health and wellbeing.

“I never realised before meeting the NHS Hull CCG team that you were so supportive of communities, but the many ways in which you support local organisations and individuals to improve people’s health in their localities and their homes has been a breath of fresh air.”

- Inspire Communities

Over past 12 months over 700 people working in communities, including Hull 2020 Champions and Hull 2017 (City of Culture) volunteers, have accessed various training opportunities either co-ordinated or delivered by the CCG. These include the following:

- 2 Day Mental Health First Aid Training
- CPR Training
- Prevent extremism/Terrorism training.
- Adult safeguarding/Modern Slavery
- Defibrillator Training

The CCG facilitates regular Hull 2020 Champions network meetings to enable idea sharing and future project planning. It also supports champions to access external funding partners, with over £140,000 of additional funding being attracted to groups as a direct result of the CCG’s support. Next steps for the Champions programme is for as many people as possible to be trained as Cancer Champions during 2018/19 and to build on community networks in order to develop more mutual support programmes.
3.2 Ambassadors
Hull CCG’s Ambassadors are a group of local residents who have a particular interest in health and support the CCG in a voluntary capacity.

During 2017 the Ambassadors worked with us to review their role and the aim of the programme. Ambassadors have been actively involved in developing and market testing the CCG’s new website, as well as supporting service procurements and participating in the bid assessment process. They have also been trained in semi-structured interview techniques in order to conduct interviews with people who are in the cohort that will likely be users of the new Integrated Care Centre (ICC). Feedback from the interviews will inform a questionnaire, which will be used to develop a Patient Reported Outcomes Model (PROM) for the ICC.

The Ambassadors have also expressed a desire to be more proactive in developing preventative projects to be piloted, and which if successful, could be adopted more widely across the city. One such project is working with tattoo artists to spot signs of skin cancer.

3.3 Working Voices
Working Voices is a programme targeting local employers to ensure their workforce has opportunities to give their views. Twenty three Hull businesses have signed up to the project, which in public engagement terms provides the potential to reach approximately 20,000 people with whom the CCG may not otherwise engage with.

“What organisation wouldn’t want happy and healthy staff? From a commercial point of view Working Voices is sound business sense. Sometimes it’s the first time individuals have realised how they can make a difference in influencing the shape of the NHS.”

- The Deep, Hull

As well as developing links for consultation the other focus is supporting workforce health and wellbeing. When signing up to the programme, every organisation’s workforce is surveyed on their individual health issues and concerns and a targeted support package is developed with businesses linked to partners such as stop smoking and drug and alcohol teams.

“We felt Working Voices was a really important initiative, for our staff to have a voice and to be involved consulted on changes in the health arena.”

- Humberside Fire and Rescue Services

In response to feedback from employers and their workforces, the CCG worked with the businesses to develop a series of breakfast and tea time seminars, tackling areas such as emotional wellbeing and modern slavery.

4. Creating Healthy Communities

4.1 The impacts of Hull 2017 and beyond
NHS Hull CCG was a major sponsor of Hull City of Culture and our investment ensured high calibre events took place outside the city centre; in six months 32,500 people had attended the Hull 2017 Back to Ours events in their own neighbourhoods.
One of the huge successes of 2017, specifically supported by NHS Hull CCG, was **Land of Green Ginger**, a citywide project which went out into the heart of communities and actively engaged with the previously least engaged residents through an innovative programme of audience development, participation and co-creation. This resulted in six ‘Acts of Wanton Wonder’ across the city, each a unique event rooted in the neighbourhood in which it was delivered.

Land of Green Ginger was one of year’s most successful projects in terms of engaging those from the most deprived wards in the city and having a positive impact on confidence and connectivity:

- 94% of audience members said that Land of Green Ginger placed the community at the centre.
- 70% of audience members said that Land of Green Ginger had led them to speak to people in the community that they normally wouldn’t have interacted with.
- 82% of people said they felt happier as a result of attending the Land of Green Ginger Act that they attended.

