

# ICB Public Involvement and Engagement Advisory Committee

Date of meeting	Wednesday 18 December 2024
Title of paper	Public engagement and involvement assurance report: Sep-Nov 2024
Presented by	David Rogers, head of communications and engagement
Author	David Rogers, head of communications and engagement, Hannah Brooks and communications and engagement team members
Agenda item	7a
Confidential	No

# **Executive summary**

This report provides members of the Public Involvement and Engagement Advisory Committee (PIEAC) a summary of activities related to engagement, involvement and coproduction undertaken by the ICB between 1 September and 30 November 2024.

The report seeks to provide assurance to the committee and the ICB Board for the delivery against the strategy for working in partnership with people and communities across the ICB and embedding the principles of public involvement and engagement, demonstrating how the voice of our communities is central to decision-making and service delivery.

The report also summarises engagement, involvement and co-production activity supporting priority system transformation programmes and other ICB programmes of work and a summary of activity to support partnership working in place.

The report includes updates on our key mechanisms for engaging with our communities, a summary of how we have engaged within each of our places during the last quarter and an overview of the system-wide engagement activities we have undertaken, including 'Your health. Your future. Your say.', Shaping Care Together and Pharmacy First.

#### Advise, Assure or Alert

#### Assure the committee:

The ICB is delivering a range of engagement and involvement activity as part of our delivery, transformation and across a range of programmes and initiatives. This meets our aspiration to involve and engage members of the public, patients, communities, staff, carers and partners.

# 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 activity undertaken across the ICB and the learning being embedded.



<ul> <li>Note the forward view of upcoming engagement, involvement and co-production activities for the next period.</li> </ul>								
Which S	hich Strategic Objective/s does the report contribute to Tick							
1	Improve quality, including safety, clinical outcomes, and patient <b>x</b> experience							
2		equalise opportunities and clinical outcomes across the area x						
3		Make working in Lancashire and South Cumbria an attractive and <b>x</b> desirable option for existing and potential employees						
4			nancial targets and deliver improved productivity x					
5	Meet targets	t national and locally determined performance standards and <b>x</b>						
6	To dev	elop a	and imp	lem	ent ambitious, deliverable strate	egies	X	
Implicati	ions							
		Yes	No	N/	A Commen	ts		
Associate risks	ed			X				
Are associated risks detailed on the ICB Risk Register?			X					
Financial Implication				X				
	Where paper has been discussed (list other committees/forums that have discussed this							
Meeting		Date			Outcomes			
		Date						
Conflicts	s of inte	erest a	essocia	ted	with this report			
Not appli								
Impact a		nents						
		Yes	No	N/	Commen	ts		
Quality i assessm complete	ent			X				
Equality in assessm complete	impact ent ed		x			EHIRA assessments are completed for individual programmes of work.		
Data p impact assessm complete				X				
Report authorised by:  Neil Greaves, director of communications and engagement								



#### Public engagement and involvement assurance report: September to November 2024

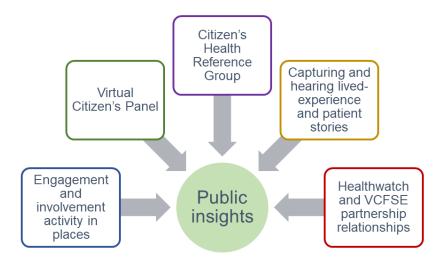
#### 1. Introduction

Public involvement is an essential part of making sure that effective and efficient health and care services are delivered; by reaching, listening to, involving and empowering our people and communities. This is so that we can ensure that people and communities are at the heart of decision making. The NHS in Lancashire and South Cumbria is committed to putting our population's needs at the heart of all we do.

This report provides assurance to the committee and the Integrated Care Board (ICB) for the delivery against the ICB strategy for working in partnership with people and communities (as revised in July 2023) and embedding the principles of public involvement and engagement. This includes the establishment and development of an engagement and involvement infrastructure across the integrated care system, and at place. This demonstrates how the public voice can be, and is, at the heart of decision-making and service delivery and improvement in the ICB.

