


Appendix A:

Paper title	STW Integrated Care Strategy and Joint Forward Plan Development – Engagement Approach Paper							
	‘Shropshire, Telford and Wrekin health and wellbeing conversation’							
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Committee/Advisory Group paper previously presented:	Integrated Care Partnership (ICP)							
Action Required (please select):								
A=Approval	X	R=Ratification		S=Assurance	X	D=Discussion	X	I=Information
Previous considerations:	None identified.							

1.0 Executive summary and points for discussion

NHS guidance and aspects of the Health and Care Act 2022 are prescriptive about the process for and engagement expectations around the development of the Joint Forward Plan. In addition, health and care organisations have a duty to engage with the public about any plans, proposals or decisions that are likely to impact on services provided. This paper sets out our intention for NHS STW to fulfil this legal duty to involve and consult.

The purpose of this report is to outline a proposal for public involvement and engagement activity, ‘Shropshire, Telford and Wrekin’s health and wellbeing conversation’, to take place from February 2023 through to May 2023 to inform the system’s Joint Forward Plan development

2.0 Recommendation(s)

The Strategy Committee is asked to:

- Note the content of the paper;
- Provide ideas and suggestions for additional engagement which may not be detailed in the paper;
- Agree the outline approach and timeline; and
- Provide suggestions on how best to engage and brief key partners to ensure they have the tools to support this activity and be part of the conversation.

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1.0 Purpose

The purpose of this report is to outline a proposal for public engagement and involvement activity, **'Shropshire, Telford and Wrekin health and wellbeing conversation'**, to take place from February 2023 through to May 2023 to inform and support the development of the Shropshire Telford and Wrekin ICS Integrated Care Strategy and Joint Forward Plan.

This paper provides an overview of the approach and methods that will be implemented within the above period which will deliver a robust, equitable and inclusive engagement programme. This will help further shape the interim Integrated Care Strategy, inform the development of the Joint Forward Plan and underpin any future formal consultation processes which may need to take place at a later date.

The ICS design framework sets out ten principles to use when developing their arrangements for working with people and communities. We have used these principles to develop our system-wide strategy for involving people and communities, building on our existing relationships, good practice and networks.

2.0 Context and background

The NHS Long Term Plan (2020) describes a vision for health and care service which are fit for the 21st century. This vision empowers people, their families and carers to take more control over their own health, care and treatment supported by easy access to integrated holistic care, in settings closer to where people live and organised to effectively support people with multiple conditions.

To achieve this vision will require NHS organisations to develop new models of care and plans to ensure:

- Individuals are taking greater responsibility for their own health
- We are better at preventing and managing demand
- We are designing patient-centred services and finding innovative ways of delivering outcomes for a society that lives longer and expects more
- We are maximising the value of our health and social care spend

As the Shropshire, Telford and Wrekin (STW) ICS develops there is a need to establish a clear strategic purpose and develop a plan to deliver that purpose. Doing so is one of the most important tasks of the next few months for our new Integrated Care System.

Like every Integrated Care System, over the next few months we must produce an interim Integrated Care Strategy and detailed plan that will establish how we will work together to improve health, care and wellbeing for the people of Shropshire, Telford and Wrekin.

The strategy is the 'what' and the plan is the 'how'. The two are linked and both have a five year timeframe, though to be reviewed annually, and will play a key role in shaping the future of health, care and wellbeing in Shropshire, Telford and Wrekin over the next five years.

The Integrated Care Strategy will set a bold vision for what we want to achieve through greater partnership and collaboration with the aim of delivering more joined-up, preventative, and person-centred care for our population. Developing the strategy is the responsibility of the Integrated Care Partnership (ICP). It is largely a data driven document, that must be built on the health and wellbeing strategies in place as well as Joint Strategic Needs Assessments (JSNA) data and have regard to the Health and Care Act requirements, national policy and guidance.

The Joint Forward Plan will provide the operational detail around how the strategy's vision can and will be realised. Developing the plan is the responsibility of the Integrated Care Board.