One of our other priorities for our city of culture year was to ensure that age would not be a barrier to getting involved in the cultural activities, one example of this was supporting the delivery of hands-on circus skills workshops for elderly residents and staff at six community day care facilities in Hull. The project focused on how older people can be more active and on what they could do, rather than what they couldn’t do. We wanted to be truly inclusive and the people who took part in the events certainly played their part in making the year so special.

In March 2018 a major conference **The Impacts of Hull UK City of Culture 2017** shared an assessment of the year. This summarised that in terms of the outcomes for society and wellbeing, people’s confidence to participate in cultural, community and recreational activities had significantly increased across the city and participants reported positive effects on their wellbeing, including improvements to self-esteem, confidence and happiness levels. The report concluded:

- There were significant increases (+9%) in residents’ willingness to take part in a range of cultural and non-cultural activities, including volunteering and sport.
- **8 out of 10** participants stated that being part of a project made them feel happier.
- **18%** of residents said that Hull 2017 inspired them to attend a course or study something they saw during the year.
- Over 100 education institutions took part in Hull UK City of Culture 2017’s learning and participation programme, ‘No Limits,’ reaching **56,000** children and young people. As a result of taking part:
  - **40%** felt happier;
  - **34%** reported an increase in self-esteem;
  - **63%** were encouraged to take part in more creative activities in the future.
- **Over 2,400 volunteers** undertook **337,000 hours of volunteering**. This is equivalent to **38.5 years**.
- Amongst the Hull 2017 volunteers, **71%** agreed or strongly agreed that there had been an improvement in their self-esteem, and **68%** that there had been an improvement in their confidence, directly linked to their participation in the year.
We are now finalising our continued partnership with Absolutely Cultured, the new culture company, to build on the success of this first year around delivering the legacy programme in particular extending the volunteering programme beyond the cultural sector, and supporting large-scale community commissions that celebrate the stories of people and their city.

5. Working in partnership

5.1 The Hull Health and Care Place Plan
NHS Hull CCG has continued to work even more closely with Hull City Council following the alignment of health and social care budgets last year. We have established an integrated approach to commissioning services along with appropriate governance arrangements for decision making.

The CCG and Hull City Council have a number of shared and embedded posts across the two organisations including a Public Health Improvement Officer and a Marketing Officer based within the CCG’s Communications and Engagement function, complementing the CCG’s own team of eight.

The Hull Health and Care Place Plan has been revised and the two organisations are leading the transformation programme in partnership with the wider public sector. One of the key priorities within the plan is tackling the wider determinants of health and the partnership is working together to:

- Deliver fundamental changes to the lives and lifestyles of our population
- Foster a culture of health promotion, ill health prevention and joint ownership of health and care issues
- Build resilient communities to manage need

A Strategic Partnership Board has been established to oversee delivery against the plan. Communication and engagement is clearly a key strand of work, and a multi-agency community engagement group has been established to shape and deliver this particular element.

5.2 Giving children and young people a voice
Hull has a good track record for its work with children and young people; the Headstart programme, service users supporting redesign of CAMHS services, developing [www.howareyoufeeling.org.uk](http://www.howareyoufeeling.org.uk) a bespoke website to support young people with emotional and mental health issues.

This year has seen Hull CCG link up with local social marketing agency Eskimo Soup to develop Got Your Back, a social media brand to support early intervention and prevention work on a range of health and social challenges facing young people in Hull. Research was conducted with young people to establish some of the issues that are important to them in order to inform the approach for the campaign. The next step was to establish an Editorial Board made up of young people and this now meets monthly. The Editorial Board directs the programme of work, which as well as supporting campaigns and media projects, will act as general communications channels with young people on the wide range of issues.
6. Formal Consultation and engagement undertaken during 2017/18

Formal consultation is the statutory requirement of NHS organisations to consult with patients, the public and stakeholders when considering 'significant' service change.

All consultations need to adhere to the ‘Gunning Principles’ and in line with NHS England guidance ‘Planning, assuring and delivering service change for patients’.