As well as evidencing good practice, this report importantly provides the ICB with assurance of engagement, co-production and involvement in its work and the compliance of the ICB in its duty to involve. Significant work has been undertaken to ensure the work of the Public Involvement and Engagement Advisory Committee (PIEAC) and the Quality Committee are integrated and to avoid unnecessary duplication of effort and to ensure that there is strengthened oversight and connectivity between the committees.

The diagram below shows, at a high level, the proactive engagement mechanisms which have been developed to engage and involve the public as set out in the ICB's strategy for working in partnership with people and communities.



#### 2. Virtual Citizen's Panel

The Virtual Citizen's Panel includes members of the public who have expressed an interest in receiving regular emails and taking part in NHS research, surveys and questionnaires and provide feedback. Citizen Panel newsletters are distributed each month.



The total membership is at **1,502** individuals from across Lancashire and South Cumbria, as of 6 December 2024. This is an increase from the previous report and is largely as a result of signing individuals up to the panel as part of the 'Your health. Your future. Your say.' engagement programme.

The open rates show that members of the panel are highly engaged with the content that they receive, and the panel has driven up responses to the recent public perception and Integrated Urgent Care surveys.

The ICB also manages a readers' group which is a subset of the citizen panel and consists of 183 residents, which is a decrease from previous reports. The panel consists of those who have expressed an interest in reviewing documents and materials produced by the ICB. The group has been most recently involved in providing feedback on the perception survey and a women's health survey.

# 3. Citizens Health Reference Group

Membership of the Citizens Health Reference Group now stands at 59 people. Since the quarterly meeting in September, members have been offered a number of workstreams to support. This was done via an expression of interest process and members have since been allocated to a number of workstreams.

The workstreams currently being supported are:

- New Hospitals Programme
- Dental access
- Vascular Network
- Head and neck cancer
- Urology
- Cardiac
- Virtual wards
- Mental health redesign
- Women's health programme

Workstreams that have had support and concluded are:

- Urgent and emergency care strategy development
- Physical health checks for people with a severe mental illness (campaign design)

Workstreams planned for the near future:

- Clinical policies
- Transforming community care
- Non-emergency patient transport services

All members were invited to a dedicated dental access session on Thursday 28 November. The session was attended by 17 members. A quarterly meeting took place on Thursday 5 December.

A full report of the Citizens Health Reference Group is included as part of the standard agenda item for the committee.



#### 4. Capturing lived experience and patient stories

Our programme of capturing lived experience and patient stories is an important aspect of our work. Sharing a patient experience at our board and quality committee meetings helps to ground discussions in the reality of patient care and the purpose of the ICB to improve health and wellbeing. Members of the public are therefore at the centre of the decisions made by the committees.

The stories are captured in a range of formats. A growing number of people are keen to share their experiences and insights through patient stories.

Date	Committee	Focus of story
	Board meeting	Chronic disease management and monitoring relating to
September	meeting	urgent and emergency care:
		https://www.youtube.com/watch?v=fPsfVAYJMW0
	Quality committee	Cardiac rehabilitation
October	Quality	Community equipment
	committee	
	Board	Long delays to operation, poor communication from
November	meeting	hospitals, with mixed messages and concerning advice or
		no support:
		https://www.youtube.com/watch?v=Dxq94N2_uTA
	Quality committee	Cancer diagnosis

The communications and engagement team has completed a thorough review of each of the patient stories that have been developed for the board and the quality committee. These reviews have been conducted with relevant clinical and commissioning leads, and their teams. While recognising that action, change and improvements do take time to agree and embed, we have compiled a powerful set of narratives that show how the insights from the patient stories have influenced strategy, policy and practice. We are now populating these on our website: LSC Integrated Care Board: Lived experience.

# 5. Making every engagement contact count – empowering our engagement team

In October, six of the seven members of the ICB's place-based engagement team were provided with blood pressure and atrial fibrillation training. They received blood pressure monitors and an atrial fibrillation device along with an app to record findings by Blackburn Council health and wellbeing team. Equipping the engagement team with the skills and ability to check the blood pressure and heart health of members of the public while in the community engaging with the public is an opportunity to make every contact count as well as gaining insight into their experiences. Encouraging members of the public and patients to start a conversation about their health and use of health services can be challenging without an



incentive or something to draw them in. We know a small chat can lead to big change so this will provide the opportunity to make every contact count and have active discussions.

