

## Public Involvement and Engagement Advisory Committee

<b>Date of meeting</b>	25 April 2023
<b>Title of paper</b>	The Lancashire and South Cumbria Integrated Care Strategy: Findings from resident engagement during March 2023
<b>Presented by</b>	Victoria Ellarby, Programme Director – System Reform, LSC ICB
<b>Author</b>	Victoria Ellarby, Neil Greaves, Lindsay Graham
<b>Agenda item</b>	2.2
<b>Confidential</b>	No

### Purpose of the paper

The purpose of this paper is to provide assurance to the ICB on approach and outcomes of engagement and involvement of local people in the development of the Integrated Care Strategy for Lancashire and South Cumbria.

### Executive summary

In January 2023, the PIEAC reviewed the engagement process undertaken in September to November 2022 to support the development of the initial draft of the Integrated Care Strategy. The broad approach to engagement was supported and a number of areas of feedback were made to ensure the engagement responded to the insight captured. During February 2023 refinements were made to the content and layout of the document, ahead of a period of resident engagement during March 2023. This report outlines the resident engagement activities that have taken place during this period, together with the findings and recommendations.

The purpose of this current phase of resident engagement was to determine whether the draft strategy document and the priorities it sets out can be easily understood and are meaningful to residents. The approach included the use of an online survey, existing resident groups, specific focus groups including a readers' panel and 'pop up' market stalls in town centres.

Across the above activities, we heard from 537 people and the overarching responses to the key questions were positive.

### Recommendations

The PIEAC is asked to:

- Note the range of engagement activities undertaken across the integrated care system during March 2023 and the number of responses received.
- Note the findings from the engagement activities, both quantitative and qualitative.

<ul style="list-style-type: none"> <li>Note the recommendations from these findings and how these have contributed to the development of the Integrated Care Strategy</li> </ul>				
<b>Governance and reporting</b> (list other forums that have discussed this paper)				
<b>Meeting</b>	<b>Date</b>			<b>Outcomes</b>
<b>Integrated Care Strategy Development oversight group</b>	11.04.2023			Supported and were assured of the level and nature of the engagement activity to support the recommendations.
<b>Conflicts of interest identified</b>				
None				
<b>Implications</b>				
(If yes, please provide a brief risk description and reference number)	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
Quality impact assessment completed				
Equality impact assessment completed				
Privacy impact assessment completed				
Financial impact assessment completed				
Associated risks				
Are associated risks detailed on the ICS Risk Register?				

<b>Report authorised by:</b>	Neil Greaves, Director of Communications and Engagement
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## **The Lancashire and South Cumbria Integrated Care Strategy: Findings from resident engagement during March 2023**

### **1. Introduction**

In January 2023, the Integrated Care Partnership (ICP) received an initial draft of the Integrated Care Strategy. It was agreed that further work would take place during February 2023 to refine the content, and then during March 2023 to seek feedback on the content and layout of the strategy from our stakeholders – the sectors/organisations who are members of our integrated care system and our residents.

As agreed at the ICP meeting in January 2023, this work has been overseen by the Strategy Development Group. The detailed planning and progress monitoring of our resident engagement work has been overseen through a specific Resident Engagement Sub-Group.

This report outlines the resident engagement activities that have taken place during this period, together with the findings and recommendations.

### **2. Purpose of this phase of resident engagement**

During October 2022, we engaged with our residents on the content of our strategy, specifically the life course themes and the priority actions that people wanted to see within each of these themes.

The purpose of this current phase of resident engagement in March 2023 was to determine whether the draft strategy document and the priorities it sets out can be easily understood and are meaningful to residents. We asked our residents to respond to key questions across a small number of themes:

- How easy do you think the strategy is to understand?
- What do you think we can do to make the strategy easier to understand?
- Do you understand what each of our priorities are about?
- What can we do to make the priorities easier to understand, either in general, or for any specific priority?

It is recognised that further engagement will take place as we move into future phases of planning and implementation, specifically tailored to our themes and to our places.

### **3. Approach to this phase of resident engagement**

This phase of engagement took place during the period 6<sup>th</sup> March to 24<sup>th</sup> March 2023.

We mirrored the approach that was used successfully in our previous engagement activities:

- An online survey created by the ICB communications and engagement team. Signposting to this was via various routes including websites, newsletters and social media across all of our partners.

- Use of existing resident groups
- Specific focus groups including a readers’ panel
- ‘Pop up’ market stalls in town centres

To maximise reach and diversity, the above activities were supported through Healthwatch Together and each Healthwatch organisation in our four places; the voluntary, community, faith and social enterprise sector; district councils; and the ICB communications and engagement team.

Details of the routes by which information was shared and the locations of resident groups, focus groups and ‘pop up’ market stalls are provided in Appendices A and B.

#### **4. Responses received**

Across the above activities, we heard from 537 people. Of these, 144 were via the online survey, 6 through our readers’ panel and 387 through face-to-face events, with a good distribution across our places:

	<b>Response distribution</b>	<b>Responses received</b>
Blackpool	8%	23%
Blackburn	9%	8%
Lancashire	65%	27%
South Cumbria	17%	41%

This is a lower number than our reach in October 2022, where we had over 1000 people respond to our range of engagement activities. However, it must be noted that our ask of residents during this phase of engagement was significantly different – we asked people to read our relatively complex draft strategy document (44 pages) and provide feedback on readability and understandability. This required a greater level of time commitment from individuals and therefore a lower response rate is to be expected.