During 2017-18 the CCG has not undertaken any formal statutory consultations. However, there have been a number of public engagement activities that supported service development and redesign. At the start of any service redesign or re-procurement a detailed Equality Impact Assessment (EIA) is conducted and this is used to inform the engagement plan and methodology selected. Demographic information is routinely collected as part of all surveys and questionnaires, and ongoing monitoring against the EIA is undertaken during the engagement and approaches used revised and modified if appropriate.

Any printed materials are available in other languages, easy read and other formats and an established process is in place to access translation and interpretation services. All venues used for our events are fully accessible and specific needs are always taken into account. All our engagement activities are constantly reviewed to ensure that approaches are inclusive and support the organisation to meet its Public Sector Equality Duty.

The main programmes of engagement work undertaken during 2017/18 are summarised below, and full engagement feedback reports are available at: https://www.hullccg.nhs.uk/have-your-say/

6.1 Short Breaks service engagement - with Hull City Council

NHS Hull Clinical Commissioning Group (CCG) supports Hull City Council to commission a range of short break services are available to meet the needs of disabled children and young people to enable their parents and carers to receive a break from caring.

As part of a review of this provision, the CCG took a lead role in coordinating the engagement work, taking a co-production approach with support from the Hull Parents Forum which is facilitated via local charity KIDs.

The goals of the engagement work were to find out:

- What activities children and young people currently access to give them and their parents or carers short break.
- What barriers there might be preventing access to the activities?
- How we can improve these services across the city.

1500 printed questionnaires were distributed to people who were most likely to access short breaks services and a link to the questionnaire was shared on social media. We received 301 completed questionnaires, of which 237 were paper copies and 64 completed online. 26 participants attended our four focus groups which were held with the parents and carers of children with special educational needs or disability.
**What we found out:**
Feedback told us that the most accessed types of short breaks are those that are sporting activities in the holidays and respite / overnight breaks. Over a third of respondents do not use short breaks; and of those who have used them, half the parent / carer respondents feel it does not meet the needs of parents and carers, however, 61% did feel it met their children’s needs.

There appears to be a level of inequity experienced with many participants and respondents feel that accessing short breaks is a struggle. There are two key barriers to service; the first is lack of information about what services are available and how to access those services, for parents, carers, associated professionals and staff. The second is the range of assessment and referral process, parent and carer comments suggest this is complicated and takes time; although there are a range of assessments to access different short breaks at different levels and the process does not feel transparent.

From a parent and carer perspective it is clear that short breaks services require improvement, specifically to improve access to services, and that short breaks meet the needs of those using them. Better information about the short breaks that are available, eligibility and how to access services needs to be developed with parents and carers and children and young people who are likely to use the provision in question. Information also needs to be developed for staff and associated practitioners to support signposting.

As half the people completing the questionnaire stated that they would like to be involved further, a co-production approach is recommended, employing techniques that do not rely on meetings or face to face sessions due to the limited time available to those looking after children and young people with SEND. A client experience programme should be put in place to regularly review the short breaks provision and ensure they are improving to support the needs of families and young people.

The review of the Short Breaks service will now be included within the Special Educational Needs and Disabilities (SEND) work programme which has been developed following the joint Ofsted and Care Quality Commission Inspection in October 2017. For further information please visit: [hull.mylocaloffer.org](http://hull.mylocaloffer.org)

6.2 Primary Care Extended Access
The General Practice Forward View (GPFV) published in April 2016 set out plans to enable clinical commissioning groups (CCGs) to commission and fund additional capacity across England to ensure that, by 2020 everyone has improved access to GP services including sufficient routine appointments at evenings and weekends to meet locally determined demand, alongside effective access to out of hours and urgent care services.

To inform the development of this service change, NHS Hull CCG has undertaken an engagement exercise in the early part of 2018 to validate and build upon previous patient experience intelligence relating to Primary Care.

