

Public Involvement and Engagement Advisory Committee

Title of Paper	Public engagement and involvement assurance report – December 2022 to January 2023		
Date of Meeting	22 February 2023	Agenda Item	

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Purpose of the Report	Please tick as appropriate	
	For Information	✓
	For Discussion	✓
	For Decision	✓

Executive Summary

The report provides members of the ICB Public Involvement and Engagement Advisory Committee (PIEAC) a summary on activities and insights related to engagement, involvement and coproduction undertaken by the ICB between 1 December 2022 and 31st January 2023.

This report seeks to provide assurance to the committee and the ICB Board for the delivery against the strategy for working with people and communities across the ICB and embedding the principles of public involvement and engagement. This includes establishing an engagement and involvement infrastructure which is able to demonstrate how public voice is at the heart of decision making and service delivery in the ICB.

The report also summarises engagement, involvement and co-production activity supporting priority system transformation programmes and other ICB programmes of work.

In addition, the report also provides a summary of public and patient insight received by partner organisations across the integrated care system for consideration by the committee.

This report is the third report, and while the format was broadly approved at the first meeting of the PIEAC, the report is still very much in development with an opportunity to improve the way information is presented and insight from across the system, including system partners is included within the report based on feedback from committee members.

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

<ul style="list-style-type: none"> Note the forward view of upcoming engagement, involvement and co-production activities for the next period 			
Equality Impact & Risk Assessment Completed	Yes	No	✓ Not Applicable
Patient and Public Engagement Completed	✓ Yes	No	Not Applicable
Financial Implications	Yes	No	✓ Not Applicable
Risk Identified	✓ Yes	No	
If Yes : Risk	Lack of effective involvement and engagement across the ICB RISKS an inability for the ICB to make sure effective and efficient health and care services are delivered, decision making which does not take public insight into consideration and lack of empowerment within our communities.		
Report Authorised by:			

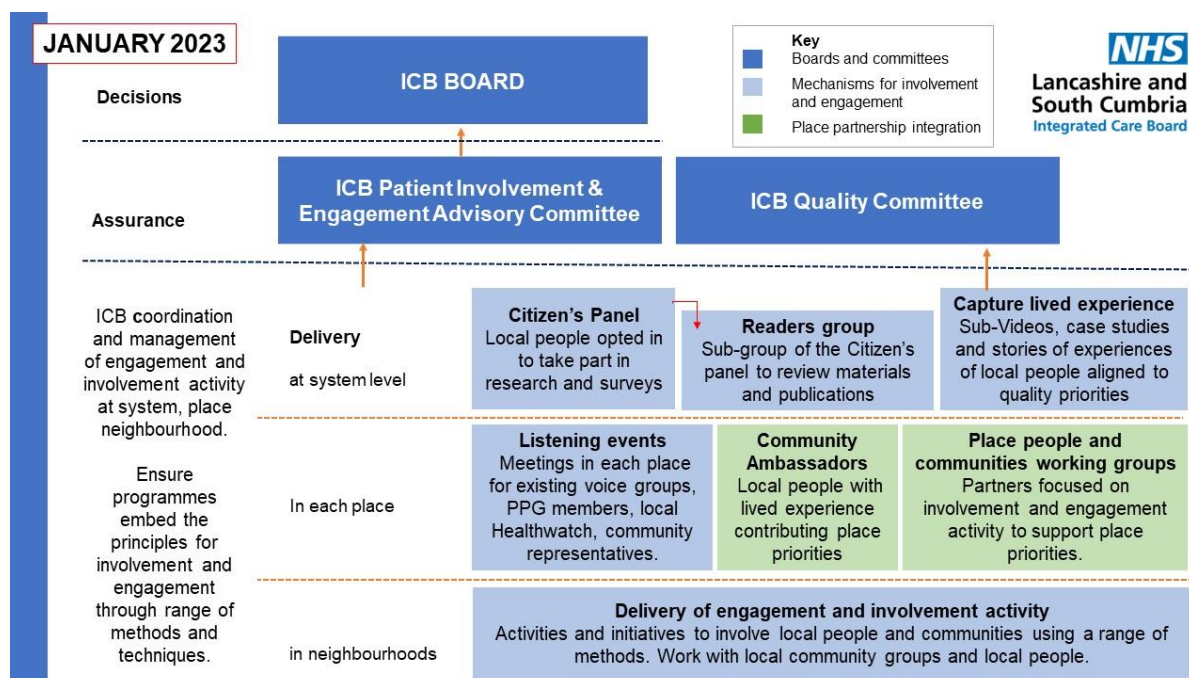
Public engagement and involvement assurance report – December 2022 to January 2023

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, we can ensure that they 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.

The ICB has endorsed a strategy for working with people and communities which describes an ambition to develop robust and trusted relationships which empower our citizens and communities and enable a change in culture and behaviours. The strategy is based on ten principles for public involvement and engagement. More information on the strategy is available [here](#).

The engagement and involvement model below depicts the context and levels of assurance for the ICB. This has been developed through a series of workshops and discussions with partner organisations and teams across the ICB. The published model has been reviewed and we have iterated and is presented below. These changes will be reflected in a review of the ICB Working with People and Communities strategy in April 2023.



The report provides a summary of activities and initiatives to embed engagement, involvement and coproduction into ICB work programmes between 1 December 2022 to the 31 January 2023.