Details of the distribution of responses across the demographic groups are provided in Appendix A.

#### **5. Findings from the engagement activities**

Across all engagement activities, the overarching responses to the key questions were positive:

- How easy do you think the strategy is to understand?

<b>Very easy</b>	12%
<b>Easy</b>	61%
<b>Difficult</b>	24%
<b>Very difficult</b>	3%

- Do you understand what each priority is about?

	Starting Well	Living Well	Working Well	Ageing Well	Dying Well
<b>Yes</b>	84%	84%	81%	85%	82%
<b>No</b>	16%	16%	19%	15%	18%

The key themes emerging from the free-text responses to the online survey and from the face-to-face engagement activities were:

- **Use of language**
  - Remove jargon and technical/professional language and simplify sentences
  - Simplify the language throughout and where this isn't possible, explain what it means
  - Avoid using certain terms such as 'substance misuse'
- **Design / layout**
  - Make it less cluttered
  - Include glossary at the beginning of the document
  - Simplified infographics
  - Diagram showing interconnection of ICS/ICP/ICB etc.
- **Accessibility**
  - Larger font and accessible colours
  - Create a range of accessible versions, including Easy Read, large print, braille, alternate languages, audio version, printable version
  - Video or animated version produced alongside the strategy
- **Content**
  - Be clear about document's audience
  - Be clear on how the priorities will be delivered – what will be different
  - Add a diagram of different parts of the system

Inevitably, the free text responses also included some comments on the content of the strategy, mainly relating to the life course priorities and underpinning themes, and the involvement of residents in the next stages of planning and implementation. These comments did not require material changes to the content of the strategy. However, they will be considered in the next phase of work linked to implementation plans.

Details of the findings from the online survey and the Healthwatch-led face-to-face events are provided in Appendix A.

## 6. Recommendations from these findings

Based on these findings, there were a number of recommendations for consideration in the creation of the final strategy document:

- Produce a shorter, simpler summary version

- Move the glossary to front or make it clear where it is
- Include a clear diagram of ICS/ICP/ICB and other organisations
- Ensure alternative versions available (large print, other languages, braille)
- Create a video
- Produce a printable version
- Provide each priority lead with feedback which relates to the content of the priorities rather than whether the strategy is easy to understand
- Create a short, resident facing document for each priority that explains the actions that we are taking to deliver the strategy content

## 7. Recommendations

The ICP is asked to:

- **Note** the range of engagement activities undertaken across the integrated care system during March 2023 and the number of responses received.
- **Note** the findings from the engagement activities, both quantitative and qualitative.
- **Note** the recommendations from these findings

## Appendices

Appendix A: Findings from the online survey and the face-to-face / virtual events

Appendix B: Engagement routes used by district councils



# Lancashire and South Cumbria

Integrated Care Partnership

**Listening to our communities on our integrated care strategy: summary of findings**

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# Process of engagement

## Online survey and face-to-face groups

- An engagement process ran from 6 – 24 March, inviting feedback for a period of three weeks on the draft integrated care strategy to find out whether the final strategy document and the priorities it identifies can be easily understood, that they make sense and are meaningful to partners and residents of Lancashire and South Cumbria.
- The engagement routes were:
  - An online survey, with signposting to this via various routes
  - Use of existing face-to-face resident groups
  - Specific face-to-face / virtual focus groups including a readers' panel
  - 'Pop up' market stalls in town centres
- Activities led by Healthwatch, ICB communications and engagement team, district councils, VCFSE sector



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# Recommendations from key findings

## From online survey, face-to-face / virtual groups and market stalls

- Produce shorter, simpler summary version
- Move glossary to front or make it clear where it is
- Include a clear diagram of ICS/ICP/ICB and other organisations
- Ensure alternative versions available (large print, other languages, braille)
- Create a video
- Produce a printable version
- Provide each priority lead with feedback which relates to the content of the priorities rather than whether the strategy is easy to understand
- Create a short, resident facing document for each priority that explains the actions that we are taking to deliver the strategy content

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# Readers' panel feedback

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## Overall feedback (7 respondents in total)

- Make it less cluttered
- Remove jargon and technical/professional language and simplify sentences
- Be clear about document's audience
- Include contacts
- Include glossary at the beginning of the document
- Add a clear diagram of different systems
- Unsure about use of 'wealthier'
- Simplified infographics
- A short video would be helpful (possibly animation)

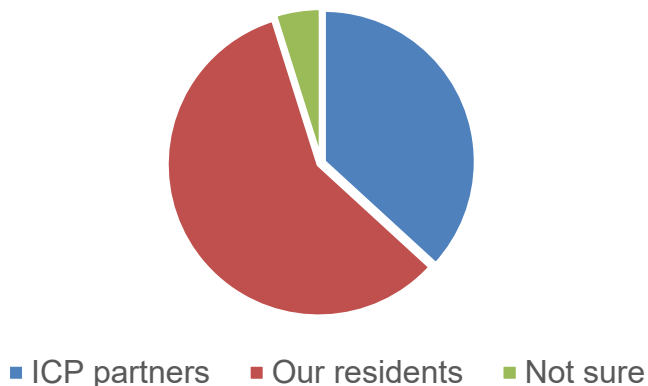
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# Response to the online survey