The goals of this engagement work were to:
- Gain people’s views on the current ways to access services in primary care.
- Determine what extended opening hours would be preferred by the general public.
- Gauge appetite for alternative ways of booking and accessing primary care support.
Approximately 5000 printed questionnaires were distributed through primary care providers. A link to an online version of the questionnaire was shared on social media and by email to existing contacts. The engagement received local media coverage, this combined with social media reach lead to just over 500,000 opportunities for people to be exposed to the call to action of completing a questionnaire. 1238 people completed the questionnaire, the highest response to a single engagement or consultation exercise undertaken by NHS Hull CCG to date.

What we found out:
The engagement findings gave us valuable information in relation to specific topics:

Appointment convenience
- In relation to GP practice opening hours, consideration should be given to opening in the evening rather than the morning during the week and also opening for some or all of the weekend, particularly between 10am and 4pm.

Alternative access
- When offering alternative practitioners, the clear preference is that they are from the same practice. It is recommended that supplementary engagement be undertaken to determine if the practice population consider an alternative practitioner from within the GP practice grouping to be preferred over a practitioner from another practice or grouping altogether;
- Alternative methods for booking appointments within GP practices should be explored, with particular focus on online methods;
- Alternatives to face to face appointments should be explored, with particular focus on real time communication, and the use of online modalities.

Travel and location
- If an alternative location is being explored to improve access, the preference would be that it is less than 15 minutes travel, or 3 miles or less, for the majority of the practice population.

The full engagement report was considered by the project team working on the extended access procurement and the elements highlighted were built into the service specification. The appointed provider will work closely with the CCG to ensure that the feedback is forefront of the mobilisation plans, and that continuous patient feedback is a key strand in ongoing service development. The CCG will also ensure that areas such as online consultations and appointment bookings are key features of the CCG’s Primary Care Digital Access Strategy.

6.3 Co-producing a new care pathway for Down’s Syndrome
One of the most rewarding pieces of work during 2017-18 was the development and launch of the new care pathway and clinical guidelines for Down’s Syndrome by families, carers, the CCG, the Downright Special Network, local health professionals and people with Down’s Syndrome.

Initial discussions with parents and carers had identified gaps in their awareness of services which had resulted in children missing out on vital support. They highlighted the difference in
quality of care they had received, and their wish to have a consistent approach to referrals and support while maintaining personalisation.

The CCG responded in bringing together a Downs Syndrome specialist nurse and local support groups to work with the families, carers and health and care professionals using an ‘experienced based’ co-design approach. A series of in-depth focus groups for parents and carers and for professionals explored key issues and barriers in accessing health services towards developing a new pathway.

It was clear during the process that many parents had not had the chance to voice their experiences of health care at the point of diagnosis and their day-to-day interactions with health professionals. As a result more sessions took place to ensure that the pathway reflected these unique perspectives.

This piece of CCG-led engagement involved 36 health and social care professionals, 21 parents and carers, and 6 people living with Down’s Syndrome. When parents were asked how they would like to launch the pathway, the overwhelming response was for a celebration both of, and for, their children to coincide with World Down’s Syndrome Awareness Day on 21st March 2018.

At, what proved to be a very emotional event, parents spoke of their pride and gratitude to be able to develop the pathway.

Find out more about the Down’s Syndrome pathway for Hull at www.hullccg.nhs.uk/downssyndromehull/

6.4 The People’s Panel

The People’s Panel is a quarterly survey conducted in partnership with Hull city Council and is used to gather public insight and feedback on a range of themes. The survey moved to an online only basis survey early in 2017, due to rising costs associated with postage. The panel consists of between 2400 and 2500 online members with each survey also promoted to non-members; on average half of the membership responds to each survey.

The make-up of panel members is on the whole representative of Hull's demography. However, 16-34 years olds and BME communities are under-represented; targeted recruitment campaigns will be undertaken in 2018/19 to address this imbalance. The survey responses from Hull are weighted to be more demographically representative of the whole Hull population. Responses are weighted based on age, gender, ethnicity and limiting Long-term illness (LLTI).