The report will provide assurance to the committee and the ICB Board for the delivery against the strategy for working with people and communities across the ICB and embedding the principles of public involvement and engagement. This includes establishing an engagement and involvement infrastructure which is able to demonstrate how public voice is at the heart of decision making and service delivery in the ICB.

It is recognised that this report is at an iterative stage of development with opportunity to improve the way information is presented. It also recognises that the ICB and the system as a whole is in development and as such recognises the importance of insight from across the system including system partners is included within the report based on feedback from committee members. We expect the report will develop throughout 2023, particularly as the engagement work undertaken in 2022 begins to conclude with reports and evidence of impact and influence is more readily available.

The relationship with the ICB Quality Committee is also important as this has an important role in demonstrating, assuring and making decisions in relation to any quality improvements which the insight and engagement activity may lead to.

2. Headlines for engagement activity and key themes

- Over the last two months and since the last report, the ICB engagement team has continued to build on the engagement infrastructure and processes. In the last report, we described the work of the team in producing a range of products to support this. Further work is being undertaken on our engagement toolkit, and we are aligning language and conducting assurance checks to ensure we are up to date with the latest thinking and legislative requirements and duties. In addition, the team have been piloting a training programme for the workforce, partners and PPGs.
- Work has begun to develop the approach to establish engagement networks with local communities in places. These build on existing networks and groups and provide an opportunity for the ICB to listen to community representatives. Our first indicative date for a series of public involvement networks took place on the 25 January 2023 in Blackpool and is reported on in this report. The next event is scheduled for Preston on the 1 March 2023.
- The ICB has taken the lead in developing an engagement programme to capture views from members of the public on the priorities of the Integrated Care Partnership, on behalf of partners across the system. The results of this activity are presented in this report and will be an item on the PIEAC agenda. This is being used to contribute to the development of the Integrated Care Strategy for Lancashire and South Cumbria.
- The citizen's panel is still very much in development, and although our membership numbers are increasing, we are working hard to promote this as a key system engagement opportunity. Already we are seeing the benefit of this through the readers sub-group of the panel which has reviewed some key documents for the ICB.
- Following the Withnell Health Centre procurement exercise and community campaign arising from this, we are using this to review and strengthen our ambitions for public involvement and this will be considered within a review of the Working with People and Communities Strategy in April 2023.

3. Progress on engagement infrastructure, delivery and mobilisation

3.1 Working with people and communities strategy and plan

We previously reported that, following a national review, our working with people and communities strategy received positive feedback and cited the positive ambitions of the strategy. Members received a draft of the final version in October 2022 and endorsed it subject to some minor amendments which have been actioned. The strategy has now been published on the website and is available [here](#). This will be reviewed and iterated in April 2023.

3.2 Developing and implementing an engagement and involvement model

Our model of engagement and involvement has been developed for the ICB building on existing connections and groups from CCGs and taking into consideration changes to the place boundaries of the system. Work has commenced with the newly appointed directors of health and care integration to establish an approach for place-based engagement. In essence the ICB approach is a three-pronged model:

- at system level, the citizen's panel operates ensuring a regular sense check with representatives across Lancashire and South Cumbria. The citizen panel is in place and the membership is growing.
- in places, a responsive, proactive approach to engagement with communities focusing on the place priorities and delivered in collaboration with all partners. It is anticipated that the focus on carers in Cumbria led by Jane Scattergood, director of health and care integration, which will test our approach to priority led engagement.
- in neighbourhoods, a rolling programme of listening events and networks every two months in each place involving PPGs and community representatives. The first of these events will take place in January in Blackpool and we will report on this in the next committee report.

Listening events

As described above, to maintain connections with CCG public involvement groups, public representative groups and PPGs, the ICB is establishing a continuous programme of listening events every two months in each place area which will bring together PPGs, community networks and patient and public representatives. This is following considerable interest from groups and networks which existed prior to the ICB being established and a desire from the ICB to maintain relationships with these groups and build on good practice.

These events will support the ICB to effectively deliver its duty to involve and will be a powerful means of listening to local voice on the planning and delivery of NHS services. The first of these events took place in Blackpool and the findings are extracted below. The indicative schedule for future events is outlined below, also, with the next event in Preston on the 1 March 2023.

Blackpool listening event.

The first of these ICB led listening events took place in Blackpool on 25 January 2023. ICB senior leaders Jane Cass, Director of Partnerships and Collaboration, Karen Smith, Director of Health Integration for Blackpool and Neil Greaves, Director of Communications and Engagement led a virtual session which included around 30 members of the public from PPG groups, public voice groups, local Healthwatch and voluntary, community, faith and social enterprise sector partners. The session focused on ICB establishment, emerging priorities for the ICB and the Blackpool place and hearing from the groups about experiences of the communities they represent.

Attendees were asked to consider three questions; focusing only on health services in Blackpool, what is working well? what isn't working well? and how can we improve those services?

Attendees thought that the following were working well:

- Maternity services
- GP practices – seen as supportive and knowledgeable
- NHS staff – seen as hardworking, compassionate and doing their best under very tough circumstances
- Good range of services available locally
- Partnership working – those in the system see this working well
- Hospital services at Blackpool Victoria are very good

They agreed that there were many areas for improvement, including mental health service provision and delivery, waiting times, discharge care packages, and poor communication between and within services. Attendees suggested a number of potential improvements, including improvement of digital clinical record-keeping, communication training/ interpersonal skills training for staff and better planning and promotion of existing services. Ensuring staff are aware of voluntary and community groups in their area was a theme along with improving mental health services. Overall, attendees saw the integration of health and social care services as the biggest single improvement needed.

