

Patient and Client Council Business Plan 2019-2020

Version 1.0

Introduction

Our business plan sets out the Patient and Client Council's priorities and key deliverables for the year 2019-2020.

Our business plan has three sections:

1. Role of the Patient and Client Council
2. Patient and Client Council objectives for 2018-2019
3. Appendix – Project and Research Approvals Process

The Patient and Client Council Board will monitor progress against the objectives and the effective running of the organisation at each of its Board meetings, which are held in public.

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The Role of the Patient and Client Council

The Patient and Client Council was established on 1st April 2009 to provide a powerful independent voice for people in Northern Ireland on health and social care issues.

Our Vision

A health and social care service that is shaped by the experiences of patients, clients, carers and communities.

Our Purpose

To be an independent and influential voice that makes a positive difference to the health and social care experience of people across Northern Ireland.

Our Goals

The Patient and Client Council Board has an approved Corporate Plan for 2017-2021 and the business plan for 2019-2020 with four strategic goals to underpin the realisation of its vision and purpose. These are aligned with the statutory functions of the organisation: These goals are;

1. The PCC will represent the interests of the public;
2. The PCC will promote involvement of the public;
3. The PCC will provide assistance (by way of representation or otherwise) to individuals making or intending to make a complaint relating to health and social care;
4. The PCC will promote the provision by HSC bodies of advice and information to the public about the design, commissioning and delivery of health and social care;

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The Patient and Client Council's role within Northern Ireland health and social care

As part of the Health and Social Care Framework for Northern Ireland the Patient and Client Council seeks to support the Department of Health's overall duty to promote an integrated system of health and social care designed to improve the health and social well-being of the people of Northern Ireland. The Patient and Client Council will do this by providing a powerful, independent voice for patients, clients, carers, and communities on health and social care issues.

The Patient and Client Council's performance framework is determined by the Department in the light of its wider strategic aims and of current Programme for Government objectives and targets. The priorities and objectives for the Patient and Client Council are set out in its annual business plan, the key objectives of which are subject to approval by its Sponsor Branch in the Department. In common with all Arms-Length Bodies (ALBs), on issues of governance and assurance, the Patient and Client Council is directly accountable to the Department.

Health and Social Care bodies must co-operate with the Patient and Client Council in the exercise of its functions. This means that health and social care bodies must consult the Patient and Client Council on matters relevant to its role and must furnish the Patient and Client Council with the information necessary for the discharge of its functions. Furthermore, health and social care bodies must have regard to the advice provided by the Patient and Client Council about best methods and practices for consulting and involving the public in health and social care matters.

The Patient and Client Council's relationship with the other health and social care bodies is therefore characterised by, on the one hand, its independence from health and social care bodies in representing the interests and promoting the involvement of the public in health and social care and, on the other, the need to engage with the wider health and social care in a positive and constructive manner to ensure that it is able to efficiently and effectively discharge its statutory functions on behalf of patients, clients and carers. The Patient and Client Council's functions do not include a duty to consult on behalf of health and social care. Each health and social care body is required to put in place its own arrangements for engagement and consultation.

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Co-Production

The Department of Health's vision document 'Health and Wellbeing 2026; 'Delivering Together' outlined its full commitment and support to adopting a Co-Production approach to achieve the necessary changes required to deliver the world class health and social care services people deserves.

The Patient and Client Council will adopt Co-Production methodologies throughout the workings of its business plan. The Patient and Client Council believe that service users are partners in every aspect of their work. This can only be achieved when those participating have the necessary skills, confidence and opportunity to be involved. Building capacity within people is therefore an important part of our work.

Outcomes Based Approach

This plan sets out the objectives of the Patient and Client Council for the year 2018/19. It is aligned to the strategic direction determined by the current Northern Ireland Executive Programme for Government objectives and targets and the strategic aims of the Department of Health as driven by Ministerial targets.

As the statutory patient's voice in HSC, the PCC uses its evidence to inform, influence and make recommendations on the provision of health and social care. The PCC cannot determine specific outcomes that follow its work however, HSC bodies must co-operate with the PCC in exercising its functions.