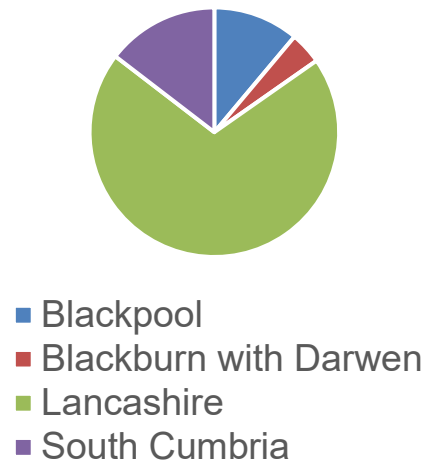
# Who did we hear from?

Total number of respondents: 144

### Respondents



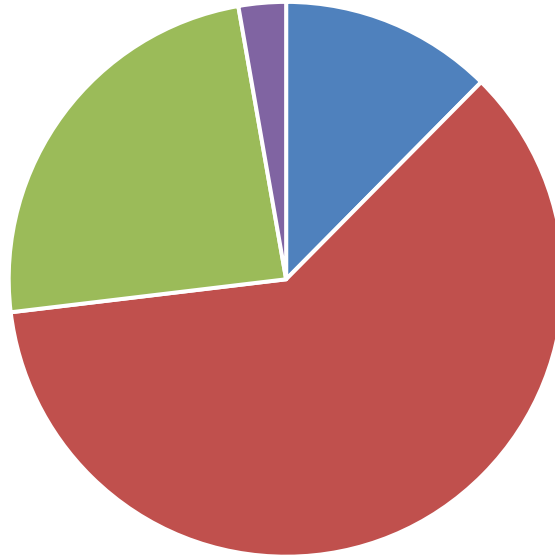
### Area of residence



Of the 144 responses, 122 people said they had read the integrated care strategy. 22 people said they had not read the strategy and therefore were responding based on the extracts set out in the survey.

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## How easy do you think the strategy/examples are to understand?



73% of respondents said it was either 'easy' or 'very easy' to understand.

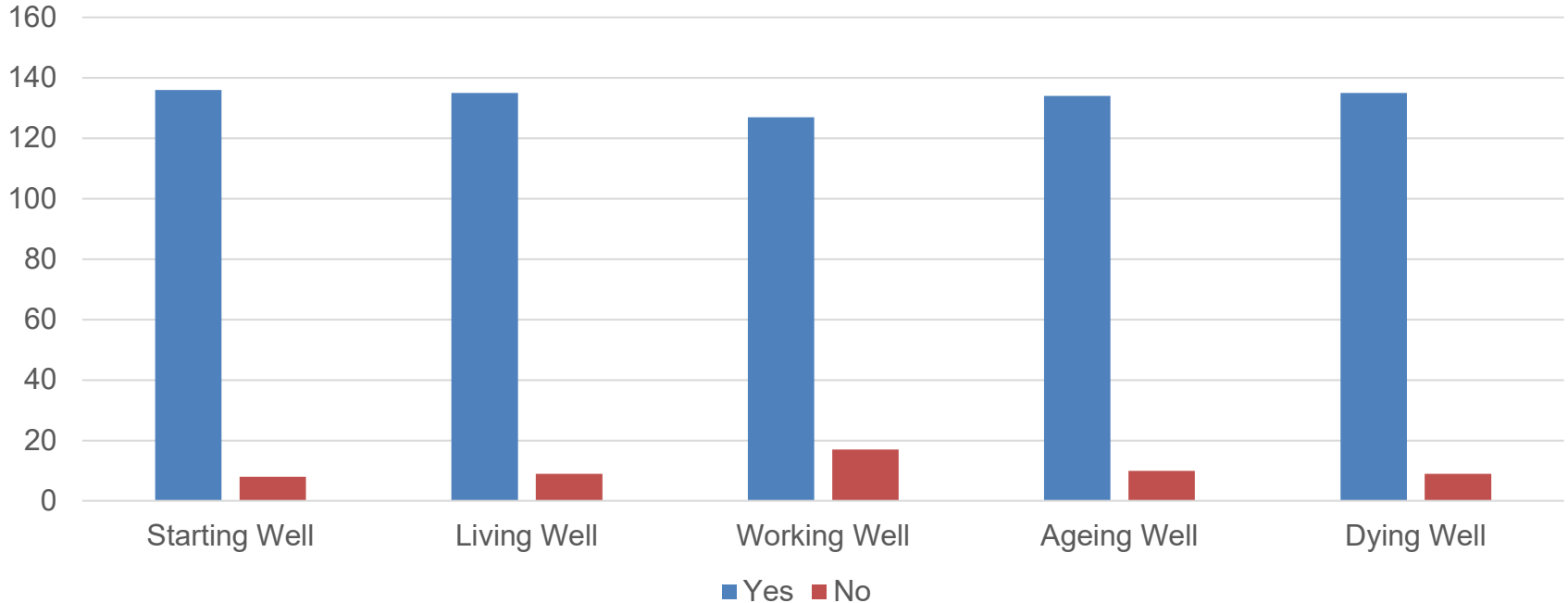
■ Very easy ■ Easy ■ Difficult ■ Very difficult

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# What do you think we can do to make the strategy easier to understand?