Plans are in development for regular visits to places such as the family hubs, Deaf Village and other community groups. A regular data report will be shared with the health and wellbeing team for their performance reporting, as well as included in this report for PIEAC members.

Between September and November, a total of 60 blood pressure checks and 57 atrial fibrillation readings have been taken by our engagement team. As well as being an opportunity to gain insight into the public's health and experience of health services, the team has referred 13 people to health services due to their high blood pressure, helping those individuals to avoid health problems as a direct result of the contact.

# 6. Engagement good practice webinars

Following a development session for PIEAC members in April, an agreed action was to establish a webinar for the health and care system to showcase good practice and share the learning and insights from engagement across the system and in our places. The first webinar took place in September. Two presentations were shared: a team from Blackpool Healthwatch shared their engagement with children and young people on vaping, and a team from Blackpool Council shared their model of coproduction and how this helped support the recent SEND inspection in Blackpool.

A total of 63 people registered to join the webinar, and 40 people attended. Both presentations were well received and generated a good discussion. The webinar, along with an audio file, the questions and answers, and a blog are available on our website:

LSC Integrated Care Board: Good engagement webinars

The next webinar is on the 31 January 2025, and will focus on engagement with women about the menopause. One presentation will focus on how engagement with women has led to the development of menopause clinics and support in primary care in South Cumbria, and the other presentation will be a recent project in Blackpool to understand the experiences of women going through the menopause.

#### 7. Engagement in each of our places

#### 7.1 Blackburn with Darwen

# Winter

Our focus on winter is about engaging with networks and community groups to ensure people are informed about accessing appropriate services and to support the overarching winter communications plan for the NHS in Lancashire and South Cumbria. As part of the engagement with those groups, our engagement team is delivering blood pressure and atrial fibrillation checks.

A number of resources that are relevant to place have been developed to help communicate messages, working with volunteers, community leaders, councillors and staff from community organisations and groups to use to help share important messages when they are in contact with people who are vulnerable, or likely to benefit from support from health and care services.



Two additional documents are also in development with key messages to support mental health wellbeing and 'Beat the Winter Blues'. One is for staff and organisations to use and contains tips for starting a conversation about mental health, links to various support lines including who to contact when a person may be in crisis, and tips to share on the ways to mental wellbeing. The public version is similar in that it provides information about mental wellbeing and the organisations who can provide mental health support when needed. We will continue to work with local groups and community partners to ensure these messages continue to be shared throughout the winter period.

# **Putting People First**

Blackburn with Darwen place-based partnership board has now implemented a 'putting people first' element at each board which involves a patient story relating to the topics of discussion at that meeting. This may be in the format of a written case study, however people telling their story are invited to the board meeting to tell their story for themselves. The first story was shared at the board meeting on 30 October and was a social prescribing case study.

# **Care Sector Quality Improvement Group**

A care sector quality improvement group for Blackburn with Darwen has been re-established. One of the workstream sub-groups relates to communication, engagement and co-production, led by Healthwatch Blackburn with Darwen's chief officer.

# **Population Health - Priority Wards**

The Blackburn Central electoral ward footprint generates double the attendance to A&E than any other ward in Blackburn with Darwen. The population health team is continuing to work with partners to reach individuals and families in this footprint who are already struggling, or who may reach that point in the next few months. The team is working on small initiatives to engage, identify and support the issues generating this need. This moves beyond the health presentation and seeks to understand the underlying factors such as:

- Isolation / Ioneliness
- Anxiety and depression
- Poor Self care
- Food poverty
- New parents
- Literacy barriers
- Poor support networks
- Debt
- No understanding of the health system
- Carer responsibilities
- Culture barriers
- Poor housing
- Fuel poverty

Next steps include mapping assets and identifying which organisations could contribute, community engagement with an invite to a community event to listen to challenges, gather or provide information, build connections and get a sense of what the community interests are.