The draft report has been shared with attendees, in the spirit of co-production, and is seeking their views on amendments, improvements and other suggestions to the report before it is finalised and shared more widely. The findings and recommendations will be shared in full with the PIEAC and the Quality Committee to consider improvements and action to be taken in response to this feedback.

Schedule of listening events across Lancashire and South Cumbria

An indicative schedule for engagement with existing groups across Lancashire and South Cumbria has been established.

- 25 January 2023 Blackpool (virtual)
- 1 March 2023 Preston (virtual)
- 22 March 2023 West Lancashire
- 19 April 2023 Blackpool
- 26 April 2023 South Cumbria
- 31 May 2023 Burnley
- 28 June 2023 Blackburn
- 18 July 2023 Blackpool
- 26 July 2023 South Cumbria
- 23 August 2023 Blackburn
- 27 September 2023 Accrington
- 18 October 2023 Blackpool
- 25 October 2023 South Cumbria
- 22 November 2023 Chorley
- 29 November 2023 Blackburn

Supporting engagement priorities in place - South Cumbria

South Cumbria has agreed to focus on the needs of informal carers in South Cumbria and Morecambe Bay. This is those carers providing unpaid care to relatives and friends. Informal carers are less likely to see themselves as 'carers', less likely to be in receipt of carer's benefits and less likely to prioritise their own health. This work is being coordinated with support from local Healthwatch where there is planned engagement with local community groups using a variety of methods to identify informal carers to find out more about the support needed to keep carers healthy in 2023, with engagement about to start imminently.

3.3 Engagement and involvement toolkit and guidance for ICB staff

As part of our development of the communications and engagement team, along with a robust and resilient engagement infrastructure and process, the team have developed an engagement toolkit and guidance for use by ICB teams and to support wider partnership working across the ICS, including the Provider Collaboration Board.

The toolkit aims to support teams to embed the ten principles for engagement and involvement in all areas of the organisation and partnership. Alongside this, the engagement team are planning to pilot a training programme that complements the toolkit and guidance in early 2023. If the pilot evaluates well, we will roll the training out to the wider system throughout 2023 and are considering an online option for the workforce and system partners.

3.4 Citizen's Panel – database of public connected to ICB

The ICB has developed a citizen's panel of members of the public who have agreed to participate in surveys, engagement and give their insights concerning health, wellbeing and health services in Lancashire and South Cumbria. The majority of these have been through a process of opting-in to be part of the panel from previous CCG databases. This model has been presented as good practice nationally and has been adopted by a number of ICBs.

Number of citizen panel members as of 31 st January 2023	1,297
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In this period, we launched our new bulletin for citizen panel. The first bulletin reached 1,297 individuals, and was opened by 705 individuals – a 54% response rate. This is an increase in the number of people we are reaching through this channel.

In response to demand from ICB colleagues, and interest from members of the citizen's panel, we have established a Readers' Group. The group has started to review documents, information, letters and leaflets and offer suggestions on how these can be more patient friendly. We currently have 62 members who have joined the group. Members of the readers group have contributed to the development of an ICB policy on volunteer expenses, and is a good example of how policies and documents can be improved with public engagement and involvement. This policy will be brought to the PIEAC for recommendation and advice on its adoption.

To support the panel, we have created pages on the ICB website, along with our strategy, and plans, and it also provides a link to join the citizen's panel which will be used as part of our proposed recruitment drive: <https://www.healthierlsc.co.uk/get-involved/citizen-panel>.

A campaign has been developed to launch a recruitment drive to increase the membership of the panel. This has been actively promoted on social media and increased activity is planned for media and through the local engagement events.

We have collaborated with the ICB quality team to ensure that there are regular “quick” surveys included in the citizen panel bulletin to give the ICB quality team regular insights from local people. If this approach produces useful insights, we will work with other teams across the ICB and system partners to use this approach going forwards.

3.5 Healthwatch support

Lancashire and South Cumbria ICB has an ambition for strong partnership working with local Healthwatch. A number of meetings have taken place in December and January to develop the partnership and build longer term partnership arrangements with Healthwatch involving the ICB Director of Communications and Engagement and ICB Director of Partnership and Collaboration.

Healthwatch Together have produced a report which has been presented to the ICB on their activity being undertaken to support the ICB. This is attached as a separate report for committee members.

4. Priority transformation programmes

4.1 Primary and community care development

THEME:	PRIMARY CARE						
Engagement/involvement priority	Activity/ies delivered	Activities planned	Partner/s	Current position /timeline	Fit 10 principles	<ul style="list-style-type: none"> • Reach • Health Inequalities • Seldom Heard 	Insight and evidence of impact on ICB decision-making/approach
Develop and support PPGs	Toolkit created Recruitment pack Audit of PPGs with 184 responses to PPG audit	Promotion Promotion Audit	GPs	Action and first network meeting(s) scheduled for 2023	All	Need for more engagement with BAME and younger population	PPGs need to involve more BAME and younger patients 97% have said they would like hybrid meetings Practice staff are involved Practices need support There is a need to develop local networks
Primary Care Networks	Engagement with PCNs to understand C&E support needs A total of 26 of the PCNs responded.	Continued engagement Shared digital space Support toolkits Request to support estates work with primary	GPs	Future actions verbally agreed at PCN development oversight group	All	Potentially all.	GP practices need support to share good practice, learning and development Capacity and capability is an early identified need. There has been some pause on this work as the Fuller action plan is being finalised.