Programme for Government

The draft Programme for Government sets out the big issues facing our society and the challenges that have to be addressed. It sets out a different way of working which the Patient and Client Council supports. Namely:

1. Focusing on outcomes to improve the wellbeing of people;
2. Seeking to make a difference to the things that matter most to people;
3. Contributing to a system that works across boundaries, groups organisations and communities for the common good; and
4. Collaboration between the public sector, local government, private sector, community sector and voluntary sector and beyond to maximise what can be achieved collectively.

The Patient and Client Council contribute to the Programme for Government by fulfilling its statutory functions, which the Board have adopted as the organisation's corporate goals.

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Health and Wellbeing 2026

The Patient and Client Council's business plan objectives are aligned to the quadruple aim priorities identified under 'The Ambition' within Health and Wellbeing 2026: Delivering Together, these include:

1. Improving the health of our people;
2. Improving the quality and experience of care;
3. Ensuring sustainability of services;
4. Supporting and empowering staff.

Patient and Client Council objectives for 2018-19

The Patient and Client Council Board have agreed the following objectives for this year. They have been drafted to allow for flexibility which may be required as Health and Wellbeing 2026 is implemented and whilst most will be delivered within the coming year, some will take longer to complete, this is reflected in the completion dates. Each business plan objective is supported by an operational project plan which is developed within the business year, in partnership with key stakeholders such as policy leads, service users and carers. All activities outlined in the PCC Business Plan will follow defined project and research protocols which include agreed resources, appropriate methodology, and internal controls to ensure the transferability of findings. The process for Project and Research approval is included in Appendix 1.

This Business Plan has been developed using an agreed criteria to assess objectives:

The PCC core statutory functions

Does the objective fall within the statutory functions of the Patient and Client Council?

A demonstrable evidence base

Does the Patient and Client Council have an evidence base, through its engagement work, helpline or complaints support service, that the objective is a priority or issue of concern to the public?

Resources required

Do the Patient and Client Council have the capacity within its resources to undertake and deliver the project?

Is another organisation undertaking this work?

Is the work a duplication of work already planned or being undertaken by another HSC organisation or elsewhere?

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Making a difference

Can the work make a difference for people?

Throughout the year the Patient and Client Council will undertake projects and activities in addition to its business plan. This additional work will be informed by health and social care service developments (including consultation requests) and issues raised with the Patient and Client Council in its engagement with the public, the complaints support service, Department of Health and HSCNI. This work will be reported by the Operations Function in its regular reporting to the Board and where appropriate, recommendations will be made. Where this work is considered a priority by the Chief Executive and is identified as resource intensive it will be brought to the Board for consideration in light of the agreed Business Plan objectives.

Work outside the Business Plan will include attending meetings and groupings hosted by HSC organisations, including the Department of Health, Health and Social Care Trusts, the Regional Health and Social Care Board and the Public Health Agency and other organisations involved in the delivery of health and social care. Examples of this work include regional and local planning groups, facilitation of focus groups for arms-length bodies and supporting patient led groups. Patient and Client Council attendance and contribution to these groups will focus on fulfilling its statutory functions.

The objectives in the Business Plan are set out within the statutory duties and strategic goals of the Patient and Client Council.

PCC Business Plan Objectives 2019-2020

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PCC Business Plan Objectives

All activities outlined in the PCC Business Plan will follow defined project and research protocols which include agreed resources, appropriate methodology, and internal controls to ensure the transferability of findings.