# Blackburn with Darwen Insight, Communication and Engagement Group

This group continues to meet fortnightly alternating between online and face-to-face to ensure there is consistent, coherent and targeted messages to Blackburn with Darwen residents with the added opportunity to share engagement plans and to identify opportunities for working together.



# Blackburn with Darwen family hubs - conversations with CAMHS and pharmacy

Early in 2024, a questionnaire was sent to parents/carers associated with the family hubs to ask which, if any, health services they would be interested in hearing from. Options given included mental health (both adult and children), pharmacy, learning disability, and sexual health. Following the responses given, both pharmacy services and the school-based mental health support team (part of East Lancashire Child and Adolescent Services) were invited to come and speak to parents/carers at three of the family hubs in October 2024.

Invites to the sessions were sent to the growing database of family hub parent/carer panel members as well as being promoted on the family hub private Facebook page which currently has over 600 followers. To encourage more people to come along, a £20 voucher supplied by the family hubs was offered to each participant to cover their time and expenses.

In total, 23 people attended the three sessions which were held at Shadsworth, Darwen and Little Harwood family hubs.

The clinical team manager of the Blackburn with Darwen school-based mental health support team – part of East Lancashire Child and Adolescent Services (ELCAS) hosted by Lancashire and South Cumbria NHS Foundation Trust – attended all three of the engagement sessions to provide information about the services available to help support a young person's mental health.

A member of the ICB's medicines optimisation team and community pharmacists each attended one of the sessions to talk about the services a pharmacy can provide and to explain about the new Pharmacy First service.

The sessions, which each lasted for around two hours, were very informal with time for questions and answers throughout. Not everyone present was aware of the routes into mental health services for young people or aware of the Pharmacy First scheme or the regular services a pharmacy can provide.

Following the sessions, information relating to Child and Adolescent Mental Health Services (CAMHS) and pharmacy services were emailed to each of the attendees.

# 7.2 Blackpool

#### **Active into Autumn community engagement**

Throughout the week of the 7-11 October 2024, we planned and delivered community events throughout Blackpool, culminating in a large community event at the Winter Gardens in Blackpool. A total of 573 people across partner organisations, services, and members of the public attended over the week.

A notable achievement, given the high incidence of musculoskeletal problems experienced by Blackpool residents, the Musculoskeletal (MSK) service advised and gave self-care advice to 47 people, potentially supporting independence and unnecessary hospital demand.

Learning from the events has been collated outlining successes, areas for improvement and overall impact of delivery. A coproduction approach has been suggested for subsequent events in 2025; this will be led by Chantelle Bennett, engagement senior officer for Blackpool, and Jill Gardner, place-based partnership officer.



# **Fylde Coast Patient Participation Group Chairs network**

The Fylde Coast Patient Participation Group Chairs network meets bimonthly with a full calendar of network meetings planned for 2024. Following discussions in September about a reconfiguration along Blackpool/Fylde Coast lines, the network has agreed to explore this in 2025. The network has elected a temporary secretary and in the absence of Gemma Jackson, chair, due to ill health, was chaired by ICB engagement senior officer for Blackpool, Chantelle Bennett. The network had a workshop in October led by Michelle Ashton from Lytham PCN, focusing on Lord Darzi's recommendations for primary care.

#### 7.3 South Cumbria

# South Cumbria place team

The South Cumbria place team has held a number of team development sessions which have included the ICB engagement coordinator for South Cumbria, Trina Robson, both reiterating and agreeing its mission/core purpose and focusing on building relationships and a shared vision.

Central to delivering this was deep listening to our residents, a proper understanding of their needs, involving them meaningfully in future decision-making, and working alongside them to increase aspirations around living, working and ageing well. This will be reflected in our approach to resident engagement in all of our work programmes and in the work of our place board.

The place team Programme Delivery Board meets monthly, attended by Trina, which aims to ensure residents voices are at the centre of, and inform, the workstreams.

# **Integrated Wellness Service**

ICB engagement coordinator for South Cumbria, Trina Robson, has played a key role in supporting the place team with the development of the Wellness Service and ensuring that it is underpinned by coproduction principles. Targeted engagement has continued throughout September and October with a small cohort of patients who have had frequent and long lengths of stay in hospital. This has been proactively used in the design of the services offered, and professions involved, in the Integrated Wellness Service.