		care and PCNs approach being worked up.		Action plan to be shared with DoCE			
Strategic response to Fuller Report	Review the linkage between the Working with People and Communities strategy and Fuller stocktake	Draft action plan and report almost completed from a design perspective. CSU team has worked with the PCN leadership team to produce the templates.	Primary Care VCFSE – specifically CVS organisations across the region	Extension to framework implementation and engagement reporting L&SC ICB contributing to national framework	All	All	
Pennine Lancashire VCFSE (Burnley, Pendle and Rossendale CVS and Blackburn CVS) insight into GP access for people from high priority wards and conditions (vulnerabilities) (Commissioned by ICB)	Fieldwork Analysis Phase 1 report published Phase 2 report published at time of submission of this report but initial analysis is over 1000	Phase 1 and 2 Reports now produced and discussions held with VCFSE (Burnley,	Burnley, Pendle and Rossendale CVS and Blackburn CVS	Findings reviewed and report now being considered by East Lancs primary care	All	All	Reports have highlighted the challenge of access for the vulnerable and disadvantaged communities – primary care commissioners are considering the full report. We anticipate that commissioners will

	people have been engaged. Data will be validated for the next report.	Pendle and Rossendale & Blackburn CVS's)		commissioners			wish to share the report more widely with an action plan once the report has been considered and recommendations made.
Central Lakes Medical (GP practice procurement)	Engagement and procurement concluded with provider appointed.	COMPLETE	PPG Patients	COMPLETE	All	Central Lakes Medical registered population	Engagement activity concluded and provider appointed. Letters were sent to patients at relevant points in the process, a media release announcing the new provider and stakeholder engagement undertaken.
Slaidburn Country Practice (Ribble Valley) (GP practice procurement)	Completed engagement outputs report shared with primary care leads and NHS England supporting team,	Insight sharing Current round of engagement concluded Awaiting further decision on procurement timeframe	PPG Chair, deputy chair and secretary meeting. Patients.	Engagement and initial report concluded. Awaiting further timescales for procurement process	All	Slaidburn registered population	Report issued. 227 responses (16.75% of registered population) via survey and in practice face to face session (X 3). Meeting with PPG chair, deputy chair and secretary to endorse engagement approach so far. Report available on request,
Old Links GP Practice Closure	Completed engagement with registered population to	Communications	GPs Patients Secondary Crae	Patient engagement complete			All patients written to and drop ins held in practice to advise on alternative local GP practices where

	inform of single GP retirement and closure of practice/list dispersal.		Other providers Key stakeholders	Monitoring any mop up comms with patients Stakeholder comms – to be confirmed.			patients can register. Press release, social media and posters in surgery. Report produced and available on request. Monitoring of number of patients re-registering with alternative practice and targeted texts/information for those still registered. Still to complete stakeholder communications.
Withnell Health Centre	Patient engagement/media management/stakeholder management	Communications and engagement	Provider Media Patients Stakeholders	A large volume of comments/concerns and complaints are being processed by the customer care team. A number of FOIS have been/are being responded to.			Extensive engagement with practice staff and patients by ICB executive. Further instruction awaited regarding next steps.

				Media management and social media monitoring Stakeholder engagement			
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4.2 Population Health

THEME:	POPULATION HEALTH IMPROVEMENT						
Engagement/involvement priority	Activity/ies delivered	Activities planned	Partner/s	Current position /timeline	Fit 10 principles	<ul style="list-style-type: none"> Reach Health Inequalities Seldom Heard 	Insight and evidence of impact on ICB decision-making/approach
Population Health engagement	Review of needs Art of Hosting training	Proposal is in draft pending final version of structures for Population health and C&E	VCFSE – specifically CVS organisations across the region.	Report in progress – awaiting final structures.	All	All	This proposal will build on the Population Health model and cross references with the Working with People and Communities strategy. Alongside this, we have established a model of investment for the VCFSE to fund community development workers. These roles are gradually being

							appointed to across Lancashire and South Cumbria.
Community Journalists (Demanding Health Equity)	Established in partnership with VCFSE (various: CVS and CAB organisations in each place) Training undertaken Support set up Citizen stories are being created. A total of 20 community journalists are involved in this phase of the project.	Ongoing work and continued focus on creation of stories https://otherfronline.org/	VCFSE (CVS and CAB organisations in each place) Universities – led by Lancaster University	Ongoing through to March 2023	All	All	This work was presented at the PIEAC in February 2023. It is anticipated that insights into the cost of living crisis and impact on health and wellbeing will be used to inform developments in population health, as well as transformation programmes of the ICB and system partners.
Mapping of engagement for health equity	Review and mapping of health equity community engagement. The brief is being finalised and engagement has not started.	Currently at the mapping stage.	Lancaster University led in partnership with VCFSE (range including IMO, Lancashire BME, CAB, CVS across the region) Acutes	Phase 1 complete October 2022, Phase 2, report anticipated february 2023	All	All	Awaiting draft report, anticipated in February 2023.

