

NHS Enfield Clinical Commissioning Group (CCG) Patient, Carers and Service Users Reference Group Terms of Reference

1. GENERAL

The purpose of the Patient Reference Group is to ensure that patients' views are incorporated into the CCG's commissioning plans at the earliest stage as well form part of continuous engagement throughout the commissioning cycle.

2. MEMBERSHIP

2.1 The group comprises 12 members with a quorum of 6 members.

2.2 The membership is:

2.2.1 Chair – Lay Member for PPE

2.2.2 CCG Head of Communications and Engagement

2.2.3 Director of Planning, Transformation and Delivery OR
Director of Commissioning OR Director of Primary Care

2.2.4 Nine patient representatives. The patients should represent the Enfield community and there should be at least one patient representative for each CCG locality.

Patients will be selected following an application process using the following criteria.

3. Members will be:

- Be an Enfield resident and/or be registered with an Enfield GP practice.
- Be interested in improving health and health services in Enfield.
- Possess good active listening and interpersonal skills and the ability to work constructively and positively with people
- Are aware of the difficulties facing some groups when accessing health services.
- Have an understanding of and commitment to equality and diversity issues
- Be able to be objective and see issues from all perspectives
- Be available for the meetings, dates of which will be set one year in advance. If unable to attend the meeting, members will be responsible for nominating a deputy.

- Have the confidence to question information and explanations supplied by others, who may be experts in their field
- Be able to consider issues from the perspective of the whole population of Enfield.
- Be an active user of local services and have an understanding of health conditions.
- Act as a critical friend to Enfield CCG, advising of the best way to communicate and engage with patients.

4. ATTENDANCE

- 4.1 Other CCG managers e.g. Quality, Innovation, Productivity and Prevention Manager, Primary Care representative should be invited to attend when the group is discussing areas of risk or operation that are their responsibility. If unable to attend in person, the relevant person will nominate a suitable deputy to attend in their place. Other individuals e.g. GP commissioning lead will be invited to attend if specific specialist advice is required.
- 4.2 Other colleagues from supporting organisations including NHS England, the Commissioning Support Unit, NHS provider organisations or others will be invited to attend where appropriate and as required.

5. FREQUENCY OF MEETINGS

- 5.1 The Group will meet at least four times a year in line with the key stages in the CCG's commissioning cycle. The chair may call additional meetings as necessary.
- 5.2 If a designated member is unable to attend, they should endeavour to send a representative in their place.
- 5.3 Members may be contacted via the Chair or Enfield CCG colleagues in-between the formal meetings, if there are urgent matters to discuss.
- 5.4 Meetings to be interactive and last no longer than two hours

6. PURPOSE

The group is responsible for ensuring that the patient voice is embedded into the CCG's strategic commissioning plans and that service improvements are driven by improving patient experience using the co-production¹ principles.

Members' Responsibilities

- To increase the profile and importance of patient opinions in influencing the local health community developments and investment planning
- To provide opinions as users of local NHS services to test service plans and deliver improved quality and patient experience.

- To share knowledge with commissioners about perceptions of local NHS services.
- To embed co-production principles into service planning and the CCG's commissioning cycle.
- To share their views and opinions on local health services via consultations, engagement and any issues affecting the continuity of service delivery.
- To participate in service specific focus groups and to support and advise the CCG on the recruitment of patients for these groups.
- To receive and consider draft communications, engagement or consultation documents and providing feedback
- To receive and consider relevant policies/reports and provide feedback where necessary.

7. REPORTING

This group is a subgroup of and will report to the Patient and Public Engagement Committee.

Approval date: [Approved by the PPE Committee, November 2018](#)

ⁱ Co-production is a way of working that involves people who use health and care services, carers and communities in equal partnership; it engages groups of people at the earliest stages of service design, development and evaluation. Co-production enables people with 'lived experience' of a particular condition to advise on what support and services will make a positive difference to their lives. Done well, co-production helps to ground discussions in reality, and to maintain a person-centred perspective.