

# Integration Joint Board 15<sup>th</sup> December 2022

Subject:	HSCP Locality Engagement Approach
Purpose:	Awareness

**Recommendation:** It is recommended that IJB endorse the proposed approach for

implementation across all mainland NA localities.

Direction Required to	Direction to :-	
Council, Health Board or	No Direction Required	Χ
Both	2. North Ayrshire Council	
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	

Glossary of Terms	
NHS AA	NHS Ayrshire and Arran
HSCP	Health and Social Care Partnership
LPF	Locality Planning Forums
PSMT	Partnership Senior Management Team
IJB	Integration Joint Board

# 1. **EXECUTIVE SUMMARY** 1.1 The North Ayrshire Health and Social Care Partnership has committed to reviewing the current Locality Planning structures in the updated Participation and Engagement Strategy (2022-2025). The strategy document outlines a plan to review our current engagement approaches with communities, HSCP staff, and partners, throughout 2022 to work towards fulfilling our local and strategic priorities. 1.2 North Ayrshire HSCP has many areas of strength in relation to engagement and participation. However, there are also areas where improvement can be made. This paper outlines our planned approach to improving our locality engagement through redevelopment of our Locality Planning Forum structure. The new approach will aim to increase levels of participation from communities and representation from HSCP service areas. 1.3 It will propose facilitating: 2 x Stakeholder Events in each locality per year • 2 x Locality Planning Review Group meetings per year.



Partn	ersnip
2.	BACKGROUND
2.1	The current HSCP locality planning structures have been in place since 2015. Development of the North Ayrshire Locality Planning Forums (LPFs) was informed by Scottish Government Guidance on Locality Planning. The guidance set out the importance of establishing and considering the needs of localities when creating Strategic Commissioning Plans. It identified the need to engage effectively with all stakeholders of Health and Social Care Services within a locality but said little on what the local structures or mechanisms to achieve this should be.
2.2	The local structure identified for LPFs, established a core group of three senior officers with the HSCP structure; an LPF Chair who is a member of the IJB, a GP based in the locality in which they represent, and an HSCP Senior Manager.
	This core group would then identify additional members and organisations for inclusion on the LPF. These additional members would include health and social care stakeholders from across the locality.
2.3	Since 2015, the LPF structures set out to facilitate an opportunity for professionals and people to come together, use their experience, and help influence the strategic direction of the Partnership by the development of locality priorities.
2.4	Since their launch, the LPFs have had varying experiences. All localities have been successful in identifying local challenges and priorities and have effectively engaged and participated in other locality planning structures. However, LPFs have experienced challenges including difficulties in recruiting to core member roles, undertaking effective engagement with communities, and forums being unclear how their activity leads to overall change in the HSCP. In addition, the LPFs have never truly been optimised as a resource for Community Engagement by HSCP services.
2.5	The pandemic has undoubtedly had an impact on the way people engage with us and each other. The ethos of our participation and engagement activity focuses on continuing to develop meaningful engagement pathways for people who access services, carers, staff, third sector partners, and the wider community.
2.6	In response to this, we must consider a more effective approach to locality planning. Our approach must be inclusive of people in our localities, our staff teams and community groups. We must facilitate meaningful opportunities for people to engage and participate in the decision-making process of the HSCP.
2.7	The Partnership are currently in the process of piloting the Healthcare Improvement Scotland Framework for Community Engagement and Participation with the Community Mental Health Team. Using the framework has enabled the team to:  • Establish a baseline of how engagement is considered  • Have a conversation about current positive practice and potential areas for development; and



- Compile an action plan which focuses on the methods and outcomes the team will strive to achieve in relation to engagement.
- 2.8 Following the CMHT pilot, it is anticipated the Framework will be rolled out across all HSCP services. If approved, the proposed approach to locality engagement (as detailed in section 3 below) can be promoted within the Partnership and be utilised as a vehicle for engagement by our staff teams with our local communities. Encouraging our services to include Locality Conversations as part of their service reviews enhances the link between our locality engagement structures and our services.

## 3. PROPOSALS

- 3.1 "Engagement that takes place routinely helps to develop trust between communities and public bodies, fosters mutual understanding, and makes it easier to identify sustainable service improvements" (Planning with People, 2021).
- To help increase our presence within localities and encourage greater participation from local people in communities it is recommended that we adapt our methods for facilitating conversations across our 6 localities.
- 3.3 Our localities and current chairs:
  - Irvine Louise Gibson
  - 3 Kilwinning Vacancy
  - 3 Towns Vacancy
  - Garnock Valley Vacancy
  - North Coast & Cumbrae Louise McDade

#### Arran

Arran has taken a slightly different approach to facilitating Locality Planning in recent times. The Partnership Engagement Team will work alongside our colleagues on Arran to support them to develop a model that works best for the island but ensures there is a level of consistency in our approach across North Ayrshire. It is vital that links with the Locality Partnership on Arran, and across North Ayrshire, are maintained.

