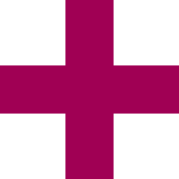


Patient and Public Voice (PPV) Partner

**v 0.2**

Application information pack

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# Application information pack

**We are looking to recruitment up to 2 PPV Partners for the following groups:**

# Senior Management Team (SMT)/Specialised Commissioning Oversight Group (SCOG)

# Clinical Delivery Group

# Quality Committee

## Introduction

Thank you for your interest in becoming a PPV Partner with NHS England.

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 and improvement. Our commitment to supporting our PPV Partners is set out in our [PPV Partners Policy](https://www.england.nhs.uk/publication/patient-and-public-voice-partners-policy/).

Please read this application information pack before completing the application form for this role, 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 the closing date for applications is **19 February 2018**

NHS England will reimburse reasonable out of pocket expenses in line with our PPV Partners Expenses and Involvement Payments Policy. This post does attract an involvement payment: Any involvement payments may be classed as earnings or income by Her Majesty’s Revenue and Customs service (HMRC) or the Department for Work and Pensions (DWP). PPV Partners are responsible for declaring this income to HMRC, DWP, Job Centre plus or other agencies as appropriate. If you are in receipt of state benefits, you should seek advice from the relevant agency, for example JobCentre Plus, ideally in advance of applying and certainly before accepting an offer of a role which attracts an involvement payment, even if you intend to decline the payment.]

For further information see the [PPV Partners Expenses and Involvement Payments Policy](https://www.england.nhs.uk/publication/working-with-our-patient-and-public-voice-partners-reimbursing-expenses-and-paying-involvement-payments/) or the [PPV Partners Policy](https://www.england.nhs.uk/publication/patient-and-public-voice-partners-policy/).

Please note that correspondence will be primarily via email, unless otherwise requested. If you do not have access to email and would like to be contacted via telephone or post, please state this on your application form.

## How to apply

Please complete and return the following accompanying documents:

* Application Form
* Equal Opportunity Monitoring Form

You can either return these documents by email [england.speccomm-south@nhs.net](mailto:england.speccomm-south@nhs.net)

or alternatively by post to:

Business Support Team

Specialised Commissioning

NHS England (South)

Premier House

60, Caversham Road

Reading

RG1 7EB

You can also apply online at theNHS England website **insert web address >**

If you would like support to enable you to apply for this role, and/or information in another format please contact Head of Communications and Engagement Kulvinder Naga at [**Kulvinder.naga@nhs.net**](mailto:Kulvinder.naga@nhs.net)

We will rely on the information you provide in the application form to assess whether you have the skills and experience required for this role.

## 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 an **Equal Opportunity Monitoring Form** as part of the application process.

Please let us know if you have support needs so that we can understand how we can support you to participate fully.

## Once we receive your application

The steps will be as follows:

1. We will acknowledge receipt of your application form via **email** If you do not receive an acknowledgement within **3** days, please get in touch.
2. Applications will be shortlisted by a panel, including members drawn from the following groups: the Specialised Commissioning (South) SMT team
3. Applications will be assessed against the skills and experience required, outlined in section nine (below). Selection will be made on the basis of the content of the application form.
4. Interviews will take place in Reading in **late February 2018**
5. Please note that two references will be taken up for successful applicants before involvement can commence.
6. Due to the nature of the work undertaken by the Senior Management Team (SMT)/ Specialised Commissioning Oversight Group (SCOG), the Clinical Delivery Group and the Quality Committee PPV Partners will be subject to Disclosure and Barring Service (DBS) clearance (formerly known as a ‘Criminal Records Bureau’ (CRB) check’) before involvement can commence.
7. 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, please [sign up to NHS England’s In Touch newsletter](https://www.england.nhs.uk/email-bulletins/in-touch-bulletin/), which includes details of current opportunities.

If you have any queries about the application process, or would like an informal discussion about the opportunity – please contact Head of Communications and Engagement Kulvinder Naga at[**Kulvinder.naga@nhs.net**](mailto:Kulvinder.naga@nhs.net)

## Background, context and aims of the programme

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 to inform service development.

