

North Oxfordshire Public Forum: Terms of Reference - REVISED

A) Aims and role

1. What is the Forum's role?

To represent the patient voice and views of North Oxfordshire residents about their health care services to Oxfordshire Clinical Commissioning Group.

2. What is Oxfordshire Clinical Commissioning Group?

A county-wide group led by Oxfordshire GPs which is responsible for planning, designing and paying for/purchasing health services. It is made up of 6 localities.

3. What is North Oxfordshire Locality Group?

North Oxfordshire Locality Group (NOLG) is made up of the GP practices in Banbury, Chipping Norton and surrounding villages. It meets monthly.

4. How will the Forum represent the patient voice and views?

The Forum will give patients a voice in the organisation of their health care through two-way communication with Oxfordshire Clinical Commissioning Group (OCCG). Activities will include:

- a) Representing needs and experiences from all patients registered to the NOLG GP practices, and their carers;
- b) Challenging OCCG constructively whenever necessary;
- c) Becoming involved in relevant consultations;
- d) Encouraging and supporting activities within the locality to promote good health;
- e) Nominating representatives to other relevant groups where invited: such as Primary Care Patient Advisory Group, locality community services group etc

B) Structure: Chair, Vice Chair(s) and Steering Group

1. How will the Forum be organised?

- a) The Chair of the Forum will give its views to the North Oxfordshire Locality Group (NOLG) and via Locality Forum Chairs meetings with OCCG's Chair and Chief Executive.
- b) The Forum will be led by a Steering Group which aims to represent each of the NOLG GP practice Patient Participation Groups. It may also invite additional members with a special interest in specific topics.
- c) The Forum will hold open public meetings or events at least twice a year – planned to be accessible to a wide range of people across the area.
- d) The Chair and Steering Group will plan the open meetings, and ensure good communication with patients and decision-makers between meetings.

2. Who will support the Forum?

OCCG¹ will support the Forum, its Chair and its Steering Group in line with the *Letter of Intent between OCCG and the Locality Forums* (Appendix 1) with:

¹ currently through the Locality Coordinator assisted by the SCW Commissioning Support Unit Communications & Engagement Team

- arranging and administering meetings, and paying appropriate costs and expenses
- providing and circulating information
- feeding the Forum's views into locality and county-wide decision-making
- providing training and information where needed to Locality Forum Chairs and members eg information governance.

C) Structure: Chair, Vice Chair(s) and Steering Group

1. Forum Chair's duties – three year term

- a) Chair forum steering group and public meetings
- b) Lead planning of the Public Forum agenda
- c) Work to ensure good two-way communication with the locality group and the countywide Locality Forum Chairs meeting, and to follow through actions from meetings
- d) Represent the Forum at the North Oxfordshire Locality Group and the Community Partnership Network
- e) Engage actively in the 6 Locality Forum Chairs group – approx. monthly
- f) Meet with other relevant local and county groups including HealthWatch Oxfordshire to pursue the forum's aims, and links to population groups who may be affected by inequalities
- g) Signpost local people to appropriate sources of support, including PALS services or OCCG's Patient Services for resolving current service issues or complaints
- h) The Vice-chair will support the Chair in these duties, and deputise where required.

2. Skills and abilities for the chair and vice-chair

The chair will be a registered patient of one of the NOLG practices who can demonstrate:

- a) Ability and willingness to represent a wide and diverse group of people without prejudice or preference
- b) Ability to network and engage people with differing views and opinions
- c) Very strong listening and advocacy skills
- d) Ability to engage with professionals in a formal business environment
- e) Ability to deliver work collaboratively with others and individually between meetings
- f) Ability to chair meetings inclusively to achieve aims

The **vice chair(s)** will need similar skills – but will also have the opportunity to develop them. We will consider someone who is not registered with a NOLG practice if they have a voluntary role representing local patients and their needs. They will normally serve a 2 year term to stagger future elections.

3. Steering Group

- a) The core of the group will be members who represent the NOLG practice Patient Participation Groups – ideally they will be linked into a range of relevant communities and interests in the locality. The main skills required will be the ability to network and to engage people with differing views, experiences and opinions.
- b) Membership will primarily be by nomination from each NOLG GP practice Patient Participation Group. The Steering Group may invite additional attendance where it identifies additional skills, knowledge or contacts needed for a particular task. This might be short-term.