### 3.4 The Structure

In place of the current structure of 4 locality planning forum meetings per annum we would facilitate:

- 2 Larger stakeholder events in each locality per year called, 'Locality Conversations'
- 2 Locality Planning Review Groups meetings per year



### 3.5 Locality Conversations

These will be larger stakeholder events and will be facilitated in community settings in each locality in North Ayrshire. Staff members from across services in the Partnership, Council, NHS, and 3<sup>rd</sup> sector and independent providers will be encouraged to attend alongside the community members in each locality.

The events will be facilitated by the Partnership Engagement Officer team with staff teams being encouraged to help share topic discussions based on the activities and priorities in services at that time. These events will be structured but relaxed to enable people to have conversations, ask questions and share ideas around health and social care services in their locality.

It is also anticipated that these events could also be used to help respond to other relevant national and local consultations.

The Partnership Engagement Officers will compile a report after each stakeholder event detailing the themes and ideas shared from the session.

The sessions will be planned in partnership with our Locality Partnership colleagues in January 2023. This will ensure we are maximising our opportunities to work together and avoiding any duplication. We will endeavour to have our first session in early March 2023.

## 3.6 Locality Planning Review Groups

The purpose of the review groups is to explore the themes and ideas shared from the Locality Conversation events. The role of the review group will be to scrutinise the information collected through the Locality Conversation and provide updates, feedback and recommendations through the Partnership's governance structures, including Strategic Planning Group, PSMT and IJB. Each Locality Planning Review Group will have a nominated Chair who will have the responsibility of providing feedback on the Locality Conversations and take forward any actions to relevant services.

The membership of the Locality Planning Review Groups will consist of:

- Chairperson (IJB member)
- Senior Manager from Partnership Services
- Locality Officer from Connected Communities
- Community Link Worker
- Practice Manager
- Representative from the Partnership Performance Team
- Representative from the Strategic Planning Team
- Other relevant officers, co-opted on an ad-hoc basis based on expertise to subject matter.



	Care Improvement Network
3.7	Care Improvement Network
	The Care Improvement Network will act as a virtual network for people in North Ayrshire. This will give people the opportunity to engage online if they are unable to participate in the locality-based conversations and again is a captive audience for our services to engage with our communities on relevant national and local conversations and thematic priorities.
3.8	Representation from the IJB is required on the Locality Planning Review Groups. IJB members are asked to consider whether this representation would be taken on by the current membership or by proposing new members.
3.9	Anticipated Outcomes
	To facilitate an opportunity for local people, our communities, and staff to come together and take part in an ongoing, inclusive, accessible, and meaningful conversation to help influence, develop and shape the direction of local health and care services. The voice of localities has a greater influence on informing our strategic decisions and future planning.
3.10	Measuring Impact A report will be produced following every Locality Conversation which will be inclusive of an engagement evaluation. This information will also be reflected within our Annual Performance Reports.
4.	IMPLICATIONS
4.1	Financial There will be modest financial costs for booking venues and providing tea/coffee for delegates.
4.2	Human Resources The sessions will be facilitated by the Partnership Engagement Officer Team. Admin support will be required to help consolidate the information for the locality conversation reports.
4.3	Legal None.
4.4	Equality/Socio-Economic The sessions aim to create a more accessible and inclusive opportunity for the community and our staff teams to come together and discuss health in social care in their locality.



	The locality conversations will endeavour to include representation from HSCP key service users, many of whom possess protected characteristics. In addition, representation will also be sought from other communities of interest.
4.5	Risk Low risk – Focusing on developing our engagement with the local community will enable the Partnership to inform people across our localities about their services, which will hopefully lead to more informed decision making.
4.6	Community Wealth Building Greater levels of inclusion on the planning, development, and design of local HSCP services.
4.7	Key Priorities These events will help meet the strategic priority of Enabling Communities. In addition, the conversations that take place and subsequent outputs will help contribute to positive action across all other strategic planning priorities.
5.	CONSULTATION
5.1	The approach was presented to and endorsed by the Partnership Senior Management Team (PSMT) on 17 <sup>th</sup> November 2022, there is buy-in from services to support the new approach and embrace as a positive framework and structure for services to engage directly with our communities.

**Caroline Cameron, Director** 

Report Author: Michael McLennan, Partnership Engagement Officer, <u>michaelmclennan@north-ayrshire.gov.uk</u>

**Appendices** 

• Nil