# **Barrow and Millom community of practice**

Trina has also supported the place team leads for the community of practice aimed at reducing the long term used of opioids in Barrow and Millom and the WorkWell project, including the engagement of service users in telling their stories.

# **Development of Patient Participation Groups network**

Work is continuing with the development of a Patient Participation Group (PPG) network for South Cumbria. ICB colleagues are working together to identify the PPGs in South Cumbria, offer support and help develop PPGs. As well as helping PPGs support their practices, the PPGs are considering how to support place and the wider system.

#### **Priority wards**

Work is continuing with the priority wards and with the Healthier Streets Project in Barrow where we have been working closely to engage with a group of residents in South Cumbria that wish to be involved in developing a blueprint for the coproduction of services. Between September and November, ICB engagement coordinator for South Cumbria, Trina Robson, has continued to work with the population health team, the ICC development lead and the



third sector in supporting the development of the healthier streets work and the integration and coordination of statutory and VCFSE services in the neighbourhood.

# **Barrow Delivery Board**

Trina has provided support to members of the Barrow Delivery Board, some of whom are also civic commissioners for the Poverty Truth Commission and in particular the development of the Barrow Way principles and Team Barrow work. Part of this involves working closely with Hilary Cottam, a well-known social innovator, author and entrepreneur to facilitate a piece of work with local leaders entitled Creating the Right Conditions for Barrow to Thrive.

# Engagement with voluntary sector and third sector

Trina also co-facilitates a third sector CEO breakfast group and is a member of the Furness Not for Profit Health Forum, a well-attended gathering of third sector leaders across Furness which meets every six weeks. The organisations work with some of the most vulnerable members of our communities and keeping them updated with our key messages enables the dissemination of messages into communities that are less likely to interact with NHS services.

#### 7.4 Lancashire

# **Community engagement networks**

We are working with the Lancashire place team to establish a network of place-based engagement support and conversations to ensure that partners across Lancashire are supported through mutual aid, shared insights and practical support. This work, which complements our existing networks in each of the areas of Lancashire will ensure stronger connectivity between partners to ensure that the voice of people and our communities is heard and acted on.

Our existing networks continue. In East Lancashire a large network has been developed. We are also attending the VCFSE networks established by Hyndburn and Ribble Valley CVS and Burnley, Pendle and Rossendale CVS – these are People of Pendle, Rossendale Connected, Burnley Linked, Hyndburn CAN and the Ribble Valley CAN. These are proving to be important and powerful links to our communities in East Lancashire. In Central Lancashire a network has been established and will be reinvigorated over the coming months. In North Lancashire we are working with existing networks. The community conversations project and the poverty truth commission has supported this development.

#### **Community conversations**

As part of the community conversations group run by the population health team and supported by other teams within the ICB and their partners, updates are provided by partners engaging with people in their communities. Lancaster City Council has been undertaking a series of focus group sessions on climate and nature during October and November, supported by partners. A community dialogue project run by Lancaster University has held a series of workshops in November, attended by members of the ICB, and further engagement sessions with the council, anchor organisations and the community will follow. This work is ongoing.

#### Suicide prevention

A bespoke suicide prevention campaign has been developed for North Lancashire by a partnership including Lancashire and South Cumbria NHS Foundation Trust, Lancaster City



Council, Lancaster CVS and members of the ICB. The campaign has two elements, a district wide, all age campaign that directs people to local support, and a programme aimed at young people, aged 11-24, which will give them tools to help manage situations and feelings. The campaign, which it is hoped will support people's mental health and reduce the number of deaths by suicide in the district, goes live in January 2025.

# **Feedback Fortnight**

Led by our ICB's children and young people team, a 'Feedback Fortnight' will be carried out at the beginning of March next year across our system/places. This is a method of providing a 'real time' snapshot over a short period of time, ensuring that the perspectives of children and young people, parents and carers are considered. By gathering their feedback and insights it will help guide our commissioners about how, and where, they can improve services and programmes. This is a pilot project but if successful, will be carried out at the same time every year.

