

# ICB Public Involvement and Engagement Advisory Committee

<b>Date of meeting</b>	26 <sup>th</sup> June 2024
<b>Title of paper</b>	Public and community insights report: February to May 2024
<b>Presented by</b>	David Rogers, Head of Communications and Engagement
<b>Author</b>	David Rogers, Head of Communications and Engagement Communication Engagement Team Members
<b>Agenda item</b>	3b
<b>Confidential</b>	No

## Executive summary

The report provides members of the ICB Public Involvement and Engagement Advisory Committee (PIEAC) a summary of insights which have been captured through pro-active public and community engagement activities between February and May 2024.

Following the PIEAC workshop in April, it was agreed to refine the format of the report to be more concise.

Key messages from the report:

- A continued focus on engagement and related activity has been undertaken in our places from February to May, and this continues, this includes continuing to build relationships and strengthen partnerships.
- Our focus on place-based engagement has supported people and communities throughout the winter months. Following the production of a detailed evaluation report we are now reviewing the lessons learned and applying these for the 2024/5 winter period.
- Uniquely, there have been two pre-election periods during the time of reporting: the pre-election period from 11 April to 2 May 2024 for local elections, and 25 May to 4 July for the national elections. The pre-election period describes the period of time immediately before elections or referendums when specific restrictions on communication and engagement activity are in place.
- A national engagement exercise by IPSOS and the Health Foundation sets out the findings from deliberative engagement with citizens about the future of the NHS. Although relevant for policy and the next government, this is nevertheless useful and timely insight for the ICB and PIEAC members.

## Advise, Assure or Alert

**Assure the committee:**

- The ICB has methods and approaches to capture public and patient insight.

**Advise the committee:**

- Of insights acquired through engagement.

## Recommendations

The Public Involvement and Engagement Advisory Committee is asked to:

- Note the contents and summary of insights contained in the report
- Recognise and endorse the engagement and involvement activity undertaken across the ICB and the resulting insights shared in the report

<b>Which Strategic Objective/s does the report contribute to</b>		<b>Tick</b>
1	Improve quality, including safety, clinical outcomes, and patient experience	✓
2	To equalise opportunities and clinical outcomes across the area	✓

3	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	✓
4	Meet financial targets and deliver improved productivity	✓
5	Meet national and locally determined performance standards and targets	✓
6	To develop and implement ambitious, deliverable strategies	✓

#### Implications

	Yes	No	N/A	Comments
Associated risks				
Are associated risks detailed on the ICB Risk Register?	x			
Financial Implications			x	

#### Where paper has been discussed (list other committees/forums that have discussed this paper)

Meeting	Date	Outcomes

#### Conflicts of interest associated with this report

Not applicable

#### Impact assessments

	Yes	No	N/A	Comments
Quality impact assessment completed			x	
Equality impact assessment completed			x	
Data privacy impact assessment completed			x	

#### Report authorised by:

Neil Greaves, Director of Communications and Engagement

## **Public and community insights report : February to May 2024**

### **1. Introduction**

The report provides members of the ICB Public Involvement and Engagement Advisory Committee (PIEAC) a summary of public and community insights captured by the ICB between February and May 2024. This is the ninth insight report.

### **2. Reports, insights and outcomes from engagement activity**

#### **2.1 Winter awareness and resilience campaign 2023/24**

This was a campaign with the objective of supporting a reduction in system pressures. It was a joint effort across LSC Trusts and the ICB. The campaign sought to signpost people to the right services, the first time, prevent injury and ill-health and to promote self-care. It was branded 'Think' and although was run without a budget, we saw significant activity seen across many channels and outlets, and on the ground in each place. Despite this 2024 A&E attendance was higher than 2023.

We asked of, and flexed support through community engagement networks in each place. Our ask of these networks was how can we use your networks and channels to enhance the impact of the right messages and spread the word, as well as engage in dialogue. One tangible, and measurable impact was that we were able to distribute 22, 920 winter well booklets to vulnerable people throughout Lancashire and South Cumbria. Key messages were shared with a wide range of partners including the VCFSE, housing associations, local authorities and other partners. Key insights from this work have included the importance of local networks, particularly newly found connections such as housing associations, and small of the smaller voluntary, community, faith-based organisations. Feedback from our networks suggests that an earlier process of briefing, engagement and tie-in with partner campaigns should be considered. Historically the winter awareness and resilience campaign has relied on traditional communication and social media approaches to reach people. This new approach which the ICB communication and engagement team has championed, places community and face to face engagement with the people, groups and networks that can ensure that the most vulnerable, seldom heard, and least reached people are engaged and involved.