In line with our values, we will build the Forward plan through a process of genuine co-production with our local communities, stakeholders and our staff. The Health and Care Act 2022 and NHS E guidance set clear expectations around engagement and involvement with key stakeholders to inform the development of the plan.

We do not start from scratch; there has been significant engagement in the past which we want to acknowledge and build on. The establishment of the ICS is an opportunity to deepen and strengthen our historical approach.

We have previously engaged with our residents, patients, health and care staff, our local system partners and the voluntary, community and social enterprise (VCSE) sector and used this insight to develop [ten pledges](#). These pledges will be the golden thread through all the work we deliver. Through pledge number eight, *Enhanced engagement and accountability*, we have committed to increase our engagement, involvement and communication with stakeholders, politicians and the public.

We aim to develop a strategy and plan for our system, built by the people in our system – both working in partnership with the organisations that provide the services that keep us healthy, happy and well, and with people living in Shropshire, Telford and Wrekin who access these services.

3.0 Objectives

The overarching strategic objectives of the engagement activity are to work collaboratively with all partners across the STW system to support and inform the further development of the Integrated Care Strategy and the Joint Forward Plan for the system, to ensure they reflect the needs and views of our people, and to:

1. Raise awareness around health and wellbeing with a particular focus on being well and keeping well;
2. Discuss with the public, stakeholders and staff their ambition for health and care services locally;
3. Encourage STW citizens to consider what part they can play to manage their own health and care – promoting self-care and resilience;
4. Create a movement in which citizens in Shropshire, Telford and Wrekin are motivated to become involved with deciding what future services will look like;
5. Provide early opportunities for active, open, dialogue to allow residents, service users, carers and wider stakeholders to input to and be involved in ICS strategic purpose and the design and delivery of health and care services;
6. Increase understanding of the 'case for change' and enable people to be part of that change;
7. Test terminology and plans to ensure the language we use is understandable and will resonate with the public; and
8. Engage with groups protected by equality legislation to ensure their views are heard and that issues of equality are considered.

4.0 Proposed approach

Comprehensive and meaningful engagement will ensure our services are more responsive to people's physical, emotional, social and cultural needs. We will take active steps to strengthen public, patient and carers' voice at place and system levels. In particular, we will focus on groups who are seldom heard and have the greatest health inequalities to ensure they are not excluded from the dialogue.

We recognise that to reduce inequalities we will need to draw on the knowledge of the local authorities, VCSE and other partners with experience and expertise in this regard. The VCSE sector is an important partner in our system and plays a key role in improving health, wellbeing and care outcomes due to their reach and connection with communities. We will also work closely with Healthwatch, as a health and social care champion, to hear people's voices, to find out what matters to them and ensure their views help shape our plans

Our engagement will be done, loosely, in two stages. The first stage is focused on validating our interim Integrated Care Strategy and agreeing our strategic intention. The second phase of our engagement work will be focused more on delivery to help shape and inform the development of our Joint Forward Plan.

4.1 Stage one – Agreeing Our Strategic Intention (January 2023)

The interim Integrated Care Strategy will articulate the strategic purpose and priorities for the ICS, what we are trying to achieve and the overarching strategy to deliver that purpose. The interim Integrated Care Strategy will build on the existing strategies and data from the health and wellbeing strategies and JSNAs.

Once the interim Integrated Care Strategy has been developed, the engagement in this stage will focus on decision makers and internal partners, primary and secondary care clinicians across the ICS. With our partners, we will aim to agree our strategic direction for the next five years, our commissioning intentions, our strategic objectives, how we will get there, what we will spend and how we will monitor and measure that we are realising our vision.

Inevitably, these conversations will involve some difficult choices on what we prioritise within our financial envelope, what we do first and what we defer. Choices about what we should do more of and what we should stop doing. And most importantly, how can we do better.