Goal 1 - Representing the Interests of People					
Objective	Key Deliverables	PCC Lead & Delivery Teams	Key Dates	Delivering our Goals and Link to Key Drivers	
<p>1.1 Transformation Implementation Group Work</p> <p>The PCC will continue to work with the Department across a number of Transformation Implementation Group work streams and projects, including:</p> <ul style="list-style-type: none"> • Service Reconfiguration Reviews within the Hospital Services Reform directorate • Nursing and AHP • Reform of Adult Social Care • Encompass • Cancer Strategy <p>Working collaboratively with HSC partner organisations and DoH policy leads to implement effective engagement of the public in and where possible the coproduction of the above transformation plans.</p> <p>In addition to this the PCC will promote all consultation across all PCC channels (Website; social media platforms; Membership Newsletter; verbally from PPI Team)</p>	<p>Piloting an approach to the recruitment, support and involvement of the public in the mentioned work streams under the PCC's 'Make Change Together' project.</p> <p>PCC will create and co-chair with PHA a sub steering group with of the Regional PPI Forum and additional third sector organisations to design a training programme for strategic involvement. This will ensure the programme fits cohesively into a pathway of capacity building tools and training for those wishing to get involved in any area of HSC.</p> <p>The PCC will work with policy leads and the PHA to pilot the sessional payment of the service users involved in the development of Encompass and the Cancer Strategy. We will share learning within a task and finish group to influence regional guidance on remuneration.</p> <p>Evaluate the training, support to ensure it effectively meets the needs of participants and measure and monitor the outcomes of their involvement.</p>	Project Co-ordinator	<p>Ongoing, working within transformation timelines.</p> <p>Key Milestone Board update in Jan 2020</p>	<p>Goal 1 – Representing the Interests of People</p> <p>Goal 2 - Promoting Public Involvement</p> <p>Goal 4- Promoting advice and information</p> <p>And key TIG workstreams</p> <p>Programme for Government Health and Wellbeing 2026</p> <p>Delivering Together</p> <p>Power to People</p> <p>Collective Leadership Strategy</p>	

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1.2	<p>Care at End of Life The Patient and Client Council will work in partnership with NACEL (National Audit of Care at end of Life) HSCB, service users and carers to ensure the views of the dying person and carers inform future policy.</p>	<p>Support lead organisations with approaches to data collection Mar-May 2019; Support and review analysis as agreed with steering group; Review toolkit and support engagement as agreed with steering group;</p> <p>Implementation and Consultation planned for 2020/2021</p>	<p>Lead–Research Manager Head of Ops</p>	<p>Dependent on Lead Organisation Mar- May for Data phase</p>	<p>Goal 1, Goal 2</p>
1.3	<p>Bamford Monitoring Group Administration of Bamford Monitoring Group and ongoing monitoring of HSC delivery in line with Bamford Review Recommendations though a number of initiatives and focused projects which include:</p> <ul style="list-style-type: none"> • Future Planning • Personality Disorder • Mental Health Five Year Review Strategy 	<p><u>Future Planning- Phase 2</u> PCC will arrange and facilitate workshop with HSC Trusts, other public bodies, service users, carers, and BMG members to monitor the effectiveness of the recurrent future planning funds that were established through the work of the BMG and PCC. Trusts will be asked to demonstrate how they are supporting people with a learning disability and their families or carers to plan for the future. Key findings will be summarised and reported</p> <p><u>Personality Disorder</u> As part of our role with Bamford Monitoring Group (BMG), we will work</p>	<p>Lead- External Relations and Policy Manager Involvement Services Programme Manager Project Coord. PPI Team</p>	<p>Ongoing Activity April 19-Mar 20</p> <p>Key Milestones P2 Future Planning- Workshop June 2019 Report Sept 2019</p> <p>Personality Disorder- Report September</p>	<p>Goal 1, Goal 2 and Goal 3</p>

