Establishing a Culture of Membership and Involvement

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Membership

Emma Dickens, Membership Manager
What is a member?

- An essential part of our Foundation Trust application
- Requirement or resource?
- Who?
- How many?
- What do we do with them once we have them?
- “Staff member” or “staff member”?!?
- So what happened to Patient and Public Involvement?

The membership team

- Small membership team
- 2 members of staff
- Shared vision and drive
Membership recruitment

- Target achieved!
- 7,400 public members
- 3,000 staff members
- Recruitment doesn’t stop
- Service users important
- Must be diverse and representative

Creating a community

- Newsletters
- E-bulletins
- Surveys
- Events, including social events
- “Members Meet…”
- Invitations from external organisations
- Always personal
- “Hello my friends!”
What members say...

We found the session enjoyable and informative. We were also overwhelmed by how kind everyone we came into contact with was.

I want to give something back to the organisation who has kept me alive and helped me to get to the stage of health I find myself at present.

(Involvement) gave me the opportunity to meet new people and examine my own personal values.

My day to day job doesn’t make me feel valued. Membership does.

It was the first time that I felt I was making a difference and not just ticking a box.

felt valued throughout the process.

Members making a difference

• Reading groups
• Staff recruitment panels
• Rapid improvement events
• Quality priorities
• Judging staff awards
• PLACE assessments
• Safe and Clean Care project
Members making a difference

- Personal, Fair and Diverse Champions
- Sharing stories with clinicians
- Dementia group
- Supporting patient feedback work
- Afternoon tea with in-patients

Youth Forum

- 11 to 18 year olds
- Forty founder members
- High schools and patients
- Service specific sub-groups
- CAMHS / Complex needs
- Logo and website design sessions
- Official launch
- Think Big
Staff members

- Still work to do
- Can it be meaningful?
- Same opportunities as public members
- Lunchtime talks and workshops
- Volunteering?
- Charity?

The new world of “Involvement”

- Why have two databases and two teams?
- Why resource members and not use them?
- Need for Patient and Public Involvement (PPI) remains
- Involvement Standards
- Requirement for statutory involvement
- Sometimes only a patient will do...
- York Street
- Prisons
York Street

Dan Barnett,
Business Manager for Specialist Services

Involving vulnerable groups

• Services for prisoners, homeless, asylum seekers and refugees
• Can be hard to engage with (or so we thought!)
• Puts them at the centre rather than a tokenistic addition
• It’s all about their stories
Fair Approach to Social Value

University of Leeds Centre for Innovation and Health Management

[Link to website]

What is social value?

• Things that we find meaningful in life
• Things that give us direction
• The wellbeing of individuals and communities
• The non financial impacts of the work we do in health
• Can be outcomes that we struggle to quantify
How does it work?

• Hosts conversations between service users, commissioners, staff, other partners
• Tell stories about what is good and what is less good
• Turn key themes from stories into ‘values’
• Turn these ‘values’ into new performance measures and tangible actions that are the result of the stories
York Street Social Value Workshop

• Multidisciplinary primary care service for homeless, temporary housed, refugees, asylum seekers and their children
• 1200 list size
• 19 service users, 5 staff, 3 partners, 1 commissioner
• 5 minute stories - What works well for you, what works less well?
York Street’s Social Values

• There are new and flexible ways to book appointments that improve access for all

• Staff are friendly, caring, welcoming, non judgemental

• York Street are a family for those who have lost everything
What we have done

• Digital inclusion project – tablets now in key partner agencies
• Values based recruitment using patients on the panel
• Updating performance measures and patient satisfaction survey
• Developing new business plan and vision – Centre of inclusion for health inequalities
Shortlisted for:

- Excellence in public participation – provider
- Excellence in participation to achieve insight and feedback
Prison Healthcare

Anne Cowman, PPI Lead for Prison Healthcare

Building a successful Involvement System in Prison Healthcare

- Establish good relationships between patient and professionals this entails a good mutual, trusting and respectful relationship
- The surrendering of some power of control by the health professional.
- The sharing of information and knowledge by both parties with a desire to engage
• Important to consider the nature of the prison setting in any exploration of involvement in prison healthcare.

• Service user involvement becoming more widespread through:
  • prisoner councils
  • community action teams
  • race and equality mentors

• Prisoner involvement is one of the criteria by which prisons are measured during official inspections HMIP (2004)

• There is a strategic plan to look at opportunities to optimise patient engagement in prison, see DOH (2007)

Innovation

• First scheme of its kind in the country est. 2008

• Involving prisoners in new initiatives, service improvement, redesign and delivery.

• Improved integrated working relationships between prison healthcare and prison workforce.

• Patients involved in interviewing healthcare staff.

• Effective working with Universities around research and involvement.
Aims and Objectives

• Involve prisoners in their own health care

• Give the unheard a voice

• Engage prisoners in the development and improvement of healthcare services

• Embed a culture of involvement throughout Leeds Prisons

• Educate staff at keeping patients at the heart of all we do.

Involvement and Partnership

• Successful working with healthcare and prison staff

• Representation from all ethnic minority groups within the prison community

• A non judgemental team of prisoners peer mentoring

• Prisoners as healthcare representatives
“I feel valued that my opinion is worth something.”

Healthcare Representative

• “Nothing about me without me”

• Focus groups with prisoners

• Promote a partnership approach between prisoners, prison and healthcare staff

• Provide a healthcare service that is equal to the outside community.
• Long term aim is to become a recognised model of patient involvement across all prison establishments.

• HMYOI Wetherby is live with young offenders 15-18 years old making active contributions around their health and their needs.

• Actively involving prisoner patients in research projects:
  • Managing Pain in Prison- Leeds University
  • Older Prisoners- Manchester University
  • Peers in Prison- Leeds Met University
  • Involve prisoner patients in service redesign and improvement.

Results and Benefits

• Improved access to healthcare

• 50% Increase in patients accessing healthcare

• Peer to Peer support in healthcare has reduced the daily less urgent interactions with staff

• Improvement in prisoner self-esteem, health literacy and health promotion

• Implementation of prisoners ideas towards service improvement

• Award Winning
Recognition

Any questions?
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