

# Clinical Reference Groups for Specialised Services

A Guide for  
Applicants



# Clinical Reference Groups: Applicants Guide

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**Prepared by the Medical, Operations, and Patients and Information Directorates,**

**NHS England**

## 1. Introduction

Thank you very much for your interest in the positions of patient or carer members of Clinical Reference Groups, and for taking the time to read this applicant information pack.

We are looking for:

- Current or recent patients of specialised health services
- Carers of current or recent patients of specialised health services
- Staff or volunteers from patient organisations or networks of patients/carers of specialised services to join the Clinical Reference Groups for specialised health services commissioned by NHS England .

These positions offer a real opportunity to bring a patient and carer perspective to specialised health services. You can find more information on the Clinical Reference Groups (CRGs) and their role in the document *Clinical Reference Groups for Specialised Services: a Guide for Stakeholders*. If you are considering applying for a patient or carer member role on the CRGs, we recommend that you read this information pack in conjunction with the guide before putting in an application.

We would like to hear from people who use or have used specialised health services, and their carers and support organisations, to ensure that we are hearing their voices at the heart of services development and improvement.

We look forward to welcoming new members to join these important groups.

**James Palmer**

**National Clinical Director, Specialised Services**

## 2. Overview of Clinical Reference Groups

You can find more information about specialised health services in the *Guide for Stakeholders*. Clinical Reference Groups are the main source of clinical advice to NHS England for individual specialised services. Their membership includes patients, carers, patient organisations, clinicians, commissioners, public health and pharmacy specialists, and other related health professional organisations such as medical Royal Colleges.

CRGs have a national role for the specialised health service area they cover, and are focused on developing nationally consistent service specifications, policies, and service improvement schemes. Some CRGs are already in place, and new ones have been developed for 2013/14, giving a total of 76 services being covered. Again, you can find a full listing of these services in the *Guide for Stakeholders*, together with more details of the work they will be doing.

## 3. The patient and carer voice in CRGs

A core function of NHS England is to champion the effective involvement of patients and carers in making decisions about, and managing, their own care. NHS England also has a role in promoting collective engagement by patients, carers and the public in decisions affecting health services in their area. The needs and views of patients, carers and the public are at the heart of the new commissioning structure for the NHS and their experience and feedback will be used to improve the quality of NHS services provided.

The ambition for the patient and carer members is that they provide the CRG with insight, information, and views about the service from the viewpoint of patients and carers. This will help ensure that the different specialised health services are better able to deliver the kind of experience and outcomes that patients actually want.

## 4. Responsibilities of the patient and carer members

- i. reading papers and proposals which are circulated and giving a service user or carer perspective on the contents
- ii. participating in phone conferences and face-to-face meetings of the CRG and debate issues using email, as well as joining internet conferences.
- iii. taking part in workshops or events where participation is helpful for the work of the CRG as agreed e.g. wider network meetings
- iv. where appropriate, communicating with, and seeking feedback from, wider patient networks on plans and proposals, drawing on the support of relevant patient groups identified by the CRGs. It should be noted, however, that communicating with wider patient networks is not the sole responsibility of the patient and carer members and they will be supported in this.
- v. complying with the Standards of Conduct and respecting the confidential nature of CRG discussions when it is made clear by the Chair that this is a requirement
- vi. raising areas of unresolved concern with the Chair of the CRG and subsequently following the complaints process if concerns remain unresolved
- vii. identifying their own support, training and development requirements and seeking appropriate support from CRG members.

Prospective patient and carer members should be aware that due to the numbers involved and the geographical spread of CRG membership, the groups usually on a 'virtual' basis rather than face-to-face, using phone conferences or internet meetings, and communicating extensively via e-mail. However, approaches are being looked at to resource at least one face-to-face meeting for each CRG. Please see also the commitment below for patient and carer members to have the opportunity for an introductory face-to-face meeting with the Chair and lead commissioner for their CRG, to help develop working relationships and understanding of the work programme.

## 5. Qualities required

We are looking for patient and carer members who:

- i. want to be involved in developing and shaping service provision for the specialised health service area in question
- ii. are able to provide objective input about the needs of patients and carers using the service in question. This may be as a current user of services, as an advocate of patients or carers, or as an employee of a patient organisation that supports services users and carers for the relevant service area
- iii. have experience of giving a patient or carer perspective on health services
- iv. can display sound judgement and an ability to be objective
- v. have the ability to understand and evaluate a range of information and evidence
- vi. are able to present a non-clinical perspective and offer constructive challenge
- vii. can operate effectively in a small group environment
- viii. possess effective written and verbal communication skills
- ix. have an awareness of, and commitment to, equality and diversity
- x. understand the need for confidentiality
- xi. are able to participate in meetings (either virtual or face-to-face) during the working day and sometimes at other times
- xii. are able to commit to up to 2 days a month (spread over the month – may be more in busy periods)
- xiii. are willing to commit to June/July 2015 in this role (recognising that circumstances may change for individuals, and this will be accommodated)
- xiv. along with all members of the CRG, are willing to complete a declaration of interests and to declare relevant interests as appropriate during group deliberations.