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		<p>with people who have a borderline personality disorder to learn about services available to them through;</p> <ul style="list-style-type: none"> • Capturing the outputs from 3 discussion groups with service users and carers, including engagement with prisoners. • Analysing results of the discussion • Reporting on findings and sharing with HSC bodies and agree action plan. <p><u>Mental Health Five Year Review Strategy</u></p> <p>BMG will make it a priority to create opportunities to further align their work with Co-Production of the Mental Health Five Year Review; in particular:</p> <ul style="list-style-type: none"> • Work with DoH to bring forward plans to champion the lived experience for Learning Disability and Mental Health across the Public Sector • Develop transition plan to ensure BMG supports effective delivery of aims of the Five Year Review 		<p>2019</p> <p>MH Five year review- Programme in place May 2019</p> <p>Draft transition plan March 2020</p> <p>Final Report March 2020</p> <p>An interim update will be provide to Board within the Mid-Year Ops Report, October 2019</p> <p>Workshop March/April 2019</p> <p>Tracking from May 2019</p>	
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		<p>In addition; Members contribute to Programme for Government priorities through on-going workshop style presentations and discussions with relevant departments and organisations</p> <p>Members are facilitated to attend and contribute to relevant fora and attend workshops and conferences to champion the BMG agenda</p> <p>Agree and introduce programme of work and improved tracking of the financial investment into Bamford activity; for programme of work see 1.11</p> <p>Introduce tracking for budget investment to inform current and future requirement</p>			
1.5	<p>Accessibility and Quality of Continence Services</p> <p>The Patient and Client Council will carry out a 2 year project to seek and report on the views of current users of adult continence support services in the community with a specific focus on the accessibility and quality of these services. Report findings will be shared with service delivery organisations.</p>	<p>During 2019/20, this project will involve primary fieldwork with current users of adult continence services across NI's Trusts, as well as focus group discussions involving continence service staff.</p> <p>Steering group convened (including two service users), one meeting held and</p>	<p>Lead – Research Manager</p> <p>Head of Operations Involvement Services Programme</p>	<p>August 2019 – Jan 2020</p> <p>Key Milestone Fieldwork Aug/Sep 2019 Board update</p>	<p>Goal 1 Goal 2</p>

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		another being organised. Pilot interviews underway in Aug 19; service user fieldwork scheduled for Aug/Sep. Whether project continues for a 2nd year is open to discussion.	Manager PPI Team	Jan 2020	
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Goal 2 - Promoting Public Involvement in Health & Social Care					
Objective		Key Deliverables	PCC Lead & Delivery Teams	Key Dates	Key Strategy
2.1	<p>Implement Changes to Membership Scheme Implement changes to Membership Scheme to ensure it is fit for purpose to meet the changing needs of members and service delivery organisations.</p> <p>Initial changes will be based on findings and recommendations of Transformation funded review in 2018/19. PCC will establish an ongoing monitoring and review mechanism to assess the effectiveness of the service and ensure it continues to make a difference</p> <p>PCC anticipate the submission of an OBC or transformation bid for activity requiring investment.</p>	<p>Elements may be dependent on business case approval</p> <p>Establish PCC-led project and project governance to include Service Users and Carers, DoH and HSC colleagues from PHA and HSC Trusts</p> <p>Develop detailed project plans and establish appropriate project mechanisms and controls</p> <p>Manage service and technical readiness activities</p> <p>Manage procurement and supplier delivery as required</p> <p>Implementation and transition to business as usual</p> <p>Ongoing support, monitoring and optimisation</p>	<p>Lead - Involvement Services Programme Manager</p> <p>External Relations & Policy Manager</p> <p>Head of Operations</p>	<p>April 2019 – March 2020</p> <p>Key Milestone</p> <p>Implementation by March 2020</p>	Goal 2
2.2	<p>Effective Coproduction The Patient and Client Council will evaluate the implementation of co-production across our work strategy</p>	<p>A strategic direction will be set for taking forward co-production in the PCC. PCC will implement involvement planning across all work areas and projects; commencing with an evaluation of the status of involvement</p>	<p>Lead - Involvement Services Programme Manager</p>	<p>Commence April 2019</p> <p>Key Milestones</p>	<p>Goal 1, Goal 2</p> <p>Collective Leadership Strategy Health and</p>