			Local Authorities Universities Business				
Enhanced health checks	Preparation for engagement on the population health programme led work in each Place on enhanced health checks for core 20+5 populations	Scoping and preparation	VCFSE – CVS organisations PCNs Public	The enhanced health checks programme is in the delivery stage and engagement will take place using market research methodologies as part of the evaluation from January 2023.	All	All Core 20+5 groups Socially disadvantaged	Currently at the scoping and preparation stage.
Front door (pilot in West Lancashire)	Development of method using Art of Hosting which	Scoping and preparation – invitations	NHSE Art of Hosting team	Art of Hosting event in	All	All	Workshop held at end January 2023 with wide attendance from across

	will lead to a community workshop to explore how we can reach people who are socially vulnerable, experiencing complex wider determinant issues and are failing to thrive. The aim is to be better able to nurture protective behaviours so that people can get the right support they need at the right level.	have been issued for the 26 th January 2023 using an Art of Hosting approach	Population health ICE Public VCFSE – range of organisations in West Lancashire – see detailed report for over 20 organisations listed.	January 2023 with report thereafter			VCFSE, statutory and community organisations. Used Art of Hosting methodology to create conversations and capture lots of learning to help inform next stage of design in West Lancs as well as wider ICB system.
Priority Wards	Initial investigatory reports into electoral wards across L&SC which have highest rates of non-elective (ie unplanned) admissions comparatively with other wards of similar	Door knocking, focus groups, stakeholder interviews, surveys	VCFSE – range of organisations including CVS's across the region. Local Authorities Public Health Community and individuals	All places currently in delivery phase with initial investigatory reports to be	All	All	Prioritisation of issues and co-design of solutions with communities will help produce meaningful relationships and appropriate interventions within our wards with the highest non-elective (ie unplanned) activity.

	<p>demographic factors. Stakeholder interviews, community engagement and data analysis.</p>		<p>PCNs</p>	<p>completed by end June 23. Next step will then be to have further conversations with communities in these wards to begin prioritisation of issues and co-design of solutions.</p>			
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4.3 New Hospital Programme

THEME	NEW HOSPITALS PROGRAMME						
	Activities delivered	Activities planned	Partner/s	Current position / timeline	Fit 10 principles	<ul style="list-style-type: none"> • Reach • Health Inequalities • Seldom Heard 	Insight and evidence of impact on ICB decision-making/approach
<p>Six areas of focus in options development period engagement to date:</p> <p>1. Benchmarking public perceptions of hospitals in Lancashire and South Cumbria.</p> <p>2. Hopes, fears, and desires for new hospital facilities in Lancashire and South Cumbria.</p> <p>3. Identifying possible</p>	<p>The latest NHP milestone update was published on 26.09.22, announcing recommendations for new hospitals on new sites for Royal Lancaster Infirmary and Royal Preston Hospital and alternative options. A survey was launched to encourage people to share their views on the proposals and what is most important to people in new hospital facilities</p>	<p>Iterative updating of the engagement gap analysis report and action plan, incorporating insight from the ICB-led engagement with under-represented communities and health inclusion groups during Q4, and implementing learnings and recommendations from the Lancaster University research project.</p>	<p>Stakeholders include: patients, specialist patient groups, Patient Participation Groups, local residents, NHS staff, Governors, NHS Foundation Trust Members, local NHS organisations, VCFSE, universities, MPs,</p>	<p>Current phase of active engagement is prioritising the involvement of health inclusion groups, and addressing any gaps identified, with ICB-led engagement with priority groups running from December 2022 to February 2023. An Equality and Health Inequality Impact Risk Assessment (EHIIRA) on the NHP Communications and Engagement</p>	<p>All (detailed analysis evidencing this).</p>	<p>There has already been a strong focus on engagement with inclusion groups, including: members of ethnic minority groups; people with disabilities; lesbian, gay, bisexual, transgender and queer people; carers; senior citizens; younger people; users of pregnancy and maternity services; sign language users;</p>	<p>Areas of consensus, including: Widespread support in favour of funding for new hospital facilities. Travel and accessibility considerations are the biggest NHP talking point. Hospital sites must be 'future-proofed' to meet the region's long-term needs. People are open to the use of digital tools to enable care closer to home.</p>

