Community Networks – Question and Answers

1) Q: What is a community network?

A: We believe that people should be at the heart of everything we do. We believe that, where possible, more services should be offered locally and we need to be sure that our services are meeting the needs of our populations.

We can't do this alone. We want to work with people who live in our areas so they can help develop our plans. To do this, we've established eight Community Networks across both Canterbury and Coastal and Ashford CCG areas.

These networks consist of members of our local communities: people from Patient Participation Groups, staff that provide health and social care services, and local voluntary and community organisations. Together they will work with GPs and staff from the Clinical Commissioning Groups (CCGs).

These groups will bring together a wealth of experience and knowledge on current services and how they are used by patients. The networks will run for three years and will assist and advise the CCG in making sure future services are based around individuals and the needs of the communities in which they live and work.

The groups were set up in November and they have met twice to establish how they will operate. Future meetings will involve a more detailed look at each area's priorities, the cost and effectiveness of current services and how things might be improved.

2) Q: How many networks are there and is there one local to me?

A: There are eight networks. Three are based around Ashford (North, Rural and South), and five across Canterbury (Town), Faversham, Herne Bay, Sandwich/Ash, and Whitstable.

3) Q: What do they do?

A: Our population is changing. People are living longer and many of them have several complex conditions, including dementia. We need to make sure that the right range of health and care services are available to help people stay fit and to live their lives at home as they wish to. With less resources available and demand increasing, we need to work together to plan for the future and make sure the right services are within our communities.

The networks are advisory groups to the CCG focusing specifically on the needs of their population in their community. This means that future health and care will be tailored more to individual areas rather than a one-size fits all approach. This way of working has not been used before in Kent. We are gathering as much information as we can about our existing services, what services are doing elsewhere and crucially where services are getting the best results in delivering care to local people.

The network groups will play a vital role in looking at this information and helping the CCGs listen to the views and experiences of local people, ensuring that patient and carer's needs and public concerns are taken into account.

4) Q: What is a "community service"?

A: A community service is a service that is provided outside of a hospital. They help people recover if they have been in hospital, or look after themselves so that they recover and feel better without needing more serious medical treatment. Community services

- Community-based specialist nurses
- · Community geriatricians explanation needed
- · Community hospitals
- Community nursing
- Dementia services
- Dentistry services
- Dermatology
- Diagnostic tests
- Eating disorder services
- GP local enhanced services (LES)
- Health screening
- Hospices
- Intermediate Care Services explanation needed
- · Outpatient services (satellite) explanation needed
- Pharmacy services
- Physiotherapy
- Podiatry explanation needed
- Some mental health services (eg: psychological therapies)
- Public health services explanation needed
- School nursing
- Sexual health services
- Speech and language therapy
- · Urgent care services eg: Minor Injury Units and walk-in centres.

These may be delivered in a person's home from a GP surgery, or community resource such as a cottage hospital, hospice, school, community centre or volunteering service such as Carers Support. (Please note: the above list is not exhaustive.)

5) Q: How do I join a network?

A: Network members have been selected based on their knowledge and expertise on a specific subject or area. They will often be people who have many networks and contacts of their own which means they can help to ensure more people can be involved when there is something to share. No decisions will be made on future services without wider public involvement. There will be opportunities for the public to have a say on any proposals.

6) Q: How do I find out about what the networks are doing?

A: Both CCG websites contain a section on Community Networks. This will be updated with information on each network area and the priorities they are working on, along with any announcements. There is also a regular newsletter with articles about the CCGs and local services, which you can find on the CCG websites.

8) Q: Why are other people making decisions about healthcare on my behalf?

A: The CCGs are statutory organisations set up by Parliament to commission the majority of health services on behalf of their local populations. The CCGs do this with the involvement of their local populations and work closely with local partners in planning for people's health and wellbeing, through stakeholder events held in the community, listening to our patient groups and networks, and by holding Governing Body meetings that are open to members of the public. Community Networks will not be making any decisions. They are an advisory group who have experience and knowledge on the health and social care system to help us develop our plans.

9) Q: What qualifications do the people on the networks have?

A: Network members, as set out in the Terms of Reference, comprise clinical and nonclinical staff as well as lay persons and patient representatives. They have a variety of different qualifications, ranging from medical to managerial as well as patient/carer experience.

10)Q: Who are part of the networks?

A: Membership includes representatives from the Patient Participation Groups, local voluntary and community groups, health and social care providers, GPs, CCG and KCC commissioners.