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		<p>and co-production within the organisations work.</p> <p>The PCC will initially set up two stakeholder reference groups to coproduce the way forward of the complaints support service and strategic involvement.</p>	Head of Operations	<p>Recruitment activity underway April 2019</p> <p>Programmes Ready for deployment by July 2019</p>	Wellbeing 2026 Delivering Together
2.3	<p>Inquiry into Hyponatremia Related Deaths (IHRD)</p> <p>The Patient and Client Council will support the implementation of the recommendations of the Inquiry of Hyponatremia Related Deaths (IHRD). We will support strong service user/carer input; we will maintain a particular focus on Serious Adverse Incidents and Advocacy and Patient Experience. We will review and develop the role of the PCC in particular in Serious Adverse Incidents</p> <p>There is current PCC participation in the following workstreams:</p> <ul style="list-style-type: none"> • Implementation Programme Management Group • Duty of Candour • Serious Adverse Incident • User Experience and Advocacy 	<p>General Dependent on requirements set out by DoH Workstreams:</p> <p>PCC membership of work streams and sub groups as required – including of the Implementation Programme Board</p> <p>Communicate key messages arising from IHRD through PCC website; membership scheme and wider stakeholder network</p> <p>Participation of PCC staff and members as required in specific initiatives arising from work streams</p> <p>Serious Adverse Incidents</p>	<p>Lead: Complaints Services Manager</p> <p>Board Members Chief Executive Head of Ops Comms Manager Membership Scheme Coordinator PPI Officer Research Officer</p>	<p>Lead: Chief Executive</p> <p>PCC Board Members</p> <p>Head of Operations</p> <p>Head of Development and Corporate Services</p> <p>Complaints Services Manager</p> <p>Involvement</p>	<p>Goal 1, Goal 2</p> <p>To support the programme for implementation of the 120 actions relating to the 96 recommendations of IHRD</p>

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	<ul style="list-style-type: none"> • Death Certification Working Group • Preparation for Inquests <p>The Patient and Client Council will support actively the implementation of the involvement strategy for the Hyponatraemia Implementation Programme in particular through publicising events and information through its Membership Scheme and wider networks and by facilitating focus groups and similar planned activities designed to secure the input of patients and the public to this Programme of Work</p>	<p>To review the current work of the Patient and Client Council in supporting families involved in Serious Adverse Incidents and to produce and submit a report on this subject</p> <p>To support the finalisation of a Statement of Patient and Family Rights in Serious Adverse Incident reviews</p> <p>To maintain active membership of the Serious Adverse Incidents Work stream and to participate fully in the implementation of the recommendations for which this workstream is responsible</p> <p>Advocacy and Patient Experience</p> <p>To undertake an operational review of the resource and other implications for the Patient and Client Council of the creation of a fully funded Patient Advocacy Service with access to independent expert opinion</p> <p>On the basis of research into the provision of advocacy across health and</p>		<p>Services Manager</p> <p>Communication and Events Manager</p> <p>Membership Scheme Co-ordinator</p> <p>Research Manager</p>	
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		<p>social care commissioned by this workstream to review the role of the Patient and Client Council as a provider of advocacy services and as a key supporter and enabler of a strategy to develop advocacy services across Health and Social Care</p> <p>As required, to develop an action plan for organisational change to address these priorities and to develop and submit any Business Case for additional resources arising from it</p> <p>Real Time Feedback System</p> <p>To support the planned implementation of a real time service user feedback system to be commissioned through the Public Health Agency by the Department of Health specifically:</p> <p>Attend and support steering group at DoH to support effective patient centred delivery</p> <p>Continue to facilitate existing representatives from the PCC Membership Scheme to influence</p>			
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		<p>development and implementation</p> <p>Seek opportunities to provide specialist advice and support to RTFS users</p> <p>Monitor and respond to emerging needs and changes in service needs following implementation of RTFS; Establish regular reporting mechanism to inform direction of PCC</p>			
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Goal 3 - Assisting People to make a complaint relating to Health & Social Care; to work with the Department of Health to develop a range of options to support independent advocacy for people experiencing adverse health and social care experiences.