Results from the surveys conducted in the time period relating to this report were used to develop the Hull Place Plan, to inform the Pharmaceutical Needs Assessment, to inform a number of mental health programmes of work and to measure the progress of the CCG Action Plan for Patient Choice.
Survey results June / July 2017
Conducted over 6 weeks in June / July 2017 the survey received a total of 1291 responses.

94% of the survey respondents identified as a user of healthcare services, with 4% using social care. Only 9% stated they work in healthcare and 4% in social care; of these 89% said they enjoy the work they do and 87% said they believe they make a positive difference.

Positively 54% of overall respondents said they tend to feel happy, 53% in control and 51% confident. Having said this, 40% of respondents stated they felt stressed, with 24% reporting they felt anxious yesterday. Compared to when the same questions were asked in December 2013 generally panel members today feel less stressed, but also less in control and less confident. The majority agreed that they would talk to someone if things were getting on top of them, specifically family and friends. Of these, only 26% said they would speak to their GP, with just 20% saying they would seek support through a specialist service.

95% agreed that anyone can experience mental ill health, with 94% stating people with mental health issues need support, not stigmatisation and 83% of respondents stating that mental and emotional illness should be treated as seriously as physical illness. In support of this view, 73% of members felt that spending on mental health services should be a priority.

99% of responders knew where their nearest pharmacy was with 55% agreeing they could access a pharmacy outside of normal working hours. 37% of panel members would find it difficult to access a pharmacy outside of these hours – this is significantly higher than when the same question was asked previously, with the majority citing opening hours not being late enough as the reason.

95% stated they are aware that pharmacies can provide advice on minor ailments, with 84% aware that they can dispose of medicines which are no longer needed and 78% knowing pharmacies can offer advice on current health problems and long term conditions.

97% agreed they only want to attend the hospital when absolutely necessary, with 92% only wanting to go in an emergency or for specialist treatment. The survey showed general themes around respondents’ feelings towards the key issues facing healthcare, namely that patients in A&E and hospital beds “don’t need to be there” and that the respondents themselves “couldn’t have an appointment with their GP on the day they wanted to”.

When asked to rate their top health priorities, panel members stated children having the best start in life was the top priority, followed by people taking responsibility for their own lifestyle choices and looking after themselves and those close to them.

Survey Results September / October 2017
This survey looked at neighbourhood and community plus mental health. It ran for 6 weeks during September / October 2017 and received 1161 completed responses.

In terms of community, 49% of respondents said they speak to neighbours regularly, with 54% saying they feel like they belong to their neighbourhood – only 4% of people stated they do not get on with their neighbours. The survey found respondents were much more likely to help out a neighbour, than ask for help themselves with 83% saying they would shop for essentials in a time of need and 78% saying they would lend them things like a pint of milk or cup of sugar. Positively 64% of respondents stated they feel like they belong to Hull.
Following this, panel members were shown fourteen mental health conditions and asked which they were aware of, had experienced personally and which someone they know had experienced. The majority of respondents had heard of each of the fourteen conditions listed, 98% were aware of stress and anxiety with over half having experienced either one or the other, 96% aware of grief and bereavement, with 64% having experienced it themselves and 95% aware of depression. 83% of the respondents had personally experienced at least one of the mental health conditions listed, typically having experienced 3.1 of the conditions.

Of those who experienced one of the mental health conditions listed, approximately a quarter did not seek any help whilst the remaining three quarters did seek help. Of those who sought help, 64% got it from friends and family, plus 65% received help from a professional. Of those who did not seek help 67% stated embarrassment or shame as the barrier, this was followed by 41% of respondents not knowing where to get help and 32% because of a fear of letting themselves or others down.

The only thing the majority of respondents agree would encourage people to seek help for mental health problems is if people were more open about mental health and services were designed to better suit the individual. Specifically, respondents cited the need for a service that is quick to access, informal and non-committal.

Survey results December 2017 / January 2018
Covering patient choice themes, the survey was conducted in December 2017 / January 2018 over a 6 week period. This received 1203 completed responses.

The majority of respondents were aware of their choices when accessing NHS services, with 63% agreeing with the statement around GP practice choice and 70% with dental practice choice. 53% did not know they had patient choice when it comes to specialists.

