

Engagement and Participation Committee
Wednesday 17th August 2022

Summary of key pieces of work that the disbanding EPC asks the Population Health Committee to take forward.

Situation

NHS Grampian has had a dedicated committee around public involvement and engagement for a number of years, and has a well-established recognition of the value of interacting with our patients and communities. The work of the Engagement and Participation Committee has developed over time and provided the Board of NHS Grampian with useful updates and insights on key activities, successes and challenges. It has also helped in the Board's work in ensuring our communication strategies are effective, that people's voices are heard in major service re-design, reviews of services, capacity building in equality and diversity within the workforce, delivery of services and capital infrastructure, patient feedback and participatory activities across the Board.

Background

As part of a review of board structures in NHS Grampian, the Board agreed to the development of a more strategic approach to engagement and participation in October 2021 and in August 2022 endorsed the Terms of Reference for a new 'Population Health Committee' that has 'people powered health', equalities and health inequalities, to support the future strategic development of NHS Grampian as defined in the 'Plan for the Future'.

Assessment

Key to the decision around creating a new committee has been the impact of COVID-19 and the resulting increasing importance attached to wellbeing, self-management and co-production of services that meet the changing needs of our populations. However, prior to the Pandemic, the Committee had already identified some gaps in our knowledge about E&P activity, how well this was being done with specific communities, and areas where these activities were not so well-developed.

Therefore, developing a strategic intent for the committee and having a systems approach has been a key area of work and which has culminated in the evolution of the Population Health Committee. It is anticipated that structures underneath the committee will be created in order to monitor activity and report up to the PHC by exception, for scrutiny and assurance.

This paper is intended to facilitate a smooth transition between the Engagement and Participation Committee and new Population Health Committee by combining agreed items from EPC's current action tracker, with risks identified through its previous GAP analysis work and member reflections into one handover. The Engagement and Participation Committee formally requests that the PHC consider the opportunities and issues raised in this paper as it develops its programme of work for the coming year.

Enduring Actions

In order for key areas of work to be transitioned to the new Committee, at the final meeting of the Engagement and Participation Committee on 17 August, agreement was reached on the following items from its tracker to be included within its handover.

- The Plan for the Future / Delivery Plans
Whilst it is understood that delivery against milestones and objectives will be reviewed by PAFIC, it is felt that engagement activity undertaken to embed the Plan for the Future and deliver its ambition should continue to be scrutinised by the Population Health Committee or relevant sub-group.
- Dr Gray's Hospital
The Committee feels that engagement work undertaken to support the future strategic direction of Dr Gray's Hospital represents a learning opportunity through which to test new approaches as well as apply those learned through the Plan for the Future development.
- Major Service Change
The EPC recommends an enhanced approach to engagement supporting service change that includes; proportionate and representative participation from the wider public, evidence gathering afterwards showing how it has influenced change and that Engagement Evaluation Framework - already in use for larger projects - be a made a requirement for all engagement projects.
- Handling & Learning from Feedback
Members of the EPC concluded that Feedback reports represent a valuable source of intelligence and requests that the new committee uses the insights these (quarterly) reports provide to inform its work. However, it acknowledged the breadth of topics means that supporting work spans multiple teams including Public Involvement Team/Equality & Diversity/PIP Directorate/Clinical Services/Complaints Team.
- Equality and Diversity

Whilst EPC has provided assurance on the statutory requirements placed on NHS Grampian, members felt that the new PHC presents an opportunity for both greater ambition and closer working with community and third-sector partners to achieve a step change. The Population Health Committee may wish to consider how a greater focus on patients and wider public could be achieved through linkages with groups such as the Health Inequalities Action Group.