#### **2.2 Shaping Care Together – case for change engagement**

Shaping Care Together is an NHS programme aimed at improving the way we provide health and care in Southport, Formby and West Lancashire. This programme is a partnership between NHS Lancashire South Cumbria ICB, NHS Cheshire and Merseyside ICB and Mersey and West Lancashire Teaching Hospitals NHS Trust (MWL). Its aim is to improve the quality of care for people by exploring new ways of delivering services and utilising staff, money and buildings to maximum effect.

Five focus groups were delivered on 13 and 14 May in relation to the Shaping Care Together (SCT) case for change document. Phase one of the SCT programme focusses on how urgent and emergency care services can be best delivered. A total of 20 people were spoken to, four of which represented West Lancashire. The main themes of the discussions covered accessibility, enhanced engagement strategies and building credibility and trust. Overall, the feedback highlights the necessity for other forms of communications to make the programme more accessible, engaging, and credible in its ambition to effect positive change. Participants made several positive suggestions for what needs to sit alongside the Case for Change to make it a more effective tool of engagement. There were no comments that suggested we

should not proceed with the current document. The engagement report is being considered as a separate item at the PIEAC on the 26 June.

Phase one of the programme focusses on urgent and emergency care. The ambition is to ensure that urgent and emergency care services are organised in a way that can help deliver:

- Reduce waiting times at A&E for urgent care.
- Fewer planned care cancellations.
- 24/7 dedicated emergency care for all ages.
- Better urgent care provide closer to home.
- NHS services that meet patients' needs today and in the future.

[Read the full report here](#)

## 2.4 Citizen's Panel check-in

Every month we engage with members of the citizen's panel via a newsletter, in which we ask them 3 regular questions: These are:

- How do you feel about your health at the moment?
- How do you feel about the state of NHS services? and
- Thinking of the most recent time you have used an NHS service, how do you feel about your experience?

We are building this as a sentiment tracker. If committee members are supportive we will provide a regular update on this with longitudinal analysis of the data, the sentiment and the experience. In our most recent poll, which was May 2024, under half of the respondents were dissatisfied with their own health at the time they responded and over a quarter were dissatisfied with their latest experience of health services. In addition, 71.5% of respondents were dissatisfied to some degree with the state of NHS health services, with over a fifth very dissatisfied.

People were concerned about the following:

- their long-term health conditions,
- poor pain management
- uncertainty about health service availability
- accessing GP appointments
- accessing hospital and health services generally (including clinics too far to travel to)
- hospital waiting times (appointments, referrals and results)
- understaffing
- cancelled hospital appointments, and
- lack of investment in the NHS.

Respondents also identified what really matters to them about the NHS, and this included:

- easier access to services, especially for the elderly
- better communications
- services working together
- better mental health services
- faster urgent care
- easier to see a GP
- less waiting time for hospital appointments, results and treatment
- more on preventing illness and ill-health (and how to look after yourself, get fitter)
- more help and support to avoid visiting A&E
- recognition and support of carers.

### **3. Reports, insights and outcomes from national patient surveys**

#### **3.1 The public's views on the future of the NHS (Health Foundation & Ipsos)**

This briefing summarises the findings from deliberative research with the public on the future of the NHS in England undertaken in October and November 2023. The deliberative research findings are presented alongside selected survey results for England from UK-wide polling undertaken in November 2023.

The methodology was interesting and we are keen to explore this approach in Lancashire and South Cumbria.