87% of respondents think it is important to have choice in the treatment they receive, and 88% on their choice of whether to receive treatment or not. Interestingly, panel members did not appear to value the choice in which specialist carries out their treatment, or whether or not it is undertaken in a private healthcare setting.

66% of panel respondents agree that the most important thing relating to their choice of GP practice or dentist was the waiting time for an appointment, 65% valued the location in relation to their home and 54% the convenience of appointment times.

The survey also showed that 59% of people feel comfortable making choices about their treatment, with most also stating that they are very involved in their own healthcare and are able to access the information they need to be able to make a choice about their treatment.

47% stated that their GP or dentist always informs them of their choices; with a split response on whether they are encourage to make choices about their treatment, 36% saying they are, 32% saying they are not. This suggests a polarisation of opinion which might be a result of other factors such as patient demographic, choice of health care provider or personal experience of NHS services.
7. Supporting Primary Care

7.1 Digital Access
The CCG’s Communications and Engagement team has supported the implementation of GP Online services to enable patients to book and cancel appointments online as well as order repeat prescriptions. Full promotional campaign management was also provided for eConsult, a new digital consultation service piloted in 21 practices across Hull. Tailored support with promotion was given to each of the practices signed up, as well as developing targeted messages, the promotion of case studies, press coverage and a city wide bus and radio advertising campaign.

Evaluation of eConsult was also undertaken to help inform future promotional activities. This found that the most common way patients found out about the service was through their GP practice, with staff being active in the promotion of the service and feeling as though patients could benefit from using it.

Patients reported to have used eConsult on occasions where they were unable to get an appointment at the time they had wanted, or because it was too long to wait for an appointment. Of those who were using the system, 40% saw someone from their GP practice, with a quarter of these enquiring about a new or existing condition. 29% of users were satisfied with their use of eConsult and would recommend it to family and friends.

Of those who were aware their practice offered eConsult, but did not use it, 39% said they would prefer to see someone face-to-face and 43% simply had not needed to use it. 55% of those who took part in eConsult evaluation said they were interested in using it in the future. Hull GP practices will soon be moving to a different electronic consultation system which has been procured by NHS England for all the Humber Coast and Vale CCGs. A reinvigorated promotional campaign will then be developed using the evaluation from the pilot phase.

7.2 Primary Care Estate Development
Monthly communications meetings between the CCG and City Care (our health estate developer) have taken place and a joint delivery plan has been agreed.

During 2017/18 the CCG and Citycare support the Springhead Medical Practice with a programme of engagement activity around the proposed development of new premises for the surgery (West Hull Health Hub). Public drop in sessions have been held along with meetings with ward councillors and leaflet distribution to residents living near the development site. Whilst concern about the proposal was in the main directed at an adjacent housing scheme, there were some issues raised in the engagement period relating to traffic volume, flood risk and protection of wildlife.

All of these issues have been investigated and mitigated as part of the planning application, and two follow-up information events provided the opportunity to go back to residents and explain the actions taken as a result of the concerns they had raised. Ongoing engagement with both local residents and patients at the practice will continue as work starts on site and the development progresses.
The CCG has also continued to produce the bi-annual publication My City, My Health, My Care which informs patients, the public and stakeholders about developments in primary care services, including the development of practice groupings, information on record sharing and new clinical roles within primary care. The latest edition of My City, My Health, My care is available on the CCG’s the website www.hullccg.nhs.uk

8. Campaigns

8.1 Maternal Smoking Campaign

The CCG has continued its ‘First Steps to Stopping Smoking’ campaign which aims to address the fact that one fifth of pregnant women in the city continue to smoke at the time of delivery, raising the risk to both them and their babies. During 2017-18 more than 300 frontline staff were trained in monitoring smoking in pregnancy to coincide with the introduction of Carbon Monoxide (CO) monitoring in community and GP settings for pregnant women, which would be recorded on a promotional ‘smoke free’ tracker incentive card.