<p>solutions to the Case for Change.</p> <p>4. Developing Critical Success Factors for evaluating proposals.</p> <p>5. Responses to a longlist of viable solutions.</p> <p>6. Responses to a shortlist of viable solutions.</p>	<p>(open from 26.09.22 to 31.10.22), with 604 responses from patients, staff and carers. Results have been analysed and reported to the NHP</p> <p>Communications and Engagement Oversight Group and programme team to inform the decision-making process.</p> <p>The Your Hospitals, Your Say report (published September 2022) provides an update on engagement to date and the process followed during the options development period.</p>	<p>Preparations for public consultation, if required subject to the options taken forward / next phase of engagement and involvement. Ongoing public, patient, staff, and stakeholder engagement and communications throughout the process. Legacy and collaboration: sharing learnings with NHS colleagues locally (Trust and system), regionally and nationally.</p>	<p>Local Authorities, HOSCs, NHSE, DHSC.</p>	<p>strategy has been completed, and MLCSU have produced an Engagement Appraisal. The NHP engagement gap analysis report and action plan has been updated, taking into account actions resulting from the EHIIRA and Engagement Appraisal. Key findings and recommendations from both will inform future NHP communications, engagement (and consultation, if applicable) strategy and plans, with learnings shared with system partners.</p>		<p>military veterans; people with mental health conditions; people who misuse substances; people experiencing homelessness; members of the Gypsy, Roma and Traveller community; unemployed people or people on low incomes; and people who represent refugees and asylum seekers. More work is now underway to deepen and broaden our focus on seldom heard and key inclusion groups, as a</p>	<p>New hospital facilities should be designed with sustainability in mind. A single hospital on a new central site is not acceptable to key audiences.</p> <p>Nuances between audience groups: Acceptability of new hospital sites being within a 10-mile radius of the existing sites was broadly acceptable, but a minority were keen to note that the direction of the 10 miles was important. Unlike previous website surveys the views of staff and the public were more closely aligned on the acceptability of the</p>
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	<p>Updated statistics: as of 30 November 2022, 16,378 different individuals have been involved in one or more Lancashire and South Cumbria New Hospitals Programme engagement activities. The public account for 31% of all engagement interactions, current and recent patients and service users 18%, and NHS staff 19%. Under-represented communities and health inclusion groups make up 28%.</p>			<p>The LSC NHP team is currently awaiting further information from the national New Hospital Programme team regarding capital funding allocations, which will help determine the way forward: January 2023 NHP update. See also activities planned.</p>		<p>result of an engagement gap analysis exercise. The ICB Communications and Engagement team is currently supporting with additional engagement with the following priority groups: ethnic minority groups (particularly Asian / Asian British); faith groups – particularly people of Muslim faith; people with disabilities (segmentation by type of disability); refugees / asylum seekers; people who are</p>	<p>recommended proposals, however those with caring responsibility of another due to health / disability / age were significantly less likely to accept two new hospital sites when compared to the average. Inclusion groups place greater importance on patient-centered care.</p> <p>Feedback on wider issues e.g., it's not just about buildings but also joined up planning with a focus on prevention and mental health, integrated services and remote care, staff training on needs</p>
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						<p>homeless; younger people; older people; people on low incomes; Gypsy, Roma Traveller (transitory communities); pregnancy and maternity service users; people with mental health problems (particularly younger people); rural / farming communities; LGBTQ+ groups; and sex workers. Proactive engagement approaches began w/c 05.12.22 via groups and networks.</p>	<p>of inclusion groups, and broader issues such as staff shortages, pay and conditions and leadership.</p>
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5. ICB led involvement and engagement activity and projects

THEME:	ICB led involvement and engagement activity and projects:						
Engagement/involvement priority	Activity/ies delivered	Activities planned	Partner/s	Current position /timeline	Fit 10 principles	<ul style="list-style-type: none"> • Reach • Health Inequalities • Seldom Heard 	Insight and evidence of impact on ICB decision-making/approach
ICP Priorities engagement	Survey closed at the end of October (was extended for 1 week). Detailed analysis of text comments (over 800, consisting of over 24,000 words) now undertaken and made available to the ICP.	Engagement and survey findings now being reviewed by 'working groups' on each priority area, as they develop their plans/the integrated care strategy.	Place based partners NHS Local Authorities VCFSE – including CAB, Healthwatch, CVS's	Analysis of engagement findings now being used in the next stage of the process – to inform the final integrated care strategy, which will be launched in early 2023.	All	All groups targetted through our stakeholder list, citizens panels and other networks and groups in each place.	The findings were discussed at the PIEAC in February. Work is now moving to more focused placed based resident engagement on the priorities and the team are working to develop an approach to this. Respondents felt family (maternity, children or family related services) were the highest priority, with the need for greater communication and collaborative working across organisations and with communities a close second. A significant proportion felt the priorities were pre-determined and did not

							allow people to raise their own priorities. Workforce was another area that respondents felt was not sufficiently highlighted with the priorities. It is too soon to identify any impact on decision-making or strategy development.
IAPT engagement and post campaign evaluation	<p>An engagement programme rolled out during the summer to gather the thoughts and feedback of IAPT users with regards to their thoughts of the service.</p> <p>In addition, the engagement looked to speak to people living with a common mental health condition who have not used the service, and also referrers such as GPs.</p>	<p>The initial engagement took the form of an online survey (paper surveys were provided as an option) – the feedback from this will feed into a IAPT promotional campaign that is to launch towards the end of the year. To close the loop, an evaluation</p>	<p>Patients, Service users, LSCFT</p>	<p>A promotion campaign has been running since November and will run through winter.</p>		All	<p>A report has been produced which summarises the findings of the engagement survey and how we will use this feedback in shaping the promotional campaign. This has yet to be determined.</p> <p>To note, it was last week revealed that the whole IAPT system nationally is to be re-branded in the new year and we are looking at how this affects the campaign.</p> <p>A user led, engagement, market research and insight evaluation will take place in the 2023</p>

		will be undertaken following the campaign.					when the campaign has concluded.
Public engagement on enhanced acute stroke centres	<p>Several months of engagement : survey with web-based supporting information and visits to Stroke Association survivor groups, both face-to-face and virtual.</p> <p>We met with 107 people during the Stroke Association sessions (46 face-to-face, 61 virtually). This included 92 stroke survivors and their carers and 15 Stroke Association staff/volunteers, some of whom are also stroke survivors or carers. A further 56 people completed the survey.</p>	<p>Responses to all 23 issues raised during the engagement process have now been formulated. These are now being shared with the ISNDN Board for final comment before wider circulation. The survey in development relating to psychological input following a stroke is not a public survey – it is for an evaluation panel to score the</p>	Stroke Association Acute Trusts ISNDN Board Operational Implementation Board	Year 1 of 3 year implementation programme for implementing the enhanced acute stroke centres business case; consideration of issues arising	All	All	<p>This work is ongoing, however, the issues raised by those who responded to the engagement process offered some challenges to the implementation of the proposals. The full benefits of the proposals could never be realised until after the implementation was completed (after three years), but the issues raised may have already brought about a step-change in the language used and a greater exploration and/or clarification of what may or may not be achieved within the three-year process.</p> <p>If approved by the ISNDN, the direct divert pathway to RPH is now expected to go through a phased introduction at</p>

