

Patient & Public Voice (PPV) Partner:

Programme of Care Boards

Application Information Pack



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A guide on how to apply to become a PPV partner of Specialised Commissioning Programme of Care Boards

Role	PPV Partner on National Programme of Care Board
Duration	1 year in the first instance, renewable to a maximum of 3 years
Working relationships	Members of the relevant PoC; PPV members of associated CRGs,
	staff from NHS England Specialised Commissioning Directorate, and
	the Patient and Public Voice Assurance group
Expenses	Travel expenses and other appropriate out-of-pocket expenses are
	reimbursed. An honorarium of £150 per day will be paid (for
	those people not representing or supported by an organisation)
	for an estimated time commitment of 12 days per year.

1. Introduction

Please read this application information pack before completing the application form, to ensure you fully understand the application process, and to determine whether you have the skills and time to become a PPV partner.

Please note – Current CRG members who can demonstrate the necessary skills may apply. However, if successful, they would have to resign from the CRG post in order to take up a PoC role.

NHS England will reimburse travel and other agreed expenses in line with NHS England's 'Covering out of pocket expenses for PPV Partners' policy

Please note that correspondence will be primarily via email, unless otherwise requested.

The closing date for applications is 12 noon on 16 November 2015

2. Background, context and aims of the programme

NHS England is working with a range of stakeholders at a national level to determine the outcomes expected for specialised services. This will be achieved through the development of clinical strategies set out within six national Programmes of Care (PoC). These strategies will enable the commissioning of services to be based on clear evidence and ensure that they are cost effective and patient focused

- Internal Medicine digestion, renal, hepatobiliary and circulatory system
- Blood infection, immunity and haematology
- Cancer
- Mental Health
- Trauma traumatic injury, orthopaedics, head and neck and rehabilitation

Women and Children – women and children, congenital and inherited diseases

3. Role of the Board

We are looking for patient and carer members who want to be involved in developing and shaping service development for the Programme of Care Boards in the health service areas described below.

The Programme of Care (PoC) Boards are six service-based programme boards (as outlined above) reporting into the Senior Management Team of NHS England's Specialised Commissioning Directorate. PoC Boards will typically forward recommendations to both the Clinical Priorities Advisory Group (CPAG) and Specialised Commissioning Oversight Group (SCOG), which in turn report into the Specialised Commissioning Committee (SCC), a Committee of NHS England's Board.

Each PoC has a national Board (NPoC Board). The NPoC Boards meet monthly and their role is to provide strategic overview of the programmes and to prioritise and oversee delivery of the work programmes.

The purpose of the Board is to provide leadership and oversight of the development and delivery of a comprehensive and prioritised work programme for the Programme of Care that achieves demonstrable improvements in the quality, equity, value and outcomes of commissioned specialised services.

They cover prescribed (a nationally agreed range of) specialised services in their areas of work relating to both specialised and highly specialised services, and can include surgical, diagnostic and medical services.

The services in each PoC are clustered into Clinical Reference Groups (CRGs) to support the national work in these areas. The NPoC Board coordinates and prioritises the work across the constituent CRGs. These service-specific CRGs also work with other CRGs from within the same PoC and also with other PoCs. This is particularly the case where key service area interfaces and interdependencies between CRG areas are needed to determine the outcomes expected for specialised services.

Each of the CRGs has an appointed Chair. Each PoC has a national/regional director of commissioning chair and a clinical co-chair. The national senior PoC manager is a member as are the regional PoC managers and a commissioning manager from the highly specialised commissioning team.

The National Programmes of Care set and publish an annual work programme for policy development in their area.

The Terms of Reference for each PoC Board are available.

4. Importance of PPV partners

NHS England is committed to ensuring that public and patient voices are at the centre of shaping our healthcare services. Every level of our commissioning system needs to be informed by insightful methods of listening to those who use and care about our services. Their views should inform service development.

5. Role, responsibilities and required skills of PPV partners

PPV representation will bring important views, perspective and challenge into the NHS England Programme of Care Board's. This role is essential in championing a public, service user, patient and/or carer/family viewpoint, ensuring that their needs are met through the outcomes of the programme. The PPV partner would be expected to operate at a Non Executive Director skill level (see below for skills).

5.1 The role of the PPV partner is to:

- Assist the PoC Board in understanding the diverse perspectives of patients, carers and the public relevant to the work of the group and provide a consumer viewpoint in all group activities.
- Provide 'critical friend' challenge into the group rather than represent a particular condition or interest.
- Provide strategic assurance that the views of patients and the public have been sought and considered in the work of the PoC and its constituent CRGs.
- Champion and advocate for increasing patient and public awareness of the programme's outcomes and achievements.
- Liaise with PPV representatives in roles covered by that Board; and to communicate the work of the PoC Board to and from these groups in consultation with the PoC Leads.