The output of this engagement will support with the further development of the interim Integrated Care Strategy, built around a succinct statement of the strategic intention for the ICS. It will enable us to establish an overarching framework, setting out the key elements and themes that we will develop further over the coming months to inform our Joint Forward Plan and transformation programmes.

4.2 Stage two – Development of Joint Forward Plan (February – June 2023)

The second phase of our engagement work will be focused more on delivery to help shape the development of our Joint Forward Plan.

We want to hear people's views as part of an ongoing process that will help to inform the plan including ideas for the way services in STW should be configured and provided in the future.

In stage two we will conduct a *Shropshire, Telford and Wrekin health and wellbeing conversation* programme of engagement with our communities, staff and partners in conversations about the details of our plans.

In these conversations we will share the initial Integrated Care Strategy for context to frame the conversations and an outline of the Joint Forward Plan. We will ensure that the conversations are realistic by setting out the real-world constraints we are working within. We will ask (indicative questions):

- Is it clear what our strategy / plans are trying to achieve?
 - Have we focused on the right things?
 - Do you agree these are the things that would support and enable you and your family to live healthier and happier lives over the next five years?
 - If not, how can they be improved? What does good look like?
- What matters the most to you, your families and your communities?
 - What do you need to keep you healthy and happy?
- What are the things that would make the biggest difference to improve experience of local health and care services?
- Are you willing to travel further for 'better' specialist care?
- Would a better digital infrastructure support you to access health and care services more easily and keep you well?
 - What is the right balance between digital and face-to-face consultations / appointments?

The output of these conversations we will be fed into the Joint Forward Plan, setting out how we intend to deliver our strategic priorities set out in the Integrated Care Strategy over the next five years.

5.0 Methods

It is essential the engagement activity is accessible and as visible as possible, using all established methods of communication and engagement such as printed materials in a range of formats, online and face-to-face contact through a variety of meetings and events, as well as embarking on new channels of digital engagement. Partnerships will be formed with VCSE organisations, Healthwatch and local media organisations to maximise reach and raise awareness about the activity. Activity will be tailored to ensure it is appropriate for the local population and specific protected characteristics and audiences.

The aim is to achieve 25,000 meaningful interactions with as much of the adult population in STW. Our population in STW is approximately 500,000; a target of 25,000 interactions will mean that we have interacted with approximately 5% of our population (recognising there will be some element of double counting with analysing responses).

The primary objective is face-to-face interactions with citizens (virtually or in person) - talking to them about what matters to them and their loved ones and asking them what they can do to make a difference to their health and wellbeing, with the aim of gently trying to change expectations.

New technology and social media will be used to communicate and engage with citizens, therefore a portion of the 25,000 interactions will be secondary interactions e.g. people visiting the STW website, sharing online content, taking and reading literature about the campaign etc.

The STW ICS Comms and Engagement Team will work closely and collaboratively with all partner comms teams to ensure this activity aligns and complements other engagement activity taking place in the system.

5.1 Big conversation survey

An online survey will be developed to support the 'Conversation', enabling us to capture qualitative and quantitative data and will be available at engagement activity on iPads. We will seek to get as many people

as possible to complete a survey as well as capture important demographic data and data for future engagement and follow up.

5.2 STW citizen pledges

A large part of the ‘conversation’ will be emphasising the need for people to take more personal responsibility for their own health and wellbeing and promoting community resilience.

Citizens will be given information about pressures that exist in the system and the small things they can do to improve things e.g. the impact of attending A&E for a non-emergency, benefits of accessing their local pharmacy versus a GP.

We will use this opportunity to socialise the STW pledges. The public will also be asked to suggest some pledges, things they can do to improve their own wellbeing or changes to the way they currently use health and care services which could help address some of the challenges faced in the system.

5.3 Community outreach - road shows

A number of roadshows will be held throughout STW to provide an opportunity for the public to find out more about our plans and to have their say.

In order to encourage citizens to complete surveys, provide feedback, pledges and contact details for further engagement and follow up, they will be incentivised with the opportunity to win a prize that will support healthy lifestyles.