The campaign, led by NHS Hull CCG, includes colleagues from Hull and East Yorkshire Hospitals, Hull City Council and City Health Care Partnership CIC (CHCP), with the partnership approach praised by Public Health England.

Campaign key messages were:

- If you smoke during pregnancy your baby could suffer with asthma for life; take your first steps to stopping smoking now
- Each cigarette you smoke during pregnancy can seriously harm your unborn baby; take your first steps to stopping smoking now
- Don’t risk an increased chance of miscarriage or still birth; take your first steps to stopping smoking now
- Smoking in pregnancy could mean your new-born faces breathing, feeding and health problems in early life; take your first steps to stopping smoking now

A new video with local mums talking about the health benefits of stopping smoking while pregnant can be viewed by searching ‘First steps to stopping smoking’ on YouTube. The campaign was supported by internal communications, social media, print materials, outdoor media and a PR campaign to communicate messages and directly engage target audience.

Outcomes/achievements

Initial project evaluation suggests the following outcomes and achievements, with work to plan further initiatives and build on this, planned in for 2018/19:

- Smoking at time of delivery rates reduced by just over 2%.
- Women who were successful in quitting often cited their own or their babies’ health as motivation, with a clear understanding of the risks to smoking in pregnancy.
- Many women involved in the evaluation of the project cited multiple quit attempts throughout pregnancy, again they showed a clear understanding of the risks of smoking in pregnancy and openness to the option of quitting smoking.
- Women often expressed ‘regret’ and ‘fear of being judged’ when smoking during pregnancy; something which can be harnessed in future marketing campaigns.
Many women identified as a smoker during pregnancy reported to have either become smoke free following the birth of the child, or seriously considered it. The multi-agency initiative was highly successful in improving communication between the different agencies involved and allowed for improved partnership working to talk the wider issues relating to smoking in both pregnancy and the adult population.

8.3 Mental Health – Transforming Care Partnership
Hull CCG provided strategic communications and engagement leadership across 7 organisations for the Transforming Care Partnership for children young people and adults with a learning disability and/or autism.

A communications plan was produced to support:
- Regular newsletters
- Easy read publications
- Stakeholder briefings
- Host and maintain website on behalf of partnership
- Carer and user involvement in development of plans

Part of this programme of work has seen the redevelopment of Townend Court and the establishment of service users and parents groups to be able to speak about their experiences at the centre and what they may like to see in the future.

8.4 Teaming up for Health
The CCG entered into a partnership with the two professional rugby clubs, Hull Kingston Rovers and Hull FC to develop a fresh approach to tackling some of the key health issues such as obesity, mental health, long term conditions and social isolation. By using the club’s extensive networks both in terms of their fan base and also their community outreach programmes it enables the CCG to engage with a new audience in a different way.

The CCG also supported a number of other key campaigns throughout the year including:

- Act F.A.S.T. (Stroke awareness)
- Be Clear on Cancer
- Dementia Awareness
- Diabetes
- Flu
- Love your Lungs
- Medicines Waste
- One You
- Self-Care Week
- Stay Well This Winter
- Urgent Care
- White Ribbon (Eliminating violence against women)
9. Media
January 2018 saw the revision of the CCG’s Media Policy and a review of the social media protocol. Social media continues to grow as an effective platform for communication, with real impact being shown in its support of engagement activity.

The CCG’s main twitter account currently has 7085 followers, which is an increase of nearly 1000 from the same time last year. The Facebook page attracted 1191 likes which is an increase of just over 600 on the previous year.

2017/18 is the first year we have employed Facebook advertising to support our campaigns and engagement work. For example, through the use of promoted posts on Facebook as part of the Eating Disorder pre-engagement work the CCG were able to reach approximately 40,000 individuals in the required demographic and encourage survey completion. Of those 40,000 who had an ‘opportunity to see’ the posts, almost 1,000 individuals took action and engaged with them, either by liking, sharing, commenting or clicking on the link and completing the survey.

Also during 2017, the CCG launched is new website which adhered to the revised NHS identity guidelines and was developed with support from our Ambassadors and feedback from staff.