- Remove technical language/jargon
- Larger font and accessible colours
- Create accessible versions, including Easy Read, large print, braille, alternate languages, audio version, printable version
- Reduce word count and increased graphics and/or produce a shorter version
- Layout – information could be more evenly distributed and graph titles easier to read (not vertical)
- Video or animated version produced alongside the strategy
- Diagram showing interconnection of ICS/ICP/ICB etc.
- Include glossary at the beginning or produce as separate document to refer to alongside strategy and add further terms to glossary
- Be clear on how the priorities will be delivered – what will be different
- Reduce repetition

# Do you understand what each of the priorities is about?





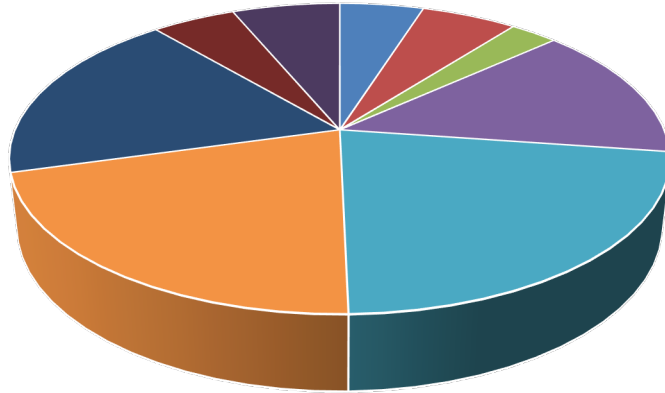
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## What can we do to make the priorities easier to understand, either in general, or for any specific priority?

- Provide examples of how they would work in real life
- Include the priorities earlier in the document – as this is the most important part of the document
- Move dying well to bottom of graphic
- Working well – consideration for those unable to work
- Simplify the language or explain what it means
- Consider using different titles for the priorities instead of '[priority] well'
- Underpinning themes should be included before the priorities
- Consider reducing amount of information – lots of text on one page
- Avoid using term 'substance misuse'
- Some women cannot breastfeed even though they want to

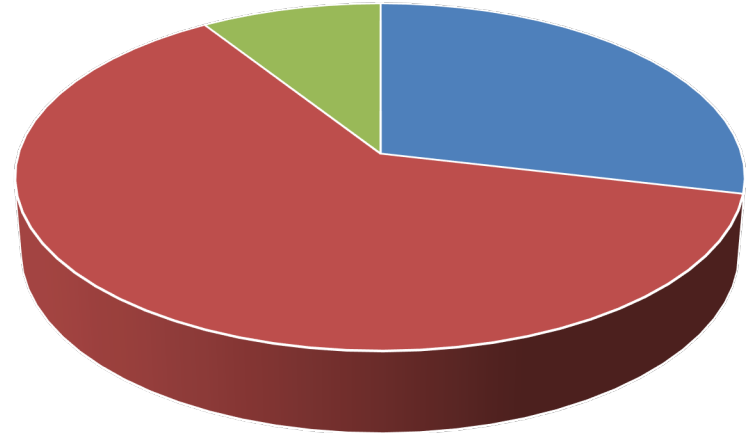
# Equality monitoring

## Respondents by age



- 16 or under
- 17-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75-84
- 84 or over
- Prefer not to say