4. Elections

- a) The Election Manager² will contact all GP practice Patient Participation Groups (PPGs) in the locality to give four weeks' notice of the election and invite Expressions of Interest.
 - b) Candidates for chair and vice-chair will need to submit an expression of interest to the OCCG Election Manager at least two weeks before the election date. This will include:
 - a statement of the experience and direction they would offer to the forum
 - a full declaration of interest.
 - c) The Election Manager will send the candidates' Expressions of Interest to all PPGs in the locality, and ask them to vote for each vacant post by a closing date.
 - d) Each PPG will have one vote per vacant post. They must send votes by e-mail or post to the Election Manager before the closing date.
 - e) The candidate with the most PPG votes will be elected. In the event of a tie, the Election Manager will ask OCCG's Governance Manager to draw lots to decide who gains the position.
 - f) The Election Manager will then advise the candidates, steering group and locality GP practices of the election outcome as soon as possible.
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² Currently the Locality Coordinator

Final Letter of Intent (LOI) between OCCG management and the Locality Forums

Glossary of terms used within this document:

- **LOI** = Joint Letter of Intent setting out agreed ways in which the OCCG and the Locality Forums will work together in partnership
- **LFCs** = The various elected Locality Forum Chairs and Vice Chairs are referred to as: LFCs
- **Locality Forums** = The 6 Public Forums are referred to as: Locality Forums
- **OCCG** = Oxfordshire Clinical Commissioning Group
- **PPGs** = Patient Participation Groups
- **CSCSU** = Central Southern Commissioning Support Unit
- **OCC** = Oxfordshire County Council
- **“Critical Friend” is defined as:** A **critical friend** is someone who is encouraging and supportive, but who also provides honest and often candid feedback that may be uncomfortable or difficult to hear. In short, a **critical friend** is someone who agrees to speak truthfully, but constructively, about weaknesses, problems, and emotionally charged issues.

Overview

In Oxfordshire, six Locality Forums have been set up by OCCG as voluntary non-statutory groups, each with an elected chair in accordance with each forum’s terms of reference; to bring the patient voice into commissioning decisions. These forums are diverse in their approaches, reflecting: Local leadership skills, experience, and availability and, the relative existence/development of local patient consultative structures, particularly PPGs. Although diverse by nature, the six Forums will all pursue the same Aim and Objectives, as listed below.

The purpose of the LOI is to recognise the need for a long term partnership between the OCCG and patients, developed through the Locality Forums, to reflect the differing needs of patients in the six localities.

The Locality Forums represent one of several key strategic “routes to patients” for the OCCG in its pursuit of its statutory obligations to: consult, involve, and engage patients in the development of safer and more effective health services, as detailed in the OCCG’s communications and engagement strategy. **This is the principal aim driving the OCCG to work with the Locality Forums.**

At this time social care and primary care do not sit within the remit of OCCG, although we are all aware that aspects of this may change in the future. It is our joint intent to broaden engagement to cover the areas not currently under the CCG remit, when this becomes appropriate.

The Locality Forums must be responsive to all patient concerns, hence the inclusion within this document of “social care” as well as “health care” matters.

The Care Quality Commission defines the relationship between an effective PPG and its Practice as that of being: “A Critical Friend.” In the same way we believe that the Locality Forums have to be “A Critical Friend” to the OCCG. To undertake this role the Locality Forums need to work closely with the OCCG and other key stakeholders, including: Locality Teams, Patient Groups, Health providers, District Councils and Healthwatch within Oxfordshire.

The OCCG and the Locality Forums will be able to see how effective their work is through the measurement of patient responses to invitations to engage in: consultations, projects, Patient Advisory Groups, etc. and the growth of patient input with both suggestions and concerns via the Locality Forum network. It is also expected that improved partnership working will enable the OCCG to commission better health services through the involvement and engagement of patients from the earliest stages of its planning processes.

Aim and Objectives:

The aim of the Locality Forums is to **ensure that the views, concerns, experiences and ideas of patients inform and influence OCCG commissioning and redesign of services** by:

- Working collaboratively to achieve an Oxfordshire wide approach
- Advising the OCCG at the planning stage on how best to engage public input
- Identifying patients/service users for taking part in specific projects
- Being the eyes and ears of patients;
- Acting as a critical friend to OCCG
- Sharing effective intelligence with each other on services commissioned
- Acting as a channel of information to and from the public providing opportunities for debate, where appropriate
- Helping to keep patients informed by:
 - Working with the OCCG to disseminate information on: OCCG initiatives, consultations and planned service changes.
 - Supporting patient efforts to become involved and/or engaged in Health and Social Care issues as they require.

Locality Forum confidentiality: LCFs receive information from the OCCG/CSCSU and will assume this information to be in the public domain unless it is clearly marked as being privileged and confidential. If the LFCs receive information, in any format, designated as being privileged and confidential, this information will not be disclosed until OCCG/CSCSU confirm that it is for public consumption.

The letter of intent will be reviewed every six months.

How will OCCG and the Locality Forums work?