The deliberative research involved 2-day workshops held at three locations across England (King's Lynn, Leeds and London) over October and November 2023. Quotas were set for recruiting participants to each workshop, based on demographic characteristics such as gender, age, ethnicity, socioeconomic group as well as health care use and needs, and attitudes towards the NHS. In total, 72 people took part in the workshops (24 in each location). In King's Lynn, all 24 participants completed the full 2-day workshop. In both Leeds and London, one participant did not return for the second day, so 23 participants completed the full workshop. The workshops involved a combination of table discussions, where participants discussed issues at length, and plenary sessions, where participants listened to expert presentations summarising relevant evidence and were able to ask questions. All table and plenary discussions were facilitated by Ipsos, with presentations delivered by Health Foundation staff. Materials for the workshops were developed by Ipsos and the Health Foundation, drawing largely on Health Foundation analysis, official statistics and the wider evidence base. The participant packs are published as part of the full Research report. Deliberative research is designed to explore different perspectives and understand the factors that shape people's views, with findings presented thematically rather than quantified – as opposed to quantitative surveys, which are designed to provide statistically reliable data about what the public thinks overall. In this briefing, when referring to the deliberative research we use 'many', 'most', 'generally' or 'commonly' when views were more frequently expressed and 'a few' or 'a small number' to reflect views that were mentioned less frequently. 'Some' reflects views that were mentioned occasionally. Participants sometimes expressed views at odds with the evidence. These views remain valid, since they are perceptions that the participants held, and understanding them helps to inform knowledge about public views of the NHS.

#### **Findings**

*Public perceptions of the NHS and the causes of the current challenges it faces.*

The latest survey from IPSOS found tentative signs of improvement in the public's views of NHS care, although people remain mostly negative overall. In the deliberative research, participants were dissatisfied with how the NHS is currently working and concerned about its future, but maintained a deep appreciation for the health service and strong attachment to its founding principles. A wide range of factors is understood to be causing strain on the NHS and supporting the workforce is a top priority.

*Where the public thinks the balance of focus should be between primary and community care, and hospital care.*

When surveyed, the public leans towards prioritising making it easier to access community-based services over care in hospitals. In the deliberative research, participants also, on balance, wanted primary and community care to be a higher priority for NHS resources than

hospital services. While participants would not accept a decline in access to hospital care for those who need it, there was support for a steady rebalancing of funding over time to support a more preventative approach.

*The public's views on funding levels for the NHS, and how additional funding should be raised.*

IPSOS's survey found that around half of the public would prefer to see an increase in Taxes to maintain the level of spending needed to keep the current level of care and services provided by the NHS. Participants in the deliberative research mostly supported improving NHS service levels, which they would be willing to pay additional taxes to achieve, even after being confronted with the illustrative financial consequences for people like them. If taxes are to increase, participants wanted the extra revenue to be raised from a combination of taxes – though an additional tax earmarked for the NHS and increasing VAT were generally preferred over raising income tax.

*The public's views on the best funding model for the NHS, comparing the current model to two alternative proposals: introducing extra user charges and moving to a system of social health insurance.*

Support for the NHS's founding principles – free at the point of delivery, universal and tax funded – remains strong. Although the public thinks the principles should still apply, it is less likely to think they will continue to apply in 5 years' time. In the deliberative research, participants overwhelmingly preferred sticking with the current NHS funding model over the alternatives.

How to build public confidence in government planning for the future of the NHS.

In the IPSOS survey, just 9% think the government has the right policies for the NHS, while 69% disagree. Many deliberative research participants expressed a lack of trust in Politicians to manage the NHS well. The deliberative research suggests giving the NHS more independence from politics and taking a longer-term perspective in policy decisions with more independent scrutiny and public engagement could help.

Seven implications for the next government

1. Being open about the extent of the problems facing the NHS could help to build public support for a longer term approach, even if it is unlikely to build confidence in how the service is being run now.
2. Give primary care and community services an increasing share of the available resources.
3. People want to invest in a better NHS, so be bold about finding ways to raise the money.
4. We need a better conversation with the public about 'waste' in the NHS.
5. Any plan to improve the health service must start with improving support for NHS staff.
6. The next government should act to restore public trust.
7. People don't want to change the NHS model, they just want the NHS to work for them.

Read the report in detail here: [The public's views on the future of the NHS in England \(health.org.uk\)](https://www.health.org.uk)

## Glossary

A glossary of terms to support this paper is available here: <https://www.lancashireandsouthcumbria.icb.nhs.uk/about-us/glossary>