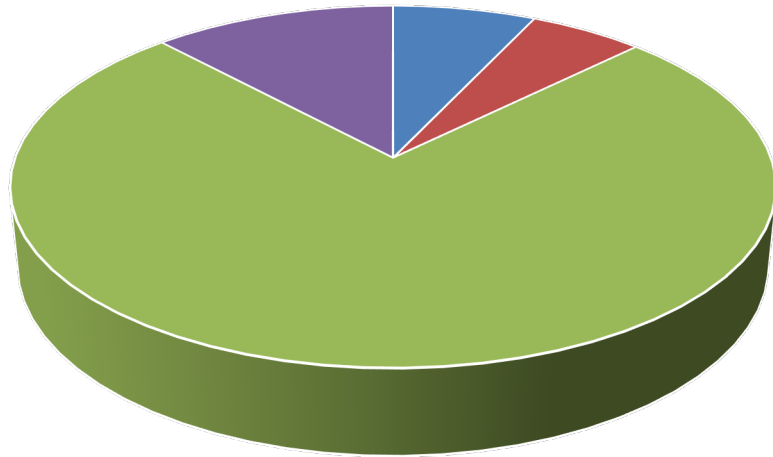
## Respondents by sex



- Male
- Female
- Prefer not to say

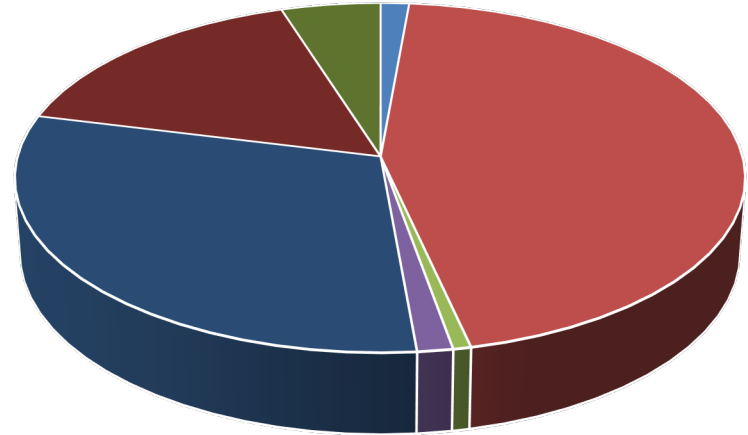
# Equality monitoring

## Respondents by sexual orientation



- Bisexual
- Heterosexual/straight
- Gay/lesbian
- Prefer not to say

## Respondents by religion



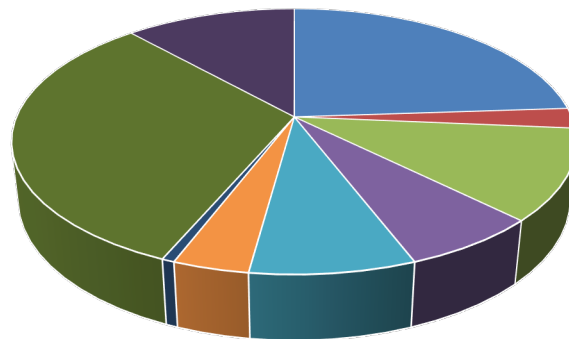
- Buddhism
- Christianity
- Hinduism
- Islam
- Judaism
- No religion
- Other
- Sikhism
- Prefer not to say

# Equality monitoring

## Respondents by ethnicity

Ethnicity	No.	Ethnicity	No.
Asian or Asian British - Indian	3	White Irish	3
Asian or Asian British - Pakistani	1	White other	3
Mixed Asian and White	1	Other - Arab	
Mixed Black Caribbean and White	1	Other	1
Mixed other	2	Prefer not to say	13
White British	115		

## Respondents by disability



- Long term illness / health condition
- Learning disability / difficulty
- Mental health
- Physical impairment
- Hearing impairment
- Visual impairment
- Multiple impairments
- Wheelchair user
- No disability
- Prefer not to say

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# Response to Healthwatch engagement

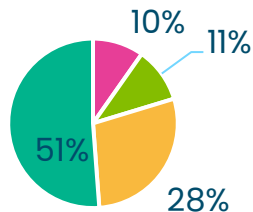


# ICP draft strategy engagement findings

# Total number of people engaged with

Healthwatch Together engaged with a total of **387** people, of which **297** completed an in-person questionnaire. **90** people chose to leave their feedback through 5 focus groups (facilitated by Healthwatch Blackpool).

## Our respondents



- Blackburn with Darwen
- South Cumbria
- Blackpool
- Lancashire

# Engagement events

Healthwatch Lancashire			
AgeUK Hub- Bolton le-sands	HARRI Bus- Burnley	Veterans in the community- Accrington	UCLAN Health Mele
Arndale Centre- Morecambe	Chill & Chat group- Rossendale Works	Leyland Self- advocacy group	Preston College
Fleetwood Library	Bacup Wellbeing group	Visually Impaired Forum	Preston Flag Market
St Johns Hospice	Pendle Yes Hub	Social Prescribing event- Leyland	University of the third age- Hesketh Bank
Accrington Market Hall	Padiham Community Café	Parbold Library	Skemersdale concourse
Skemersdale Library	Chorley Shopmobility	Lancashire User Forum Event	

Healthwatch Blackburn with Darwen	
Blackburn Foodbank	Darwen Health Event
Bangor Street Community Centre	Blackburn town centre