10. Events
The communications and engagement team supported a number of events across the year.

Our main showcase event was our Annual General Meeting held in June. The venue in 2017 was the Guildhall and the theme was focused of city of culture. A Health Fair provided the opportunity for partner organisations including the voluntary and community sector and local charities to promote how they are supporting the health and wellbeing agenda.

The formal proceedings were followed by a Question Time style event, where senior leaders from the CCG face questions from the public. The whole event is streamed live to ensure accessibility to anyone not able to attend in person.

10.1 Commissioners on the Road
In May 2017 senior managers from the CCG and Hull City Council had the opportunity the view first hand some of the excellent community projects that have been supported by the two organisations through our Healthier Hull Community Fund, the Hull 2020 Champions programme or council Health and Wellbeing grant funding. The day-long visit gave senior managers the opportunity speak to people behind the three community projects: St. John’s Community Craft and Social Club, Hull4Heroes and Cooking up a Community, who all work with Hull’s vulnerable residents in different ways.

One of the St John’s club members, said: “I didn’t want to come to the club initially because craft isn’t my thing. But my cousin was a bit depressed so I said I would bring her along and really it’s done me a world of good because it’s started my artistic and creative skills. It’s given me a kick to get going again.”
Other events supported by the Communications and Engagement Team during the year included:

- **Living Well with Dementia** April 2017
- **Pride** July 2017 - where we undertook a questionnaire exploring the issues faced by the LGBT community in accessing health services.
- **UK Rescue Games** September 2017
- **Older People’s Week** October 2017 - where we asked for older people’s experiences of care and used the feedback to support the development of the service model for the Integrated Care Centre.
- **Health Expo** October 2017
- **A Day in the Life** November 2017 – a hands on event for local school children showcasing careers within the NHS
- **Men’s Health Event** November 2017

11. Future focus

During 2018/19 the focus for communications and engagement will very much be around the delivery of the programmes described within the Hull Health and Care Place Plan, and in particular the large scale community engagement work to support the Our People, Our Place project (Beverley Road Corridor).

We will also be undertaking engagement to support a number of commissioned services which are either being redesigned or re-procured. These include:

- Eating Disorders
- Speech and Language Therapy
- Sensory processing
- Children’s Autism
- Depression and Anxiety Service

There is also significant further work to support the Short Breaks review and delivery of the SEND action plan. We will be conducting some specific work with groups and organisations working with people with protected characteristics, in the first instance looking at our clinical policies and how these might affect particular groups of people.

The launch of extend access to primary care in the autumn will require a significant communications campaign

The CCG is also looking to further develop its online presence and following, and increase our use of digital channels including video story-telling, blogs and vlogs.
12. Getting involved

There are many ways in which the public can get involved in the activities of the CCG or provide feedback on the services it commissions:

To contact NHS Hull Clinical Commissioning Group:

Go online:  www.hullccg.nhs.net
Telephone:  01482 344700
Email:  HULLCCG.contactus@nhs.uk
Write to us at:  NHS Hull Clinical Commissioning Group
              2nd Floor, Wilberforce Court,
              Alfred Gelder Street,
              Hull.
              HU1 1UY

Follow us on Twitter:  @NHSHullCCG
Like us on Facebook:  /NHSHullCCG

To give feedback on a service, raise a concern, make a complaint or give a compliment:

Telephone:  01482 335409
Email:  HullCCG.Pals@nhs.net
Write to us at:  Patient Relations Team (same address as above)

To join the People’s Panel and take part in quarterly surveys about the things that matter to you:

Telephone:  01482 300300
Email:  panel@hullcc.gov.uk
Text:  The word Panel to 077795 563000
Write to:  Freepost RSJC-KKBE-ABXZ
            Hull City Council
            PO Box 15
            Hull HU1 2AB

This document is available in other languages and alternative formats. To request this please contact the Communications and Engagement Team on 01482 344700 or email us at HULLCCG.contactus@nhs.uk

Published:  September 2018