		shortlisting options for delivery of psychological input.					the end of year three, with the first step being triage, treat and transfer and a move to direct divert when we know this will provide the service needed. Further exploration around the safest way to manage this are in progress. This also applies to NWAS capacity to deliver the level of service required. Additional modelling and exploration around how best to manage bed occupancy when stroke wards are full; front door stroke assessments; fitness to transfer; and solutions for keeping patients and their families in contact and informed are also underway.
Lung Health Check Programme	Drop in events have taken place. The team has also captured a number of patient stories and videos in	Use of lung health checks story for the ICB's Quality Board is being	Primary Care Supermarkets Patient reps Media	Ongoing engagement	All	All	This work is ongoing, and continues to be fed into the lung health check programme. It is anticipated that more engagement will be

	promotion of the programme.	considered within our schedule of patient stories as well as ongoing engagement					undertaken in January 2023.
Fylde Coast - Palliative care and end of life strategy engagement	Questionnaire for stakeholders now complete with 108 responses. Questionnaire with patients and public undertaken by BTH.	Palliative Care workshop and Steering Group sign off	Public Professionals	Summary slides shared with the Fylde Coast Palliative Steering Group Workshop scheduled in December with ICB engagement team facilitation	All	All	Report embargoed until review at workshop and sign off by Fylde Coast Palliative Care Steering Group. We are awaiting an update for this report and actions arising from it.
Vaccination programme insight - views and attitudes towards getting the COVID-19 vaccine. We want to know what the hesitancy is for receiving the vaccine - if any, and what we can do	Questionnaire survey - online. This is work in progress and we anticipate more responses as we progress with the project.	Survey on-going	Community networks, VCFSE (a range of organisations please refer to full report for details)	Ongoing	All	All	This remains ongoing - at the time of this report the responses we have received have helped define key themes as previously reported, including the perception from respondents who

to offer reassurance and encouragement about the vaccine going forward							completed the survey had concerns about the vaccines: 1. Feeling poorly after having the booster 2. The vaccine has not been tested properly 3. Suffering from heart attack after having vaccine 4. Women having onset of premature pre-menopausal symptoms.
Children and Young people – Mental Health campaign coproduction	Four workshops held at Rock FM in Preston. A total of 35 high school pupils participated, with support from their school pastoral team and primary mental health workers.	First phase complete, ongoing engagement anticipated thereafter	Rock FM and four secondary schools: Haslingden High School (Haslingden), Our Lady's Catholic Academy (Lancaster) St Marys Catholic Academy (Blackpool) Coal Clough Academy (Burnley)	Complete	All	Children and young people	An engagement report has been finalised and we are awaiting the next steps from this. This work is led by the suicide prevention team with support from engagement. The insight and recommendations will be used to inform the development of a mental health campaign aimed at young people, and also potentially parents.
End of life /Palliative care	Scoping work to enhance	Scoping work	Hospices Primary Care	Work in progress	All	All	Scoping work has begun.

	coproduction, engagement and involvement in end of life (EOL) and palliative care including EOL and palliative care reps, lived experience, and insight work.		Secondary care Patients Carers				
Winter Campaign	Scoping work to plan and deliver engagement and market research to evaluation the ICB winter campaign. This will focus on memorisation of messages, recall and intention to change behaviour metrics.	Scoping work	Public	Work in progress	All	All	Scoping work has begun
Clinical Policy Development	Ongoing support to the clinical policy development work for the ICB – involving harmonisation of clinical policies.	Ongoing engagement support including promotion of surveys for new policies and seeking views	Public	Ongoing	All	All	Ongoing work. This is done on a clinical policy, by clinical policy basis. Currently we are not engaging on any new policies; however previous engagement work was reported in the review of engagement

							reported to PIEAC in October 22.
Provider Collaborative – Clinical Strategy	Scoping and planning around the engagement required for the provider collaborative clinical strategy.	Scoping and preparation although the clinical strategy work is in development, based on the engagement toolkit.	Public and patients	Ongoing	All	All	Scoping work has begun. It is anticipated that this will lead to a fuller more detailed table for the provider collaborative describing each element of the clinical strategy and the priorities within it.
Breathlessness pathway (respiratory care)	Initial scoping and development of proposal to support coproduction of breathlessness pathways – triangulated approach of online survey, focus groups, and coproduction at place.	Scoping and preparation for January 2023 to April 2023 engagement	Online survey, focus groups at Place and coproduction group	Ongoing	All	All	Preparation and development work has begun.
Gypsy, Romany, Traveller (GRT) Engagement	Engagement with GRT communities across two LSC sites (Mellishaw, Whinney Hill)- focus on vaccinations and	Activity planned- supporting members of GRT community to join various	Partners- ICB Vaccination programme, Lancashire County Council	Ongoing	All	All – focused on GRT	Engagement and initial reports have informed clinical operations- delivery of Covid and flu vaccines- Programme expanded following work

	patient access to primary care services. Patient story video captured, undergoing editing process; extensive oversight report under development looking at GRT health locally and nationally due to transient nature of community - ongoing, due end December 2022.	patient networks (Citizens Panel, Maternity Voices Partnerships) ; connect community members with services - ongoing due end March 2023					undertaken Winter 2021/22
Development of ICB Volunteer Expenses Policy	Engagement with citizen's panel and readers group with online survey	Online survey	None	Engagement complete analysis undertaken, views considered, policy being redrafted.	All	Partially met	The engagement is complete and the report is available on request. 12 members of the citizen's panel fed their views into the development of the policy and these have been considered and incorporated into the policy.