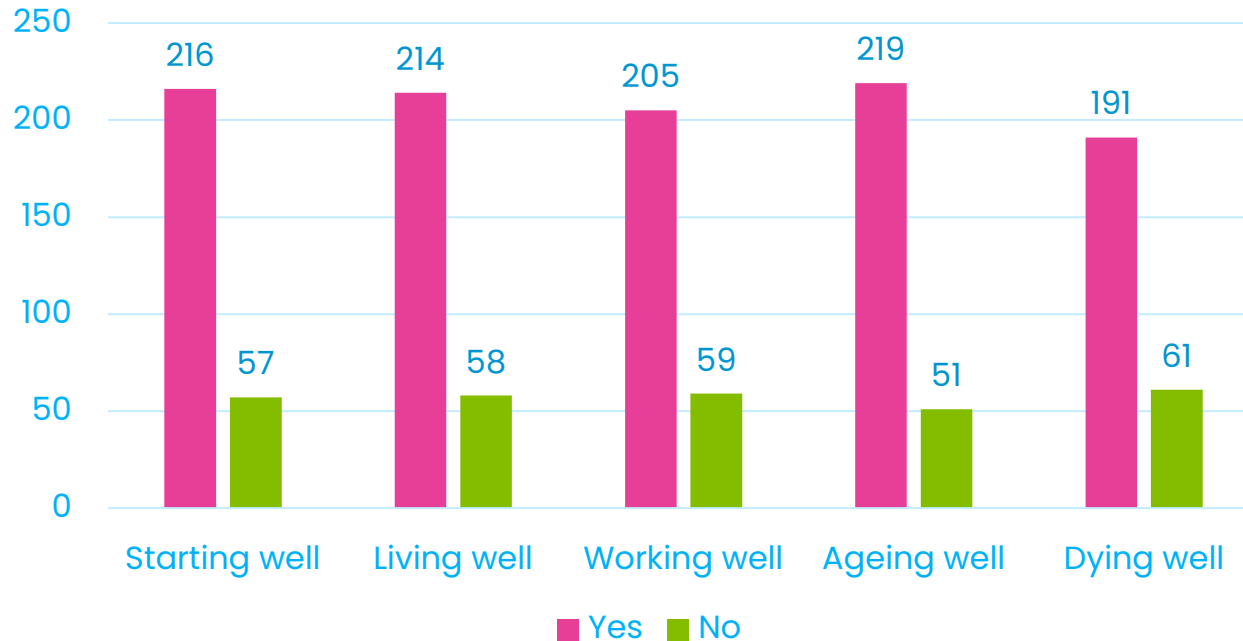


# Engagement events cont.

Healthwatch Cumbria	
Kendal Self- advocacy group	St Marys living well centre- Dementia drop-in- Barrow in Furness
HARRI Bus- Tesco Barrow in Furness	Hoops Basketball- Barrow in Furness

Healthwatch Blackpool	
Blackpool and Fylde college (4 focus groups)	The Village Hotel Blackpool
Winter Gardens – spring into spring event	Trinity Church – Dementia support group (focus group)

# Do you understand each of the priorities?



# Starting well

## Do you understand the priority?

- “Appears to be predominately aiming at the care sector. Do not think this is initially clear...”
- “What does targeted health mean?”
- “Sentence structure and punctuation poor”
- “No pictures”
- “Some local stats would be nice”
- “There is far too many words on this page- it makes me not want to read it, so I don't know how it is accessible to people”

## Additional comments:

- “Will this make it easier to access support for children e.g. CAMHS? This could be easier.”
- “The breastfeeding priority takes away choice. I don't like that.”
- “If people were to access services how would this link with things like social care? This needs to be clearer.”
- “There's a gap for support of 16-18 year olds.”
- “More involvement from independent services. The council always passes you from A to B.”

# Living well

## Do you understand the priority?

- “Useless words but overall easy to understand”
- “Mental health is a key priority.....I think it should have a category of its own”
- “I am a vulnerable service user with long term health conditions, living well is a priority for me”
- “Living well is a key priority- we need to support people with health conditions such as diabetes to live healthier lives”

## Additional comments:

- “There needs to be free school meals for all families. Some don’t get them in half term if you have two parents who work, they don’t qualify. Even though there is in work poverty.”
- “More involvement from independent services. The council always passes you from A to B.”

# Working well

## Do you understand the priority?

- “.....The idea is good it is just academic”
- “.....use punctuation to break up the sentences and make the information easier to understand”

## Additional comments:

- “I can't see anything for children with learning difficulties. They need support too into employment/ training.”
- “In care they promote looking after your wellbeing but don't act on it. They will ask me to do overtime and phone me when I am off with no concern for my wellbeing.”
- “More volunteer opportunities”

# Ageing well

## Do you understand the priority?

- “Make it less wordy”

## Additional comments:

- “They don’t listen to families especially dementia. A lot get put into wards that aren’t right or appropriate.”
- “What is classed as ageing? This needs to be more specific”
- “A lot of people haven’t got transportation. There’s so many things to go to but they can’t get there.”
- “Most old people want to remain in their own home. It is very difficult to get care. This is a very big issue.”

# Dying well

## Do you understand the priority?

- “Priorities are clear but dying is a difficult issue to talk about and pre-plan for”
- “...must be approached sensitively”
- “May want to rethink dying well as a talking point”
- “The wording needs changing”
- “This one has fewer words and may be accessible for some people”

## Additional comments:

- “I’m not keen on the wording – maybe something like ‘dying with dignity.’”
- “Being put in end-of-life care doesn’t always mean it is imminent. There is a spectrum, and it needs to be defined better and more person centred.”
- “They just give you a book on what to do next. It is a bit impersonal. I was handed it on the way out of intensive care when my dad died and just left with it. It was a bit inappropriate”

