

Meeting Title	Board of Directors		
Date	9/1/2020	Agenda item	Bo.1.20.24

## Listening, responding and improving Draft Patient and Public Involvement Strategy

<b>Presented by</b>	Tanya Claridge, Director of Governance and Corporate Affairs		
<b>Author</b>	Tanya Claridge, Director of Governance and Corporate Affairs		
<b>Lead Director</b>	Mel Pickup, Chief Executive Officer		
<b>Purpose of the paper</b>	The purpose of this report is to provide the Board of Directors with the draft Public and Patient Engagement Strategy for approval		
<b>Key control</b>	This paper is a key control for the strategic objectives to provide outstanding care for patients and to be a continually learning organisation		
<b>Action required</b>	For approval		
<b>Previously discussed at/ informed by</b>	<ul style="list-style-type: none"> <li>- Quality Committee</li> <li>- Council of Governors task and finish group (membership engagement)</li> <li>- Patients First Committee (patient engagement)</li> <li>- World café #1-engagement with CBUs and other staff</li> <li>- Annual General Meeting-members in attendance consulted</li> </ul>		
<b>Previously approved at:</b>	<b>Committee/Group</b>	<b>Date</b>	
	Quality Committee	18 December 2019	

### Key Options, Issues and Risks

Building and sustaining effective relationships with people who use our services, our members, our local community and the wider population of Bradford takes time, effort and commitment. This strategy is our commitment to do just that, to make sure that we work in partnership in a meaningful way with our patients, local groups, third sector organisations and the wider population. This is because we know that this partnership working is fundamental to our vision, which is to be “an outstanding provider of healthcare, research and education, and a great place to work” and will directly support the delivery of our clinical services strategy, as we continually develop and improve our services to meet the health needs of the people of Bradford and West Yorkshire.

### Analysis

The Quality Committee considered the strategy at its meeting held on 18 December 2019. The Quality Committee noted that a period of consultation, informal and formal has resulted in the final draft of this strategy. The Committee further noted and agreed that following final approval by the Board of Directors, a detailed implementation plan with clear measureables will be developed and presented for approval to the Quality Committee in January 2020. Assurance in relation to the delivery of this strategy will be added to the Quality Committee’s workplan.

### Recommendation

The Board of Directors is asked to approve the strategy as attached at Appendix 1.

Meeting Title	Board of Directors		
Date	9/1/2020	Agenda item	Bo.1.20.24

Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers					g	
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)						

Benchmarking implications (see section 4 for details)	Yes	No	N/A
Is there Model Hospital data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is the Trust an outlier (positive or negative) for any benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Risk Implications (see section 5 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Quality implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resource implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal/regulatory implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diversity and Inclusion implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Performance Implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Regulation, Legislation and Compliance relevance
NHS Improvement: (please tick those that are relevant)
<input checked="" type="checkbox"/> Risk Assessment Framework <input checked="" type="checkbox"/> Quality Governance Framework
<input type="checkbox"/> Code of Governance <input type="checkbox"/> Annual Reporting Manual
Care Quality Commission Domain: Responsive
Care Quality Commission Fundamental Standard: Person Centred Care
NHS Improvement Effective Use of Resources: Clinical Services
Other (please state):

Relevance to other Board of Director's Committee:

<b>Meeting Title</b>	<b>Board of Directors</b>		
<b>Date</b>	<b>9/1/2020</b>	<b>Agenda item</b>	<b>Bo.1.20.24</b>

<b>(please select all that apply)</b>					
Workforce	Quality	Finance & Performance	Partnerships	Major Projects	Other (please state)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>