3.1	<p>Complaints Support Service Delivery</p> <p>3.1.1 Business as Usual Activity The Patient and Client Council will provide a support service for anyone wishing to make a complaint about health and social care services.</p> <p>3.1.2 Review of Complaints Support Service</p>	<p>To review current resource requirement against activity</p> <p>To confirm sufficient resources maintained to respond effectively to anyone who wishes to make a complaint</p> <p>To appoint an external auditor to review current Complaints Support Service operations and to make recommendations for change</p> <p>On the basis of this work, to devise and to implement a change plan to include:</p> <p>To review the current arrangements for obtaining service user feedback on the Complaints Support Service</p>	<p>Lead - Complaints Services Manager</p> <p>Head of Operations</p> <p>Complaints Support Officers</p>	<p>August 2019 September 2019</p> <p>September 2019 – November 2019</p> <p>December 2019 to March 2020</p> <p>January 2020 to March 2020</p>	<p>Goal 3 – Assisting People to make a complaint</p> <p>Outworking of Responses to IHRD; COPNI Report on Dunmurry Manor; Regional Neurology Service</p>
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		<p>To review the arrangements for activity reporting for the service</p> <p>To review the information provided to the public on the Complaints Support Service</p> <p>To develop any necessary Business Case for additional resources for the service</p> <p>To develop and implement a project to explore the development of a standard checklist for the submission of clinical complaints in partnership with one or more Health and Social Care Trusts</p>			
3.2	<p>BAU - Complaints Support Service Report The Patient and Client Council will produce a 2019/20 PCC complaints support service report.</p>	<p>Collate and verify all casework information for the year 2018/2019</p> <p>Identify and seek consent clients for case studies to be included with the report</p> <p>Produce content and narrative graphs identifying and describing key issues and themes arising from complaints in 2018/2019 and final report with recommendations for submission to the PCC Board</p>	<p>Lead-Complaints Services Manager</p> <p>Head of Operations</p> <p>Research Manager</p> <p>Research Officer</p> <p>Complaints Support Officers</p>	<p>April – Sept 2019</p> <p>Key Milestones</p> <p>Collated and drafted August 2019</p> <p>Draft to Sponsor Branch</p>	<p>Goal 3</p> <p>Service Improvement</p>

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		<p>Publish the report and disseminate it among key stakeholders</p> <p>Engage with key stakeholders and in particular the HSC Providers Trusts and the Northern Ireland Public Services Ombudsman on the findings of the report and support service improvement and complaints management improvement as a result.</p>		<p>September 2019</p> <p>Publish October 2019 Update – this is on target for completion with a first draft annual report produced w/b 29/07/19</p>	
3.3	<p>Helpline Review & Care Homes</p> <p>The Patient and Client Council will review and develop its Freephone Helpline with particular reference to supporting residents of Care homes and their families.</p> <p>See also 3.1</p>	<p>To implement a switchboard for the Patient and Client Council to improve telephone access for people seeking assistance including residents of nursing homes and their families</p> <p>To make operational changes to the Complaints Support Service to ensure effective access to Complaints Support Officers for people seeking assistance, including residents of nursing homes</p> <p>To appoint an external auditor to</p>	<p>Head of Operations</p> <p>Complaints Manager</p> <p>Helpline Service Coordinator</p> <p>Helpline Service Call Handler</p>	<p>April 2019 – January 2020</p> <p>Key Milestones</p> <p>Pilot underway and continuing to April 2019</p> <p>Business</p>	<p>Goal 1, Goal 2 and Goal 3</p>

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		<p>review current Complaints Support Service operations in relation to concerns about nursing homes and to make recommendations for change (see also 3.1.2) to include:</p> <p>To map current advocacy services for residents of care homes with Trusts and with Independent Providers</p> <p>To work with stakeholders on the implementation of changes recommended by the PCC Report “The Experience of Living in a Nursing Home and specifically:</p> <p>By engagement with Department of Health:</p> <p>The review of termination clauses in nursing home contracts</p> <p>The review of information provided to residents and families in advance of decision to accept places in nursing homes</p> <p>By Pilot Project:</p> <p>The arrangements within nursing homes to support residents who might</p>		<p>Case submission August 2019</p> <p>Implementation subject to approval by March 2020</p>	
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		<p>wish to raise a concern</p> <p>Review of the PCC Advocacy Toolkit for staff of Nursing Homes</p> <p>Developing direct resolution of concerns by the Complaints Support Service with Nursing Homes</p> <p>Developing pro-active visits by PCC Officers to engage with home residents on their experience of living in a nursing home</p>			
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Goal 4 - Promoting the provision of information about the design, commissioning and delivery of health and social care					
Objective		Key Deliverables	PCC Lead & Delivery Teams	Key Dates	Key Strategy
4.1	<p>Health Literacy</p> <p>The Patient and Client Council will progress work to bring key stakeholders together to engage on Health Literacy and agree common understanding.</p>	<p>Work with Belfast Healthy Cities to facilitate discussion with representation across HSC and relevant Bodies</p> <p>Monitor feedback</p>	<p>Lead – Research Manager</p> <p>External Relations and Policy Manager</p> <p>Research Team</p> <p>Communications and Events Manager</p>	<p>Key Milestone</p> <p>October 2019</p>	<p>Goal 1, Goal 2, Goal 3 and Goal 4</p>