# How can the priorities be made easier to understand?

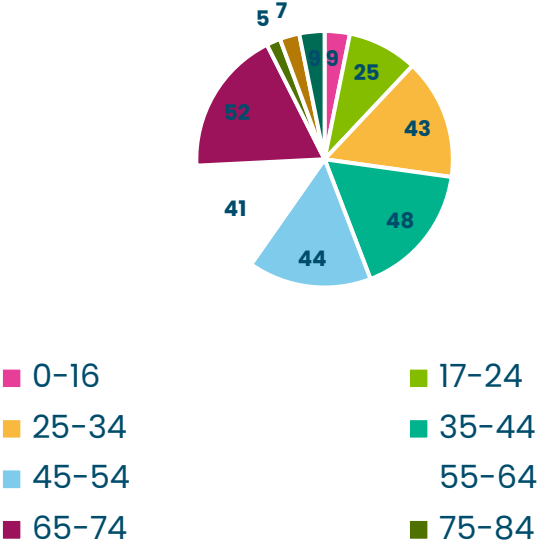
- Suggestions were made to make the document more accessible to people with disabilities/additional needs
  - Easy-read
  - Different coloured backgrounds for those with dyslexia
  - Video format for those visually impaired
- Use less jargon and clinical references. Use simpler words: comments made about the words 'inequalities', 'deprived', 'aspirations'
- Some priorities have more generalised key actions that can be interpreted and applied in multiple ways
- Include more diagrams and infographics
- Make the document in different languages, suggestion of Urdu given
- It is clear to read but hard to understand
- 'Too many details to take on board, I can't take it all in'



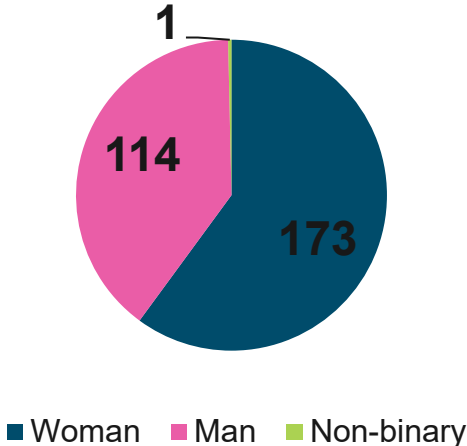


# Demographics

### Respondents by age



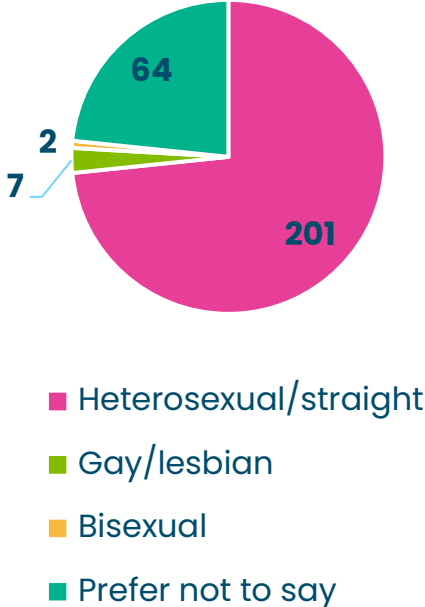
### Respondents by gender



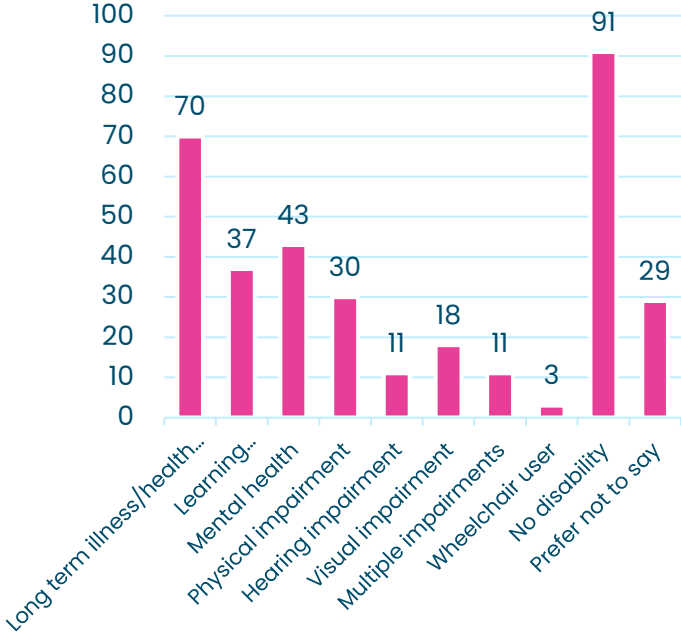
6 respondents shared that they have gone through (or intend to go through) a process to change from the sex described at birth, to the gender they identify with.