5.2 Responsibilities of the PPV partner are to:

- To regularly participate in phone/internet conferences and face-to-face meetings of the Programme of Care Board and debate issues using email.
- To prepare for the meetings by reading and reviewing programme plans, papers, proposals and other associated documentation.
- To take part in workshops or events where participation is helpful for the work of the PoC as agreed e.g. wider network meetings
- Where appropriate, communicate with, and seek feedback from, wider patient networks on plans and proposals, drawing on the support of relevant patient groups via the CRGs. However, communicating with wider patient networks is not the sole responsibility of the post holder and they will be supported in this.
- To raise areas of unresolved concern with the Chair of the PoC and subsequently following the complaints process if concerns remain unresolved

- To identify their support, training and development requirements and seeking appropriate support from PoC members.
- Comply with the Standards of Conduct, respecting the confidential nature of discussions when it is made clear by the Chair that this is a requirement.

5.3 Skills and experience required for this role

- Knowledge and understanding of specialised services in the NHS and how these are commissioned and organised.
- Experience of working in a Committee setting, and ability to contribute actively to the discussions and work of the group, including undertaking specific tasks or projects as appropriate, under the guidance of the Chair.
- Experience of advocating for patient engagement and involvement at a strategic level.
- A demonstrated commitment to improving the quality of patient outcomes and the quality of specialised and high specialised services.
- A demonstrated ability to interact with multiple stakeholders at senior management level.
- Ability to understand and evaluate a range of information and evidence.
- Ability to identify themes for improvement drawn from information from a wide variety of sources, with differing issues and viewpoints.
- Ability to present a non-clinical perspective and offer constructive challenge
- Ability to display sound judgement and objectivity.
- Ability to communicate verbally and in writing, via email and teleconference, with a variety of audiences including other patients, clinicians, commissioners and members of the voluntary sector.
- Have an awareness of, and commitment to, equality and diversity.
- Understand the need for confidentiality
- Ability to devote at least 1 day per month to the role
- Ability to travel to meetings (generally held in Central London)

6. Time commitment

- Initially there will be trial period of three months.
- Membership of the group/committee is for 12 months initially, at which point membership will be reviewed.
- You will be required to attend meetings approximately every 4 weeks.
- Meetings will normally last for approximately 2 hours.
- Meetings will generally be during working hours.
- 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. However, wherever possible there will be a dial-in teleconferencing facility available.

 Prospective applicants should also be aware that many of the documents and programmes being reviewed will be complex so will require reading time prior to the meeting.

7. Support for PPV partners

- An induction session will take place, at which point a named link will be provided to support PPV partners with information they may require.
- Meeting documents, and if necessary, pre-meeting briefings will be provided.
- Reimbursement of out of pocket expenses incurred in line with NHS England's PPV Expenses Policy. Expenses usually cover travel, accommodation and/or any subsistence requirements that arise. PPV partners should highlight any barriers to participation, for example, the costs of a carer that may need to accompany a PPV representative. Please email england.voice-crg@nhs.net to request a discussion about any support requirements that you might have.
- There will be an honorarium of £150 per day (for those people not representing or supported by an organisation) for an estimated time commitment of 12 days per year. This is in line with the NHS England policy.
- If you've any queries or concerns about whether reimbursement of expenses and involvement payments for public involvement might affect any state benefits you are receiving, please contact **the free and confidential service** provided through Bedford Citizens Advice Bureau. Specially trained staff, with knowledge of how payment for involvement/expenses might affect state benefits will be able to give you personal advice eg supporting you should you need to make contact with the Department for Work and Pensions, or other benefits agencies about your involvement. You can contact the Benefits Advice Service by **emailing involve@bedfordcab.org.uk** with a brief summary of your query in the first instance, or, if you prefer, you can call 01234 330604.

8. How to apply

Please visit our website at https://www.engage.england.nhs.uk/application/get-involved/ to apply on line. The on line form includes application questions and Equality Opportunity Monitoring questions. (Shortlisters will not receive your Equal Opportunities Monitoring information.)

If you have difficulty accessing the on line application form please contact england.voice-crg@nhs.net or call Jane Burbidge on 07887 653 728.

We will rely on the information you provide in the on line Application Form to assess whether you have the skills and experience required for this position.

If you are applying for more than one PoC Board please indicate that in your application.

9. Diversity and equality of opportunity

NHS England values and promotes diversity and is committed to equality of opportunity for all. To help us understand if we are achieving this, we ask you to fill out Equal Opportunity Monitoring information 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.

10. Once we receive your application

The steps will be as follows:

- We will acknowledge receipt of your Application Form via email (unless otherwise specified). If you do not receive an acknowledgement within 5 working days, please get in touch.
- Applications will be shortlisted by a panel which will include members
 drawn from the following groups: Programme of Care Commissioning
 Leads, members of the specialised commissioning communications and
 engagement team, the Patient and Public Voice Assurance group or
 Department of Health Strategic Partners group (ensuring no conflict of
 interest), or commissioners.
- Applications will be assessed against the skills and experience required, outlined in section 9 below, with a view to ensuring that two PPV representatives are recruited to each PoC Board. Selection will be made on the basis of the content of the application form. Shortlisted applicants may be invited to a short interview. This may be a face to face or telephone interview.
- Please note that two references will be taken up for successful applicants before involvement can commence.
- All applications will receive a successful or unsuccessful notification. The successful notifications will include information about next steps.

If you wish to be informed about future involvement opportunities with NHS England, there is an option on the Application Form to select.

If you have any queries about the application process, or would like an informal discussion about the opportunity – please email england.voice-crg@nhs.net