Goal 5 – The PCC is an effective organisation					
Objective		Key Deliverables	PCC Lead & Delivery Teams	Key Dates	Key Strategy
5.1	<p>10 Year Anniversary Develop and implement a Communication and Events Plan to mark this important milestone for PCC. This should continue to make use of innovative methods of engagement and focus on developing a more representative membership database</p>	<p>Set up a steering group of service users and carers to develop a Patient and Client Council 10 year communication and events plan – this will involve:</p> <ul style="list-style-type: none"> a) a series of communications to highlight successes to a wide audience; b) 10 year anniversary events c) A communication plan to heighten awareness of Patient and Client role amongst HSC staff. 	<p>Head of Development Communication s Manager Involvement Services Programme Mgr (Membership Events)</p>	<p>Key Milestones May 2019 – Event and Communication Plan Key Event September 2019</p>	<p>Goal 1, Goal 2 & Goal 4</p>
5.2	<p>The Patient and Client Council will progress and strengthen partnership working across health and social care service through their participation in the Department of Health’s ‘Partnership Network’ emerging from Future Search.</p>	<p>Attend and contribute as required</p>	<p>Lead: Head of Operations</p>		
5.3	<p>Patient and Client Council will manage its resource effectively including its estate and add value for money in its operations.</p>	<p>Effective use of internal processes and continuous monitoring and improvement</p>	<p>Head of Development</p>	<p>Year round activity</p>	<p>Goal 5</p>
5.4	<p>The Patient and Client Council Board will ensure effective governance arrangements are in place</p>	<p>Effective use of internal processes Development of a schedule of governance reporting and submission</p>	<p>Lead: Head of Development</p>	<p>Year round activity</p>	<p>Goal 5</p>

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		<p>activities to support preparation and submission</p> <p>Effective use of SLA with BSO specialist advice and support services</p> <p>Involvement and support from the Governance and Audit Board sub-committed</p> <p>Continuous improvement</p>	Team members as appropriate		
5.5	The Patient and Client Council will manage its people effectively - Delivering effective recruitment, appraisal, absence management and personal development arrangements.	<p>Effective use of best practice and internal policies and processes to support teams to deliver services</p> <p>Monitoring and reporting of optimal performance management and personal development</p>	SMT	Year round activity	
5.6	The PCC will continue to be agile and responsive to change including the overarching HSC Transformation Agenda, the social and political context for NI and the impact of EU exit.	The PCC will assume an effective business partnering role as the statutory voice for citizens within the system as we navigate through both political and transformative change agenda	SMT	Year round activity and monitored by SMT weekly	Goal 5
5.7	The budget for the year 2019/20 is £ 1,435,984.	<p>The PCC will build budget for 2019/20 based on service and operational priorities</p> <p>Continue to review assets and accommodation assets to ensure they are fit for purpose and to optimise value for money</p>	SMT	Year round activity	Goal 5
5.8	Promotion campaign relating to helpline and membership promotion.	Dependent on successful bid Bus/Radio/Animations relating to the	Communications Manager	Quarter 1 and Quarter	Goal 5

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		development and promotion of PCC Services		2	
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APPENDIX 1

Project and Research Planning and Approval Process – Please click on the PDF link below:



Adobe Acrobat
Document