Facilitation Framework

- Reverse Commissioning
- Community Partners
- Optimum Talent & Leadership
- Integrated Regional & Local Networks
- Communications & Information

Rudi Page, Facilitator
NHS BME Network

e: rudipage7@gmail.com
t: 07958 744660

www.nhsbmenetwork.org.uk
1. Executive Summary

The facilitation model for the NHS BME Network Action Plan is based on building trust & collaborative Leadership amongst BME Professionals and empowering local communities. The source of the evidenced-base is derived from NHS bodies and their statutory duties to promote racial equality and reduce inequalities. The approach to implementation requires the Network to improve strategic communication and work closely with the CEOs from NHS Trusts, SHAs, shadow GP Consortia and build relationships with a wide range of stakeholders at local and national levels.

2. Introduction

The purpose of this paper is to provide national officers and national leads with guidance on the Facilitation Model through four separate but interconnected programmes:

- Reverse Commissioning
- Community Partners
- Optimum Talent
- Communications & Information

to ensure the Implementation of NHS BME Network Action Plan across the SHA regions between May – December 2011.

3. Background

The NHS BME Network was launched in June 2010, with a mission to be an independent and effective voice for BME staff, patients and service users to ensure the NHS delivers on its statutory duties regarding race equality.

The Network is currently overseen by a National Transitional Committee (NTC) consisting of volunteers supported by their CEOs who have been co-opted onto the Committee by the Transitional Lead Dr Lyfar-Cissé. The volunteers with support from their employers, have been tasked to build the capacity of the network through peer recruitment and engage local BME communities. The NTC will be dissolved in December 2011 and replaced by an elected executive committee.

4. Work Programme

- Facilitate and ensure that the Network achieves its objectives across SHA regions.
- Take the Lead role in London and West Midlands regions
- Engage BME communities with a focus on addressing ethnic health inequalities nationally.
5. Reverse Commissioning

Despite research evidence which identifies significant ethnic health inequalities, the NHS has failed to engage patients, carers and service users as joint providers of their own care and recovery. The “Reverse Commissioning” approach proposed by Dr Vivienne Lyfar-Cissé, recognises that the health needs of BME communities are to a large extent determined by their use of provider services.

The Reverse Commissioning process will start with an analysis of the data held by provider organisations to determine the extent to which BME Communities are utilising the existing clinical services. The knowledge gained from this process will be used to engage BME Communities. This feedback will be used to determine what changes if any are required to ensure the clinical services adequately meet the needs of these communities. This information will then be used as a platform to engage healthcare professionals and to establish genuine partnerships with BME Communities.

Reverse Commissioning & Development Workshops, in collaboration with NHS Bodies, Local Authorities and Community Partners will provide a valuable source of information on patient, carers, service users expectations, experience, needs and aspirations for their local health services.

The Care Quality Commission (CQC) has identified two priorities that will enable it to enhance the quality of outcomes:

1. Ensuring care is centred on peoples’ needs and protects their rights
2. Focus on quality and act quickly to eliminate poor quality care

CQC is going to pay particular attention to the needs of more vulnerable groups including mental health and learning disabilities. It states that “it is local staff and local services who deliver improved services for people”.

Case Study (1): Birmingham & Solihull, Mental Health Trust

• “The Revolving Door” by Birmingham & Solihull, Mental Health Trust embraces the concept of Reverse Commissioning, its path breaking film and learning tools aim to give a community perspective of mental health services and explores and identifies the complexities that individuals and families may experience when trying to access support and treatment from mental health services.

Reverse Commissioning will be a valuable source of information and intelligence for Joint Scrutiny Needs Assessment Analysis, HealthWatch, GP Consortia, NHS Commissioning Board, Local Health & Wellbeing Boards and Providers.

The ultimate aim of this mechanism is to address and reduce ethnic health inequalities which can be achieved by the development of evidence-based health promotion programmes to achieve Government objectives of Healthy Lives, healthy People become a reality for BME Communities.
6. Community Partners

- Churches
- Gurdwaras
- Mosques
- Synagogues
- Temples

Faith groups, social enterprises and the third sector have considerable knowledge and practical experience to act as local patient champions in response to the Public Health and wellbeing needs of vulnerable and marginalised people within neighbourhoods.

Enhance the network and community partners capacity to develop and implement innovative, effective solutions for patients, carers and staff.

**Case Study (2):** Church of God of Prophecy, (COGOP),

- The Church of God of Prophecy, (COGOP), has demonstrated the capacity to promote health improvement by mobilizing health and social care professionals amongst its congregations to organise health awareness activities and host public consultation events on behalf of local and national NHS initiatives (Battlefield of the Mind Series and Mary Seacole Health Awareness). COGOP will lead a 6 month pilot programme and share knowledge with Churches and Faith Communities.