Liaison is currently taking place with the family hubs across Lancashire to consider the best days and times to conduct this. There is an agreement also that the Lancashire and South Cumbria NHS Foundation Trust HARRI van will be present at the family hubs.

#### Pendle communication and engagement plan

In East Lancashire we have developed a focused communication and engagement plan which supports the priorities of the Pendle Partnership. This is in addition to our support to other partnerships in East Lancashire. The other partnerships are Rossendale Connected, Burnley Together, and the Hyndburn Way. An important benefit of us working with these networks is that they have facilitated our engagement on the 'Your health. Your future. Your say.' engagement, and will continue to be a source of support and insight. We have tapped into these networks to promote the messages and resilience tips throughout September to November as part of the system awareness and readiness for winter. Aligning our messages and tips with those of our partners ensures that messages are conveyed deep into communities and to those populations who could benefit from a more targeted approach.

#### East Lancashire physical activity campaign

We have been working with Lancashire County Council's Public Health team, and Together An Active Future (TAAF) to develop a campaign approach using engagement and communication methods to promote physical activity. This work builds on previously successful engagement in Pennine Lancashire, and a considerable amount of work has been invested in aligning partnership priorities to promote physical activity using the lived experience of local community leaders, including GPs, councillors, and members of the public. We anticipate that this development work will come to fruition in spring 2025.

# Ryelands estate residents' engagement in Lancaster

The Lancaster District Health and Wellbeing Board Ryelands task group continues to meet and progress the development of the park/open space for the Ryelands estate community.

Members of the multi-agency task group met with the residents' association to co-produce a consultation event led by the Lancaster District Health and Wellbeing Partnership, which took place on the 24 October. A survey was also made available to residents of the estate, via Lancaster City Council, which 67 people completed.

55 people attended the consultation event, many of them children, and the resident's association were happy with the attendance from estate. All the partners supporting the face-to-face engagement at the event, including representatives of the ICB, agreed that it was a



success and demonstrated close working with the community. The results of the consultation have been produced, and the next steps are being planned by the multi-agency task group.

# **Relocation of PWE Accrington Victoria GP practice**

It has been identified by East Lancashire Hospitals NHS Foundation Trust that Accrington Victoria Hospital is no longer fit for purpose and presents a safety risk to patients. For that reason all services need to be relocated.

One of the services based within the Hospital is a GP practice, called PWE Accrington Victoria. The process required to relocate a GP practice involves approval from the ICB's primary care commissioning committee, which needs to see evidence of robust engagement that has helped to shape the decision.

Almost 200 people (around five per cent of the total number of patients registered at the practice) provided feedback. Engagement included an online survey and face-to-face drop-in session at the practice, taking place from Friday 11 to Tuesday 22 October 2024.

#### Relocation of Dr Bello's Surgery and King Street Medical Centre

Dr Bello's Surgery in Church and King Street Medical Centre in Accrington are two separate GP practices with separate contracts and patient lists, but the same management team. The list size at Dr Bello's Surgery is 2,484 while at King Street Medical Centre it is 1,761.

Due to both buildings being no longer fit for purpose, Dr Bello's Surgery building being currently without a lease and the lease at King Street coming to an end, and with both practices requiring suitable modern premises from which they can deliver efficient services, it has been proposed to relocate the two practices to more modern and purpose-built facilities at Acorn Primary Health Care Centre in Blackburn Road.

Space has been identified within the centre, which is 0.3 miles from Dr Bello's and 0.7 miles from King Street. The new site has ample parking and sits on a main road and bus route.

Engagement took place throughout October and November to understand any issues patients of the two practices would face from relocating. This took the form of an electronic survey, the link to which was distributed to all practices via a direct letter and/or text message. Printed copies were also available in the practices and physically handed to people as they went for appointments. In addition, face-to-face engagement sessions were held in each of the practices.

# 8. ICB engagement and involvement projects from September to November 2024

The following projects and activities have been delivered during this period, and are continuing:

#### 8.1 Your Health. Your Future. Your Say. programme of engagement

In August 2024 it was decided that public engagement should commence to discuss some of the priorities and principles of the Lancashire and South Cumbria Integrated Care Board.