6. Engagement and involvement with or led by key system partners

THEME:	ENGAGEMENT AND INVOLVEMENT WITH OR LED BY KEY SYSTEM PARTNERS						
Engagement/involvement priority	Activity/ies delivered	Activities planned	Partner/s	Current position /timeline	Fit 10 principles	<ul style="list-style-type: none"> • Reach • Health Inequalities • Seldom Heard 	Insight and evidence of impact on ICB decision-making/approach
A&E & Urgent Care Coproduction (Blackpool)	A coproduction group is being proposed and led by Blackpool Council to undertake coproduction work around A&E and urgent care - the aim is to reduce	Coproduction group is being established and linked to the Urgent Care work stream.	Blackpool Council BTH Blackpool Healthwatch	Coproduction group being established	All	All	Work has begun and will feed into the communication and engagement work of the urgent care programme.

	the need for non-medical emergency presentations at A&E in Blackpool, building on the work that Health Watch Blackpool have been doing.						
Ethnicity and difference in health and care – engaging with people from minority ethnic groups with a learning disability (UCLAN)	Promotion of the engagement opportunity	Focus groups	UCLAN Race Equality Foundation Learning Disability England People with LD, carers, VCFSE	Focus groups planned in October	All	People with a learning disability and from a minority ethnic group over 18.	The focus group work is now complete. The team are planning to submit the report to the Race Health Observatory at the end of January/early February and when approved will be available for wider circulation following this once approved.
Care Leaver Pathway and processes	Brief from safeguarding received and proposal drafted and being developed for engagement with care leavers	Mixed methodology: focus groups, online survey, face to face interviews	LCC, BwD and Blackpool Council as well as Safeguarding teams and care sector	Proposal drafted and being developed for engagement with care leavers	All	Care Leavers, Children and Young People	The engagement is in development and will be initiated at the time of writing.

ICP priorities engagement across the LSC and at place	Brief received, proposal in development	Mixed methodology: focus groups, online survey, face to face interviews	LCC, BwD and Blackpool Council, Healthwatch, Various VCFSE colleagues including CVS and CAB	Proposal drafted, stakeholder mapping being undertaken and outline plan to be agreed.	All	All	Currently in development to be launched in February 2023.
Getting to outstanding (GTO - End of Life and Palliative Care) Framework.	Brief received, proposal in development	Mixed methodology, including communication approach for engagement	NHSE, hospices, and EoL and palliative care networks	Proposal drafted, and approach to to be agreed.	All	All	Proposal for engagement to be agreed by the GTO team and palliative care network.

7. Formal consultations

There are currently no formal consultations taking place in Lancashire and South Cumbria. However, following a review and scoping exercise, we have identified that the New Hospitals Programme, and the Clinical Strategy (led by the Provider Collaborative) could potentially lead to formal consultation. While these are subject to national and health overview and scrutiny committee agreement, we will continue to progress pre-consultation engagement and keep all stakeholders informed as these areas of work develop.

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

Glossary

A&E	Accident and Emergency
BAME	Black and Minority Ethnic (groups)
BME	Black and Minority Ethnic (groups)
BTH	Blackpool Teaching Hospital
BwD	Blackburn with Darwen
CAB	Citizen's Advice Bureau
CCG	Clinical Commissioning Groups (now abolished and replaced by the ICB)
CSU	Commissioning Support Unit
CVS	Community and Volunteer Service
DHSC	Department of Health and Social Care
EHIRA	Equality Health Impact Risk Assessment
EoL	End of Life (care)
GP	General Practitioner as well as General Practice
GRT	Gypsy, Romany, Traveller (community)
GTO	Getting to Outstanding
HOSC	Health overview and Scrutiny Committee
IAPT	Improving Access to Psychological Therapies
ICB	Integrated Care Board
ICE	Insight, Coproduction and Engagement (team)
ICP	Integrated Care Partnership
IMO	Inspire, Motivate, Overcome Charity (Blackburn)
ISDN	Integrated stroke delivery networks
LGBTQ	Lesbian, Gay, Bisexual, Transgender, Queer (communities)
LCC	Lancashire County Council
L&SC	Lancashire and South Cumbria
LSCFT	Lancashire and South Cumbria Foundation NHS Trust
NHP	New Hospitals Programme
NHS	National Health Service
NHSE	National Health Service England
NWAS	North West Ambulance Service
PCN	Primary Care Network (groups of GP practices)
PIEAC	Public Involvement and Engagement Advisory Committee
PPGs	Patient Participation Groups (a requirement for each GP practice)
SLT	Senior Leadership Team
UCLAN	University Central Lancashire
VCFSE	Voluntary, Community, Faith and Social Enterprise (organisations)