

## Public and Patient Involvement Assurance Group (PPIAG)

**Report from meeting of:** Wednesday 24 January 2024

**Attendance:** Evan Rees, Rasheed Cader, Nishita Andrea Ganatra, Brigitte Heller, Mathew Hulbert, Andrew Nebel, Brian Rowlands, Janet Thompson, Vaughan McLeod

**Integrated Care Board (ICB) representation:** Sue Venables, Birju Vaja, Louise O'Reilly, Justin Hammond, Kirstie Swinfield

**Apologies:** Andy Murtha, Mary Smith, Phil Marston, Sandeep Kaur

**Quoracy:** The meeting was quorate.

**Declaration of interest:** There were no declarations of interest.

### First item

<b>Topic presented</b>	Update on Step up to Great Mental Health
<b>Presented by</b>	Justin Hammond, Associate Director of Mental Health & Learning Disability, LLR ICB Louise O'Reilly, Communications and Engagement Manager, Integrated Care System
<b>Purpose of presenting</b>	The PPIAG was asked to assure that the insights and business intelligence from patients, staff, carers and public, collected through the Step up to Great Mental Health consultation, have continued to be regarded and have influenced the decisions that the mental health collaborative have made.
<b>Geographical scope of proposed engagement</b>	Leicester, Leicestershire and Rutland
<b>Demographic scope of engagement</b> E.g. age, gender, income/occupation, cultural background, disability	All demographics
<b>Consultation/ engagement timescales</b>	The Step up to Great Mental Health consultation ran between 24 May 2021 and Sunday 15 August 2021.
<b>Evidence of engagement activities is provided by</b>	N/A
<b>Any (relevant) groups not engaged with</b>	N/A

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<b>Which LLR-wide collaboratives and design groups does this impact</b>	Mental health collaborative
<b>Key themes emerging from the presentations as identified by the Group</b>	<p>There has been considerable progress in implementing the proposed outcomes of the Step up to Great Mental Health consultation. It's important to publicise this progress.</p> <p>Tracking continued patient engagement in mental health services is required to understand if patients are responding well to new services and service changes.</p> <p>Increased promotion of services is essential to ensure patients are aware of what's available to them, particularly those with protected characteristics. Also, liaison with GP to ensure they can navigate referral routes. Ease of accessing service details, such as the Central Access Point phone number, must also be considered; the volume of information available, particularly online, can make it difficult for people to find what they are looking for, especially if they are in a mental health crisis. However, it is important to understand if the system can cope with increased demand and how it will manage patients' concerns about waiting times and access to services.</p>
<b>Are there any implications for consultation processes?</b>	N/A
<b>Areas of good practice</b>	Process in general.
<b>Areas for improvement and recommendations</b>	As above
<b>Was the Group assured that engagement/consultation had been satisfactorily completed?</b>	N/A
<b>Was the Group assured that insights had impacted decisions/planning?</b>	Yes
<b>Second item</b>	
<b>Topic presented</b>	Asylum seekers and homeless GP service consultation summary
<b>Presented by</b>	Birju Vaja, Insights and Experience Officer, LLR ICB Sue Venables, Head of Engagement and Insight, LLR ICB
<b>Purpose of presenting</b>	The PPIAG was asked to assure that the asylum seeker and homeless GP service consultation appropriately and sufficiently involved the public and patients.

<b>Geographical scope of proposed engagement</b>	Leicester, Leicestershire and Rutland
<b>Demographic scope of engagement</b> E.g. age, gender, income/occupation, cultural background, disability	Asylum seekers and the homeless
<b>Consultation/ engagement timescales</b>	14 September 2023 to 21 November 2023
<b>Evidence of engagement activities is provided by</b>	Presentation
<b>Any (relevant) groups not engaged with</b>	N/A
<b>Which LLR-wide collaboratives and design groups does this impact</b>	N/A
<b>Key themes emerging from the presentations as identified by the Group</b>	<p>The consultation covered as wide as range as it could. The completion rate of the asylum seeker survey was low; however, this was to be expected with this patient cohort due to various factors including mistrust of authorities.</p> <p>Consider barriers patients may face when changing practices, such as practices using different clinical systems (SystemOne/EMIS).</p> <p>The equity of access issues highlighted in the survey results is of vital importance and must be considered in commissioning a GP service for asylum seekers and the homeless.</p>
<b>Are there any implications for consultation processes?</b>	No
<b>Areas of good practice</b>	
<b>Areas for improvement and recommendations</b>	
<b>Was the Group assured that engagement/ consultation had been satisfactorily completed?</b>	Yes

<b>Was the Group assured that insights had impacted decisions/ planning?</b>	N/A
<b>Standing agenda items</b>	
<b>Report from the previous meeting</b>	The report from the PPIAG meeting on 20 December 2023 was approved.
<b>Horizon scanning</b>	No new items were added to the PPIAG agenda planner.
<b>Other business</b>	The next meeting will take place on Wednesday 24 January 2024. It will be a hybrid meeting, taking place at County Hall with the option to join online.