## 6. Diversity and equality of opportunity

We value and promote diversity and are committed to equality of opportunity for all. We particularly want to hear from people from black and minority ethnic communities and younger people (whether service users or carers) who are able to make a real contribution to the CRGs.

To help us measure how reflective the patient and carer members are of all sections of the community, we ask you to fill out a diversity monitoring form as part of the application process. We also ask you to let us know if you have special needs that we need to support to enable you to participate fully.

## 7. If you're invited to join a CRG

### ***Expenses***

Travel and subsistence expenses occurred as part of the work will be reimbursed in line with NHS England policy, including travel, replacement care costs, and the costs of support/adjustments you need, although the virtual meetings format is designed to reduce the costs associated with face-to-face meetings.

### ***Time commitment***

CRGs are expected to meet monthly for about two hours, although some parts of the year will be busier than others. Between meetings, there is likely to be e-mail correspondence and review of documents by members, including pre-reading for meetings. Overall the time commitment is expected to amount to up to two days a month (spread over the month – could be more in busy periods).

### ***Meeting format, location and timing***

Because of the 'virtual' nature of most CRG meetings, patients and carer members need to be prepared to communicate via email and phone conferences. For this reason, the application process will be online. However, support will be available for individuals who have special needs, for example relating to access for people with disabilities.

Some CRG meetings may be held early or late during the working day – for example, 8am or 6pm. This is because on occasion meetings have to be fitted round clinicians' commitments in clinics and operating theatres. This will not be the case for all CRGs or for all meetings and it is expected that there will be communication between members about mutually convenient times for meetings.

Any face-to-face meetings, including briefing and induction sessions, will be arranged on a national rather than a local basis and are most likely to be in London.

Prospective applicants should also be aware that many of the documents and programmes being reviewed will be fairly technical in nature, as they relate to the contracting process where services are commissioned from service providers.

### ***Standards of conduct and conflict of interest***

All members of CRGs will be asked to subscribe to an agreed code of conduct and to declare any potential conflicts of interest. Examples of conflict of interest might include:

- a patient group that receives funding from a pharmaceutical company supplying drugs for a condition covered by the services under review
- a charity or health trust that provides services which are covered by the CRG in question.

### ***Support***

The NHS England is in the process of developing a package of support and training for all new, and existing, patient and carer members of CRGs. This is planned to include:

- i. briefing for all CRG members to enable them to support full participation of patient and carer members on CRGs, making use of best practice from CRGs and other citizen involvement in NHS England programmes to date. CRG Chairs will be expected to work with all CRG members to help them better understand and support the role of patient and carer members and the principles of good engagement.
- ii. induction, training and development for all patient and carer members of CRGs
- iii. the support of a clearly identified CRG commissioner, who you can contact outside of CRG meetings for additional discussions
- iv. support to enable patient and carer members to access web-based meetings and download documents
- v. a clear set of standards regarding working practices e.g. writing and speaking in plain English; provision of glossaries and jargon-busters; and circulation of papers not less than one week in advance of a meeting
- vi. an initial face to face meeting with the Chair and commissioner member of the CRG, to help develop relationships and understanding of the work programme
- vii. guidelines for all CRG members which will include a clear description of the roles and responsibilities of all members, as well as expectations regarding conduct and working practices
- viii. an assurance that patient and carer members – and others – will have the opportunity to influence the agenda of CRG meetings
- ix. provision of a virtual forum outside CRG meetings for patient and carer members to share experiences, good practice and support each other.
- x. regular evaluation of a CRG's effectiveness in working as a group, using feedback from all members
- xi. access to a clear complaints process so that patient and carer members know where to go should they wish to express concerns about their experience of working on a CRG. This process will be independent of the CRG structure and will be managed by the NHS England's patient and public voice team
- xii. Opportunities for patient and carer members to meet and network .

## 8. How to apply

- i. Application is via an online form and will remain open until all patients and carer positions are filled for advertised CRG's**
- ii. Braille, large print and tape versions of this information pack and the application form are available from NHS England by emailing [england.voice-crg@nhs.net](mailto:england.voice-crg@nhs.net) or phoning 0113 82550861
- iii. We will rely on the information you provide in the application form to assess whether you have the experience required, so please ensure you give us written evidence in the form to support how you meet the identified criteria



The recruitment process for patient and carer members has been designed with the Specialised Services Steering Group to be both inclusive and transparent. Posts are being advertised both on NHS England website

<https://www.engage.england.nhs.uk/application/crg-patient-wave3>

and via the networks of the Specialised Services PPE Steering Group, as well as via others such as voluntary and community sector partners, Healthwatch, and specialised commissioning area teams.