Throughout September to November 2024 the 'Your health. Your future. Your say' roadshow events took place in seven locations across the Lancashire and South Cumbria ICB area.



#### These were:

- Banks
- Barrow in Furness
- Preston
- Morecambe
- Burnley
- Blackpool (as part of the Active into Autum events)
- Blackburn

Plus, two more online events; one in a morning and one in an evening.

The location of the events were organised following a mapping exercise which took into account a set of criteria agreed by a working group within the communications and engagement team. These criteria included density of population with multiple long-term conditions, areas of deprivation, proximity to the work of the Shaping Care Together consultation, proximity to areas affected by the New Hospital Programme, areas with good accessibility to the public and with venues in the community large enough to seat groups of people and areas that had not widely been engaged with during previous similar engagement opportunities.

The events were open to everyone and were extensively promoted through the press, social media and our network of community groups and public volunteers.

The events featured information about challenges and areas of focus for the ICB including integrated urgent care and transforming community care.

Views of the public were sought on the work of the ICB and its vision and priorities. This was coupled with design principles for urgent care service recommissioning which could be pertinent to other programmes of work within the ICB.

A total of 188 members of the public attended the roadshows to share their views. This does not include NHS and local council staff and clinical and care professionals who supported and participated in discussions at the events.

In promoting the engagement, we also gave people who could not come to our events the opportunity to invite us to patient interest groups, and community groups and networks. Outreach with existing community groups and networks meant we were able to reach health inclusion groups and those who would not typically attend NHS events where they live. In each of our places we contacted our networks and groups to see if they could accommodate us in their meetings within the timeframe of this work, or if they could work with us to create opportunities to engage with them. Accommodating the engagement within the timescale was difficult with some groups and the learning is that more notice is needed for the community groups.

The groups we attended include:

- Asian women walking group in Pendle three sessions in September and October (19 South East Asian women)
- Kirkby Lonsdale health and wellbeing event in South Cumbria October (12 people)



- Dementia awareness group with Age UK in Lancaster November (20 older people with dementia and carers)
- Older people's groups in Ribble Valley two sessions in November (36 people)
- Clitheroe Warm Hub group November (30 people living in deprivation)
- Veterans in the Community group November (18 military veterans)
- Neurological patient support group in Blackburn November (20 people)
- Poverty Truth Commission in Barrow November (10 citizens with lived experience of poverty, health inequalities, disability and mental health)
- Virtual Carers Forum November (12 carers)
- Pendle health awareness event December (40 people, mainly South Asian community)
- Brinscall coffee morning December (10 people)

ICB engagement team members joined these groups and networks and used a similar format as the roadshow events for capturing people's views and experiences in relation to the vision of the ICB. We learned that the experiences of health and health services are very much seen and framed through their specific conditions or characteristics. The findings have been integrated into the roadshow findings, as we heard the same insights and views.

Insights were also gathered through an ICB perception survey, an Integrated Urgent Care (IUC) survey and targeted engagement with health inclusion groups. We spoke directly with 415 people through the roadshows, online meetings and community health inclusion groups and received a total of 1,836 responses to the two surveys.

The insights gathered in relation to integrated urgent care have been fed into the Integrated Urgent Care Programme Group to help shape the design of the new proposed clinical model.

# 8.2 Shaping Care Together – pre-consultation engagement

Between 26 July and 4 October, the pre-consultation engagement period for the Shaping Care Together programme was live. People were asked to share their views on urgent and emergency care across Southport, Formby and West Lancashire. Several tactics were deployed during this period to gather a rich amount of insight:

- A questionnaire (shared both online and offline).
- Two public roadshows (one at the Concourse Shopping Centre in Skelmersdale).
- Six public meetings (one in Ormskirk and one in Banks).
- Five focus groups sessions with patients, staff and VCFSE groups.

The engagement was coordinated and delivered in the main by Freshwater – the agency leading the communication and engagement work in relation to the programme. However, members of the ICB's communications and engagement team also supported the West Lancashire elements of the engagement.