A community engagement team will conduct on-street / opportunistic engagement at prime locations in communities (e.g. Supermarkets, GP practices and outpatient clinics). Street teams will focus on areas of high deprivation and target groups of people who would not normally contribute to engagement activity.

5.4 Stakeholder engagement

A series of stakeholder engagement sessions will take place throughout the period, including primary care, hospital clinicians, councillors, MPs, VCSE colleagues and Healthwatch to ensure they have an opportunity to be part of the ‘conversation’ and the design process and are sighted early on our priorities and proposals.

Stakeholders will be provided with opportunities to:

- Input and share ideas about how they / their organisations can contribute to local delivery
- Describe what they would like to see in the health and care system over the next five years – *what will things look like in five years time?*
- Identify ways we can transform / plan / commission services differently to increase access and reduce inequalities.

5.5 Establishing a citizen panel/people network

We will recruit a system-wide citizen panel; a community or network of local residents enabling us to gather public views and opinions on a wide variety of topics, allowing members of the public to get involved in shaping the future of local health and care services. The panel will form a large, representative group of local residents who are able and willing to offer their opinion and be consulted on a wide range of local issues.

Done right, they enable:

- Transparent Demographic Profiling
- Responsive and innovative feedback mechanisms

- An inclusive and broad respondent base, beyond the reach of some of our conventional methodologies

5.6 Engagement with community groups

We will attend a number of existing community groups and meetings to engage with protected characteristics and equality groups. The format of the engagement activity will depend on the demographics and needs of the group. The aim of this engagement will be to gain insight into the experiences of marginalised groups to support improving access and reducing inequality.

5.7 Deliberative events/ citizen jury

Deliberative events will provide good evidence that the ICS has heard and considered alternative arguments to any proposals, allowing a more detailed discussion with the public and stakeholders. Participants will be recruited from a range of socio-economic groups across STW (mainly people from lower socio-economic groups) to take part in a citizen jury.

Members of the public will hear evidence from a range of clinicians, residents and health professionals around the Case for Change, along with planned proposals. Through independent facilitation participants will be able to deliberate the evidence and provide recommendations around the proposals. This evidence will then be presented to clinicians and representatives from the ICS and form part of the qualitative evaluation.

5.8 PR and media engagement

A proactive PR campaign will be launched as the engagement activity goes live, a content / editorial plan will be developed to showcase good news stories, case studies and updates about the 'conversation' and raise the profile of STW ICS. A well-executed PR campaign will enable us to reach a large audience without the expensive cost of traditional advertising and marketing and increase viability of the ICS and the engagement exercise.

5.9 Digital activity

In order to ensure maximum reach the digital campaign will be varied and wide ranging. The digital campaign will consist of a mixture of interactive website content, social media sharing and interaction, consistent and frequent e-newsletters to staff in all partner organisations, using their existing channels. Photo and video content generated during the outreach activity will also be shared on social media.

The Communications and Engagement Team will work with partner organisations to maximise the reach and impact of the social media engagement, by utilising the considerable collective reach of all partners.

6.0 Benefits

The intention is our long-term strategy and plan for the system will be a live document so there will be a commitment to have ongoing dialogue. Some elements of our plans may require full public consultation but more importantly, plans will continue to evolve. We will develop processes for ongoing and continuous engagement to refine our strategies and plans over the coming years.

This proposal, in part, is to demonstrate our commitment to pledge eight 'Enhanced engagement and accountability', however it is also a mechanism for facilitating the other pledges. The benefits of this approach include:

- Establishing and maintain a relationship with the population based on collaboration, transparency and trust;
- The creation of an accountability mechanism, i.e. a document / product / report that refers back to 'what you told us' ... 'so we did' (or if we didn't then it was for the following reasons);
- Preparation of the ground for difficult commissioning decisions; and
- A proactive way of setting out objective facts rather than responding to subjective preferences.

7.0 Indicative timeline