## 9. Once we receive your application

- i. You will receive an email acknowledgement when you submit your application online
- ii. Applications will be shortlisted by a panel including members drawn from the following groups: CRG Chairs, members of NHS England Patient and Public Voice team, the PPE Steering Group or Department of Health Strategic Partners group (ensuring no conflict of interest), and commissioners.
- iii. Applications will be assessed against the experience and criteria listed above, with a view to ensuring that at least one service user and one carer is in each CRG, where appropriate. Selection will be made on the basis of the content of the application form. There will not be an interview process, but references will be taken up for successful applicants.
- iv. The application process is being managed by NHS England Patient and Public Voice team, with support and involvement from the PPE Steering Group, as well as from specialised services clinicians and commissioners.
- v. Successful applicants will receive an email from NHS England notifying them of this and informing them of next steps
- vi. Unsuccessful applicants will also be notified via email.
- vii. There is an option on the application form for applicants to be informed about future involvement opportunities with NHS England

## 10. Information for existing CRG patient and carer members

Existing members of CRGs, both clinicians, patients, carers and patient organisations, are invited to apply for places on CRGs in 2013, although for the new CRGs there will be no existing members.

Applications for existing members will be looked at alongside new applications.

## 11. Questions and answers

**Q** I would like to be involved in the specialised commissioning work of NHS England but I don't think this is the opportunity for me – will there be others?

**A** Yes, NHS England is in the process of developing a wider model for participation in specialised health services, with CRG membership being one part of that. There will be opportunities to be involved in other areas, including among others the national Programme of Care Boards, the Portfolio Board and the Clinical Priorities Advisory Group, and the 10 area teams leading on specialised commissioning. These would not focus in the same detail on individual service areas but would have a broader scope of looking at the work of a whole



group of CRGs – for example, in the mental health area – or the entire portfolio of specialised health services. If this is of interest please visit the NHS England website on a regular basis where involvement opportunities will be advertised.

**Q** Are there involvement opportunities in NHS England beyond specialised commissioning?

**A** Yes, wider involvement opportunities are also being developed and again you should keep in touch via the NHS England website.

**Q** I want to know about the work of the CRGs but I can't commit to being a patient or carer member – how can I stay in touch?

**A** You can register as an interested party ("stakeholder") via the NHS England website, from mid-April

**Q** As an individual patient or carer, how can I be expected to represent the views of all patients and carers of a particular service?

**A** Patient and carer members are in CRGs to ensure that discussions include a patient and carer perspective. They are not expected to represent the views of all service users and carers. However, they will be encouraged (along with all members) to connect with networks (for example via patient organisations) to help communicate the work of the CRG and assist with the gathering of wider patient and carer insights. The registered stakeholders of each CRG, which will include hospital trusts providing services and patient and service user organisations, will also offer support with this.

**Q** There are only four patient and carer members out of a membership of up to 27 – how can I be sure my voice won't be drowned out by the professionals?

**A** Chairs and commissioners of CRGs have a role to ensure that patients/service users and carers are facilitated to participate fully in the work of the group, and will be briefed on this. If patient and carer members have continuing concerns that they feel are not being responded to by the chair, there will be a complaints process managed by the Patient and Public Voice team at NHS England.

**Q** I'm not comfortable with 'virtual' meetings and technical specifications and feel excluded from this involvement opportunity.

**A** The virtual meetings are being used as a cost-effective approach to this national work, in an environment of growing demand and reduced resources for health and social care services. We recognise that this type of involvement is not for everyone. However, 'armchair' involvement can enable wider participation by people who find it hard to travel to meetings (for example, those with caring responsibilities, and people with limited mobility). We are also committed to supporting people where necessary to connect online and to understand the subjects being discussed, for example by linking them to relevant voluntary sector partners.

**Q** I can't afford the IT equipment or have the technical skills to participate in this way – can you help with this?

**A** NHS England is committed to supporting individuals to participate as appropriate, which may be by linking them to organisations that can support them, or by loaning equipment to people

in certain circumstances.

**Q** My experience of being a PPE representative on a CRG has not been positive to date – have you taken any steps to improve things?

**A** We have listened to the experience of CRG PPE representatives to date, and also taken into account advice from the specialised commissioning PPE steering group, in developing the approach for 2013 onwards. One aspect of the support we're putting in place is a complaints process so that patient and carer members can raise a 'red flag' and challenge us if they are not being supported to participate.

**Q** Can one patient organisation have more than one place on a CRG?

**A** No, NHS England will be aiming to secure a range of perspectives to inform the work of the CRGs, so it would not normally expect an organisation to have more than one place.

**Q** Can patient organisations be members of more than one CRG?

**A** Yes, it is likely that some patient organisations will have interests that span more than one CRG.

**Q** What happens if not all four patient and carer places are filled?

**A** We will work with partners to try and fill the spaces.

**Q** I'm not sure who I should ask for a reference?

**A** Please give the name of someone who is able to confirm that you meet the qualities required for the role. This could be a chair of a patient or carer group that you have been on, a line manager if you are in a paid role, or a charity, NHS or social care manager or clinician that you have worked with as a volunteer.

## 12. More queries?

If you have questions about these positions that we haven't answered here, please contact:

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