It is to this end that Community Partners will be enabled to use “Reverse Commissioning” as a tool for patient and public engagement within neighbourhoods. The process will utilise the feedback of the expectations, experiences of patients, carers, service-users and families and their needs and aspirations for local health services; including access to diabetes, cancer, mental health, learning disabilities, heart disease, HIV/Aids, prostate cancer and sickle cell services.

7. Optimum Talent and Leadership

To deliver on its aims and objectives the NHS BME Network is committed to ensuring local BME networks are developed and empowered to effectively engage with local organisations (NHS organisations, local authorities, GP consortia etc) concerning race equality. The development of local networks will include a module on leadership & Network Development to ensure “The Big Move” becomes a reality.
Action Learning Sets

The peer-to-peer learning will focus on Mentoring and personal support for BME Staff to develop confidence, knowledge and skills for further progression.

- Level 1: Bands 1-4
- Level 2: Band 5
- Level 3: Bands 6-7
- Level 4: Band 8

Key characteristics of local networks will include:

- education & training
- skills & productivity
- patient experience & public engagement
- representation

The improvement of Network performance and building strategic alliances (employers, professions, unions, community pharmacy and patient experience & public organisations) across the NHS and engagement with local communities, will be underpinned by agreed values and code of conduct.

“Optimum Futures” links Health & Wellbeing, workforce development, education and training with patient experience and public engagement to inspire Health Improvement within neighbourhoods and local communities.

Case Study (3): Southampton BME Network

Level 2: Band 5

Mentoring and personal support for Nurses to develop confidence, knowledge and skills for further progression.

Case Study (4): South East Coast Taskforce

- Capacity building
- Engagement of BME leaders and communities
- Level 1 Band 1-4 (ESOL)
- Assist with the development of a national BME accreditation tool
- Other priorities to be determined on 15 June 2011

The local BME Network will engage local community groups and solicit their cultural expertise and support

Task Force

- South East Coast
- South Central
- East London & City
8. Clusters integrated Regional and Local Networks

The Network will develop multi-level relationships to meet national policy goals and provide regional clusters and commissioning groups with scale and expertise that can be translated to local delivery.

London

West Midlands
4. Black Country 5. West Mercia

East Midlands
5. Northamptonshire & Milton Keynes

East of England
1. Norfolk, Great Yarmouth and Waveney, 2. Cambridgeshire,
7. Hertfordshire 8. South Essex

South Central
1. Oxfordshire and Buckinghamshire
2. Southampton Hampshire Isle of Wight and Portsmouth,
3. Berkshire West and Berkshire East

South East Coast

South West
1. Gloucestershire, Swindon 2. Bath, North East Somerset, Wiltshire,
3. Bristol, North Somerset, South Gloucestershire
4. Bournemouth and Poole, Dorset
5. Devon, Plymouth, Torbay, 6. Cornwall and Isles of Scilly

Yorkshire & Humber
5. Calderdale and Wakefield 6. South Yorkshire and Bassetlaw

9. Communications & Information

A series of bulletins to ensure all stakeholders are aware and understand the development of The Network and are kept informed about progress until December 2011.
10. Events

Title: Reverse Commissioning Workshops  
Time: 10am - 4.00pm  
Month: July 2011

4 July  
Birmingham & Solihull Mental Health Trust, Trust Headquarters: B1, Unit 1 50 Summer Hill Road, Ladywood  
Birmingham B1 3RB

11 July  
Hillside Bridge Health Care Centre 4 Butler Street  
West Bradford BD3 OBS,

18 July  
Sir Alexander Fleming (SAF) Imperial College London  
South Kensington Campus London, SW7 2AZ

26 July  
Brighton & Sussex University Hospital NHS Trust, S.E. Coast Region

Title: Leadership Workshops  
Time: 10am - 4.30pm  
Month: June 2011

15 June  
South East Coast  
Hilton London Gatwick Airport South Terminal  
Gatwick Airport, West Sussex RH6 0LL

6 July  
South West

15 July  
South Central

Title: Community Partners Workshop  
Time: 11am - 4pm  
Month: 8 July 2011

8 July  
East Midlands  
BME cancer communities NCVS  
7 Mansfield Road Nottingham NG1 3FB

Title: Optimum Futures Health & Wellbeing Fair  
Time: 10am - 4pm  
Month: October 2011

29 October  
Mary Seacole Centre, Park Road, Little Horton, Bradford, West Yorkshire BD5

Title: Board Seminar on Race Equality: Productivity and Patient Experience & Public Engagement  
Time: 10am - 4pm  
Month: September 2011

Yorkshire & Humber Region

Title: Knowledge Sharing Symposium: Translating Policy into Practice  
Time: 10am - 4pm  
Month: March 2012

14 March  
Imperial College London