- Volunteers Strategy
A policy has been written to promote and develop opportunities for volunteering to the benefit of patients, their relatives, staff and the volunteers themselves. However, a clear strategy setting out NHS Grampian's view on the future role of volunteers and its commitment to nurturing them is required to fully realise their potential across our system.
- Engaging with Children Strategy
EPC has sought numerous updates on the work of the North of Scotland Child Health Services Review and had intended to invite the Child Commissioner to a future meeting to discuss what more could be done to ensure children's and young people's interests and views are being listened to. With Children specifically referenced in the Plan for the Future, EPC members recommend that the PHC considers them explicitly within its work plan.
- Advocacy Strategy
NHS Grampian's approach to advocacy requires to be reviewed, both to ensure good value is being achieved by outsourcing advocacy provision and to agree whether this is the preferred way forward for the Board. The new Population Health Committee or sub-group would be an appropriate forum for this discussion to take place.
- Supporting Structures
Members of the EPC felt it important to emphasise that appropriate sub-groups be put in place to support the PHC. These groups and structures should have an operational focus to support the breadth of the new Committee's remit, enable sufficient time to consider implementation in detail, scrutinise outcomes and ensure an inclusive, joined-up approach with partners including primary care SAS and IJBs.

Strategic Risk Workshops

Prior to the review of all Board Committees, in tandem with NHS Grampian's new clinical strategy, EPC undertook work to refresh the Committee's strategic intent. With the approval from the Board, 3 separate 2 hour workshops were held between December 2021 and March 2022.

Facilitated by NHS Grampian's Risk Manager, EPC members collectively considered risks falling within the Committee's remit, their impacts and the corresponding mitigations required. Whilst these were originally intended to inform EPC's future programme of work, the advent of the new Committee supersedes this and the following outputs are therefore shared here to ensure they are logged and responsibility transitioned appropriately.

Discussion centred on Committee assurance responsibilities including; the strategic direction of engagement and participation activity, plus clear communication of that intent to stakeholders, the mechanisms that enable activity to be meaningful and the resulting quality & effectiveness. This identified the following mitigations, which can be grouped under three themes.

1. Strategic Intent:

Setting a clear ambition for 'involvement as standard' in the re-design of services is considered vital. It was felt that NHS Grampian should strive to exceed legislative requirements, set out clear objectives at launch and approach challenges openly and transparently. A variety of channels should be used to explain benefits and optimise 'buy-in' from our workforce. A process for capturing engagement and participation activity, as well as a place visible to the Committee for logging it, requires development to minimise duplication and encourage collaboration.

2. Using Feedback Tools

As mentioned elsewhere in this paper, risk workshops identified the gathering and use of intelligence from a range of sources as invaluable. Data and feedback can guide engagement and participation priorities and provide transparency over risk, which is integral to assurance. Harnessing feedback formal and informal channels, existing and new, will facilitate effective decision-making about where engagement can be targeted to effect meaningful change on the delivery of services.

3. The power of partnership/avoiding inequity:

Aligning activity and messages with partners to avoid confusion among communities and competing/conflicting work streams is essential. Similarly, actively listening to diverse communities and working with the expertise of community stakeholders has the potential to transform how ill-health can be prevented and self-managed. Paying particular attention to quieter voices is also required to avoid minimising the seldom heard.

These three areas contain mitigations that continue to require oversight through PHC or appropriate sub-groups in order to avoid reputational damage and missed opportunities for improved service design, as well as improve efficiency, avoid duplication and work more collaboratively with partners to improve outcomes.

Committee Member Reflections

The following anonymised personal reflections are shared at the request of individual Engagement and Participation Committee members.

- *“I have felt the committee to be a very welcoming, open and inclusive environment where a lay person's views can be heard and considered.”*
- *“I think having a Committee like this has been incredibly valuable.”*
- *“The Committee has been a tenacious 'junior committee' over the last few years and I think members of EPC should celebrate the work and influence we have had over the new engagement-rich approach to the strategy and in the value of E&P since the Pandemic.”*
- *“I think there was a sense of pride of those on this committee knowing that we were one of the few or only Board in Scotland that had a Committee with a focus on different aspects of the patient and wider public experience of using our services. I hope this focus will still have a place somewhere to ensure as we move through all of the transformation needed and executing the Plan for the Future that we do this in a way that ensures the patient and their experience is always in the middle of everything we do.”*

Recommendations

1. The Population Health Committee is asked to consider how the topics highlighted above can be incorporated into its standing orders as part of its role to support 'People Powered Health' for NHS Grampian.
2. The Population Health Committee to receive an assurance map of the underpinning structures and a forward planner of agreed reporting for engagement and participation, to obtain assurance that these functions are operating effectively during a time of significant system pressure.