Specialised services support people with a range of rare and complex conditions. They often involve treatments provided to patients with rare cancers, genetic disorders or complex medical or surgical conditions. They deliver cutting-edge care and are a catalyst for innovation, supporting pioneering clinical practice in the NHS

These services include a range of treatments, from interventions that most of us have heard of, such as chemotherapy, radiotherapy and kidney dialysis, through to pioneering procedures that are currently only carried out in small numbers, such as using a patient’s own tooth to restore their sight, and hand transplants. We also support trials of treatments, such as PrEP (Pre-exposure prophylaxis, a drug to prevent HIV), and an evaluation of mitochondrial donation, a form of IVF in which the future baby’s mitochondrial DNA comes from a donor egg to avoid passing on inherited diseases.

These services are not available in every local hospital because they have to be delivered by specialist teams of doctors, nurses and other health professionals who have the necessary skills and experience. Unlike most healthcare, which is planned and arranged locally, specialised services are planned nationally and regionally by NHS England.

In total, there are 146 specialised services directly commissioned by NHS England. Four factors determine whether NHS England commissions a service as a prescribed specialised service. These are:

* The number of individuals who require the service;
* The cost of providing the service or facility;
* The number of people able to provide the service or facility and
* The financial implications for Clinical Commissioning Groups (CCGs) if they were required to arrange for provision of the service or facility themselves.

The budget for specialised services – £16.6 billion in 2017-18 – has increased more rapidly than in other parts of the NHS, but it is under pressure. The number of patients needing specialised services is rising due to an ageing population and advances in medical technology.

## Role of the groups / committees

The Specialised Commissioning Oversight Group (SCOG) has been established to discuss matters relating to the commissioning of [specialised services](https://www.england.nhs.uk/commissioning/spec-services/). Its overall aim is to give local [Clinical Commissioning Groups (CCGs)](http://www.nhscc.org/ccgs/) greater involvement in the commissioning of specialised services to better align with the needs of local populations.

The Clinical Delivery Group has delegated responsibility from SCOG to develop and implement the delivery of service reviews and reconfiguration, drive forward quality improvements and efficiency savings by identifying and delivering effective Quality, Innovation, Productivity and Prevention Scheme s(QIPP) as well transforming services to improve patient care and outcomes.

The objectives of the Quality Committee is to advise SCOG on all aspects of quality, and to work with the contracting teams to ensure robust quality governance structures, systems and processes are in place to effectively manage clinical risk and ensure patient safety.

## What is the role of PPV Partners on the group?

# PPV representation will bring important views, perspective and challenge into the Senior Management Team (SMT)/Specialised Commissioning Oversight Group (SCOG), the Clinical Delivery Group and the Quality Committee. This role is essential in championing a service user, patient and/or carer/family viewpoint, ensuring that their needs are met through the outcomes of the programme.

The role of the PPV partner is to

* Ensure that the committee/group considers and prioritises the service user, patient, carer and family perspective.
* Champion the diversity of PPV views, and not just to represent their own experience.
* Provide ‘critical friend’ challenge into the group.
* Champion and advocate for increasing patient and public awareness of the programme’s outcomes and achievements.
* Review and comment on documentation.
* 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.

## Skills and experience are required for this role

* Experience of speaking in large groups.
* Interacting with multiple stakeholders at senior management level.
* Ability to understand and evaluate a range of information and evidence.
* Previous experience of representing PPV in healthcare forums.
* Experience of working in partnership with healthcare organisations or programmes.
* Ability to display sound judgement and objectivity.
* Have an awareness of, and commitment to, equality and diversity.
* Understand the need for confidentiality.
* A commitment to the ‘seven principles of public life’ (sometimes known as the ‘Nolan Principles’: selflessness, integrity, objectivity, accountability, openness, honesty, leadership.

## Time commitment

* Membership of the group/committee is for **12** months initially, at which point membership will be reviewed.
* You will be required to attend 3 meetings every **month.** Meetings will usually take place in **Reading, Bristol or Southampton**
* Meetings will normally last for **3** hours.

## Support for PPV Partners

* NHS England asks that all new PPV Partners complete an interactive online induction session. This webinar lasts an hour and will provide some background information to NHS England and the work that we do as well as wider support available to PPV Partners.
* You will also receive an induction from the programme team that is leading this work
* Meeting documents, and if necessary, pre-meeting briefings will be provided.