Forum responsibilities:	OCCG responsibilities:
Locality Forum meetings and events	
<ol style="list-style-type: none"> 1. Each Locality Forum will run properly constituted meetings, but these will vary in frequency, between: monthly, bi-monthly and quarterly. Specific arrangements are to be confirmed by each with the OCCG. 2. The Locality Forum Chairs will contribute to Locality 'business as usual' monthly commissioning meetings. 3. The Locality Forums are at different stages of development but understand the need to be able to contact patients on behalf of the OCCG. Work will be ongoing to quantify, in each Locality Forum, the minimum numbers of patients that can be contacted. 	<ol style="list-style-type: none"> 4. OCCG will provide suitable administration support to each locality forum for up to 6 meetings a year and 2 public events. This to include note taking when required. The support for "Public Events" will need individual discussion and may include: pre-publicity, assistance in running and providing a written summary/report of the event. 5. OCCG will pay for meeting venues and assistance with their booking where necessary. The individual Locality Forum requirements will vary due to their differing methods of working but each will confirm its arrangements directly with OCCG. These arrangements will be reviewed annually according to outcomes. 6. OCCG will consider supporting a Locality Forum to deliver additional events on an agreed basis, assuming alignment with OCCG priorities 7. Paying out of pocket expenses in line with OCCG's service user and carer expenses policy and this will be circulated to all forums. 8. Effective participation from OCCG locality clinical directors or an agreed clinical representative at agreed Locality Forum meetings. (The types of meeting will vary between Locality Forums and will be agreed locally).
<ol style="list-style-type: none"> 9. Each Locality Forum will discuss with OCCG any proposed updates or alterations to their terms of reference. 	<ol style="list-style-type: none"> 10. OCCG will publish the terms of reference for each Locality Forum along with contact details for each Locality Forum, as agreed with the Locality Forum Chair, to enable patients to make contact with their Locality Forum, on the OCCG website. Additional information will also be on the website to signpost people to the right service.
Planning	

<p>11. Each Locality Forum in collaboration with OCCG will develop clear processes for succession planning including the recruitment processes for the roles of Chairs and Vice Chairs in each forum.</p>	<p>12. OCCG will provide Locality Forums will opportunities to contribute to their commissioning intentions which sets out the CGs development plans (IE: new services; service reviews; reduced services; plans to share services with other providers, such as OCC).</p>
<p>13. The Locality Forums will use their best endeavours to work with and help develop PPGs in their Localities.</p>	<p>OCCG will:</p> <p>14. Encourage member practices to consult their PPGs on commissioning and developments</p> <p>15. Assist Forums in communicating with PPGs via practice managers</p> <p>16. Signpost practices to relevant sources of advice and support for PPG development</p>
<p>Service feedback</p>	
<p>17. The LFCs will make OCCG aware in advance of meetings to be held with key stakeholders and contractual providers and, will feedback to OCCG any notes on issues/key points discussed at such meetings.</p> <p>18. The results of any locally run surveys, relevant to the OCCG, will be shared with OCCG subject to proper Information Governance.</p> <p>19. The Locality Forums will inform OCCG of any critical issues raised by their members.</p>	<p>20. Locality Forum Chairs can send minutes from their Forums to CSCSU.oxonengagement@nhs.net if it requires management attention and queries will be responded to within 20 working days, thereby ensuring a clear, efficient and effective system to:</p> <p>21. Collate Locality Forum feedback on commissioned services, to be discussed at LFCs meetings with OCCG and to be reviewed and actioned accordingly</p> <p>22. Link feedback with other sources of intelligence and information held within OCCG (quality team)</p> <p>23. Provide feedback into relevant quality improvement, service development and contract meetings</p> <p>24. Ensure escalation of feedback to senior OCCG management, where appropriate</p> <p>25. Provide feedback and response to the Locality Forums in a consistent format.</p> <p>26. If an individual patient story or complaint is raised these should be sent to relevant contact points described on each</p>

	<p>Forum’s Talking Health page.</p> <p>27. OCCG will offer the LFCs suitable Information Governance training, if/when required. OCCG is seeking further advice on suitable Information Governance arrangements to ensure compliance and support the Forums in their objectives.</p>
LFCs/OCCG meetings	
<p>28. The Locality Forums will provide input and support to all the OCCG/LFCs joint meetings.</p> <p>29. LFCs will work to ensure that “best practice” is shared so that all Locality Forums can shorten “learning curves” to the most effective performance.</p> <p>30. LFCs must consider their actions when they are representing or seen to represent the OCCG, are consistent with OCCG governance. LFCs will not speak on behalf of the OCCG without prior agreement; their raison d’etre is to speak on behalf of patients.</p>	<p>31. OCCG will arrange and attend bi-monthly LFCs/OCCG meetings to discuss progress with patient involvement and engagement and to receive update reports from all sides. The reports from the OCCG should include clear evidence of the impact and outcome of patient input on service delivery and OCCG commissioning.</p> <p>32. OCCG in partnership with the LFCs will develop terms of reference for the LFCs/OCCG meetings.</p>