# Demographics

### Respondent by sexual orientation

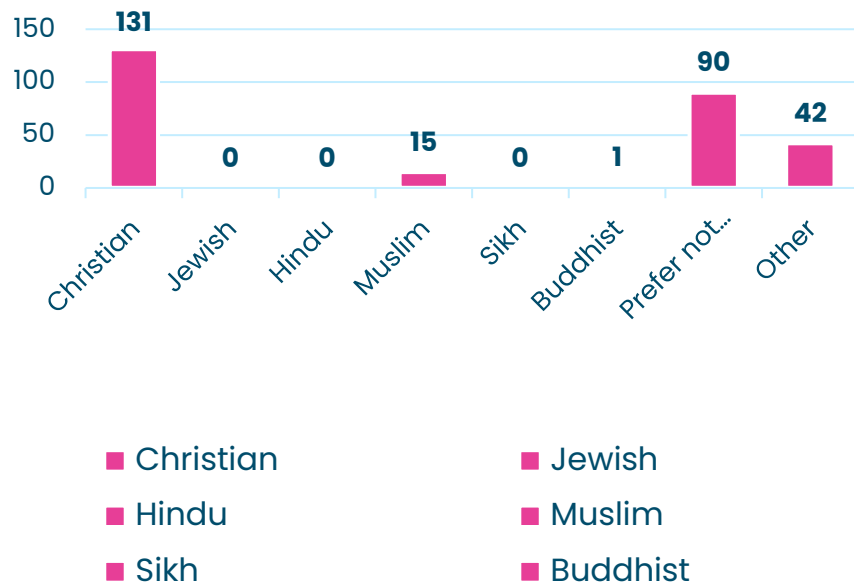


### Respondent by disability



# Demographics

## Respondent by religion/belief



Other comments included: No religion (32), Catholic (2), Agnostic (1)

## Respondent by ethnicity

Ethnicity	Number of respondents
White – British	246
White – Irish	3
White – Other	5
Asian or Asian British – Indian	5
Asian or Asian British – Pakistani	11
Asian or Asian British – Other	1
Black or Black British – Caribbean	1
Black or Black British – African	5
Mixed/Multiple – White and Black Caribbean	1
Mixed/Multiple – White and Black African	1
Mixed/Multiple – Other	5
Arab	1
Prefer not to say	2
Other	1

Other: African/Asian (1)



# Lancashire and South Cumbria

Integrated Care Partnership

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**Web** [healthierlsc.co.uk](http://healthierlsc.co.uk) | **Facebook** @HealthierLSC | **Twitter** @HealthierLSC

## ICP Engagement – Activity undertaken by District Councils

### South Ribble / Chorley

- Chorley and South Ribble Partnership
  - Progress Housing Group
  - Police
  - Fire
  - Runshaw College
  - BAE Systems ASK
  - Bridgedale PCN
  - CAB
  - DWP
- Schools Network
- Key
- Unify Credit Union
- Leyland PCN
- Ribble PCN
- Age Concern Central Lancashire
- Lancashire adult learning
- Atticus Partnership
- Youth Council (20th March) (South Ribble Only)
- Social Media Posts: LinkndIn, Facebook

### Hyndburn

- Social Media Posts

### Preston

- Food Network
- Employment Network
- Youth Forum
- IRG
- Marc – Emerging Communities
- Community Engagement Bulletin.
- Social Media

### Pendle

- Pendle's Health & Wellbeing Partnership
- People of Pendle
- Accent Housing (Housing Association)
- Alzheimer's Society
- Armed Forces Support Group
- Barrowford Surgery
- BPRCVS
- BPRCVS /Pendle East PCN
- BPRCVS/Pendle West PCN
- Calico Enterprise, Age of Opportunity
- Carers Link Lancashire

- Christian's Against Poverty
- Cloverleaf Advocacy
- Colne Citadel
- Colne Open Door
- Inspire Integrated Substance Misuse Service (CGL)
- Integrated Neighbourhood Team – Pendle East
- Integrated Neighbourhood Team – Pendle West
- Integrated Neighbourhood Team – Pendle East
- Lancashire Adult Learning
- Lancashire County Council – Adult Mental Health (mental Health Wellbeing team)
- Lancashire County Council- Community Projects
- LCC (Community Projects – Public Health)
- Lancashire County Council – Early Years Service
- Lancashire Mind
- Lancashire Shared Lives service
- Lancashire and South Cumbria ICB (Integrated Care Board) - NHS
- Population Health (Pennine)
- LSCFT Mental Health Prevention & Promotion Service – working as part of the Pendle East Health & Wellbeing Team
- New Era Enterprises Ltd
- Newground Together
- (PAC) Safespace and Hapi
- (PAC)Be Free
- Newground Together/Great Outdoors Team
- Pendle East Community Hub Colne Health Centre
- Pendle East Integrated Neighbourhood Team
- Pendle East PCN
- Pendle Food For All
- Pendle Food For All Food Clubs
- Pendle West PCN
- Pendle Leisure Trust & Sport England
- Pendle West District Nurses
- Ribble Rivers Trust
- Selnet: Building Better Opportunities Lancashire
- South Pennines Park
- TEAM RISE
- The Ernest Cook Trust
- Together an Active Pendle
- Volunteer, Community and Faith Sector Enabler (LCC Family Hubs)
- Burnley, Pendle and Rossendale CVS newsletter

## **Lancaster**

450 contacts, including:

- All Councillors
- Parish and Town Councils
- Community Centres
- Faith Groups
- Foodbank/Food clubs
- Community Groups/Organisations

- Police
- Fire & Rescue

### **Fylde**

- Social Media Posts

### **South Cumbria**

Barrow Borough Council assisted in sharing messages in South Cumbria

- Westmorland & Furness Director of Thriving Communities and the Assistant Director for Safer Stronger Communities
- Barrow Borough Council and #BrilliantBarrow socials
- Community Local Resilience Forum (Barrow)
- Barrow Borough Council Elected Members