Nearly 3,000 people completed the questionnaire and more than 200 people attended the public meetings. The insights from this engagement were used to inform the options appraisal process (supported by three West Lancashire residents) which concluded in November. A draft pre-consultation business case is now being developed.



#### 8.3 Pharmacy First

The ICB is the organisation responsible for organising primary care services – including pharmacy services – across the region.

Under the Pharmacy First service, most pharmacies can offer prescription medicine for some conditions, without people needing to see a GP or make an appointment.

Conditions they can offer prescription medicine for are:

- Impetigo (for those aged 1 year and over)
- Infected insect bites (for those aged 1 year and over)
- Earache (for those aged 1 to 17 years)
- Sore throat (for those aged 5 years and over)
- Sinusitis (for those aged 12 years and over)
- Urinary tract infections (UTIs) (women aged 16 to 64 years)
- Shingles (for those aged 18 years and over)

To support work to promote the Pharmacy First service and provide an efficient and quick way of getting some initial intelligence ahead of a promotional campaign planned to start in November 2024, it was agreed that the levels of public awareness and perceptions of both the service and of pharmacy in general needed to be understood. This was a recommendation from the Primary Care Commissioning Committee.

A survey was shared primarily with members of the ICB's Citizen's Panel and Citizens Health Reference Group, as well as on social media and was completed by 448 people.

# 9. Planned engagement and involvement by the ICB for December 2024 and January and February 2025

The following projects are planned and or will be developed over the next three months:

# 10.1 Epilepsy services at the transition between paediatric and adult care

The ICB is looking to gain insight and support improvements at the transition from children and young people's epilepsy services to adult care. Face-to-face engagement alongside epilepsy nurses commenced in the week beginning 2 December 2024 and will seek feedback and involvement from parents, carers and children to understand what they feel is needed to improve the quality and effectiveness of the transition.

#### 9.2 New Hospitals Programme

Following completion of land acquisition, on Monday 2 December 2024 the ICB on behalf of the NHS in Lancashire and South Cumbria announced the proposed sites for a replacement Royal Lancaster Infirmary and a replacement Royal Preston Hospital.

From mid-January 2025, a programme of public engagement will be launched as an opportunity to connect with members of the public, patients, partners, and stakeholders in an honest and open conversation to discuss the proposed sites for the two new hospitals.

The feedback gathered from the engagement programme will help the NHP programme team, the Trusts and the ICB to understand more about how a change of location could positively



and negatively affect patients, colleagues, and the population, and identify mitigations that may be required.

#### 9.3 Women's health hubs

In the next quarter, there will continue to be further engagement to understand women's health across Lancashire and South Cumbria, building on the work that has already taken place.

Healthwatch Blackpool and Healthwatch Lancashire have undertaken significant research projects which will feed into Place and system planning. In the next quarter, we will continue to work with Healthwatch and VCFSE to ensure that public voices are heard in relation to women's health and to support the women's health hubs.

# 10. Informing and communication campaigns

The corporate communications team continues to inform the public and specific stakeholder groups about key ICB and health and care matters.

The ICB's communications team supported the amplification and localisation of health-related campaigns during the period. The overarching aim was the reinforcement of messages known to have an impact on managing pressures. These broadly fell under themes of self-care, prevention, and signposting. Campaigns run during the period concerned:

#### Prevention and self care

- Blood pressure awareness campaign urges people to 'Know Your Numbers'
- Awareness Month highlights the importance of detecting lung cancer early
- Awareness month highlights one of the most difficult cancers to diagnose
- NHS in Lancashire and South Cumbria offers practical tips to stay healthy this winter
- NHS launches 'a to z for a healthier mouth'
- Help reduce medication waste and support the NHS across Lancashire and South Cumbria
- Get ready to prevent falls and avoid injuries this winter.
- Suicide prevention schemes can help "change the narrative" with rates on the rise

#### **Signposting**

- Minor health complaint? Visit your Pharmacy First
- Choose the right NHS service this winter

The campaigns were supported through a number of channels to reach a range of people across our communities, including media releases, social media, Citizen's Panel and targeted messaging.

For information or contacts for any of the engagement initiatives described in this report, please contact David Rogers: david.rogers10@nhs.net

#### **Glossary**

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