

# ICB Public Involvement and Engagement Advisory Committee

Date of meeting	25 October 2023
Title of paper	Public and community insights report: August and September 2023
Presented by	David Rogers, Head of Communications and Engagement
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Agenda item	5b
Confidential	No

#### **Executive summary**

The report provides members of the ICB Public Involvement and Engagement Advisory Committee a summary of public and community insights captured by the ICB between 1 August and 30 September 2023. The report collates insights and trends from ICB communications and engagement activity, reports from completed engagement programmes and initiatives along with trends from ICB corporate channels such as complaints, social media and media handling. This is the sixth insight report and continues to be developed to improve the way information is presented and insight from partners included within the report based on feedback from committee members.

### Advise, Assure or Alert

**Assure** the committee:

- The ICB has methods and approaches to capture public and patient insight. **Advise** the committee:

- The feedback on the ICB strategy for working in partnership with people and communities has been approved taking into account feedback from the

#### 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
  - Note the insights captured from partner organisations as useful insight which the ICB can take into account when planning services

Wh	nich Strategic Objective/s does the report contribute to	Tick		
1	Improve quality, including safety, clinical outcomes, and patient	$\checkmark$		
	experience			
2	To equalise opportunities and clinical outcomes across the area	✓		
3	3 Make working in Lancashire and South Cumbria an attractive and			
	desirable option for existing and potential employees			
4	Meet financial targets and deliver improved productivity	$\checkmark$		
5	Meet national and locally determined performance standards and targets	✓		
6	To develop and implement ambitious, deliverable strategies	$\checkmark$		

Implications				
	Yes	No	N/A	Comments
Associated risks			$\checkmark$	
Are associated risks	✓			
detailed on the ICB Risk				
Register?				
Financial Implications			$\checkmark$	
Where paper has been disc	cusse	d (list )	other c	ommittees/forums that have
discussed this paper)				
Meeting	Date			Outcomes
Conflicts of interest associ	iated v	vith th	his rep	ort
Not applicable				
Impact assessments	1	1		
	Yes	No	N/A	Comments
Quality impact assessment			<ul><li>✓</li></ul>	
completed				
completed Equality impact			✓ ✓	
completed				
completed Equality impact				

Report authorised by:	Neil Greaves, Director of Communications and
	Engagement

## Public and community insights report August - September 2023

#### 1. Introduction

The report provides members of the ICB Public Involvement and Engagement Advisory Committee (PIEAC) a summary of public and community insights captured by the ICB between August and September 2023.

The report collates insights and trends from ICB communications and engagement activity, reports from completed engagement programmes and initiatives along with trends from ICB corporate channels such as complaints, Patient Advice and Liaison Service (PALS), Freedom of Information requests and MP enquiries.

The report format continues to be developed to improve the way information is presented. Community and public insight from partners.

The relationship with the ICB Quality Committee is also important as this committee 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. However, it has been agreed that between the two committees, the Public Involvement and Engagement Advisory Committee will take the lead in providing assurance on the insights report.

#### 2. Executive summary: headline trends and key themes

- There are clear trends across a range of channels for topics of enquiries and requests that continue to be received by the ICB around primary care, urgent and emergency care, continuing healthcare and dentistry continue to be a focus of interest and concern.
- Insight across engagement also tells us that members of the public want to see quality of services improve, good access to services, their voices to be heard and want to see programmes of improvement being delivered and demonstrated.
- There is a great deal of interest in the ICB's engagement activity and this means that there is a continuing focus on delivery of engagement activity and a pressure for communications and engagement team members to assure the public of the numbers of activities and opportunities to be heard.
- An analysis of the data highlights that people and communities are understandably most interested in what matters to and what affects them. Examples of this include primary care (Withnell, and Haverthwaite GP practices), access to specific services and there is a growing interest in place-based partnerships – which are beginning to attract more attention.
- Proactive communication activities are driving increased traffic and conversations across ICB online channels (including the website and social media) in areas relating to children and young people's mental health and elective care services. The majority of the feedback is positive or neutral in sentiment.

#### 3. Insight from ICB organisation channels

#### 3.1 Patient Experience

This report captures the activity of the ICB Patient Experience service for August and September 2023. This is made up of complaints, PALS enquiries and MP correspondence.

The complaints included in this report are those handled in accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 where

the ICB is treated as the 'Responsible Body'. They are a combination of complaints about the actions and omissions of the ICB itself and our commissioned providers.

Letters from MPs are made up of complaints from constituents, other queries raised by constituents but not handled as complaints and correspondence from MPs themselves typically about funding or strategy or other local health and care topics.

The Patient Advice and Liaison service (PALS) is the 'front door' to the complaints team and resolves concerns quickly and informally where possible. Our PALS staff also provide information and advice to patients and their families.

The ICB Patient Experience team has been reporting to PIEAC from the outset. This section has been revised and can be further adapted depending on the views of the Committee. This report includes:

- The numbers of new contacts by type and comparisons to previous months.
- A summary of the type of complaints received and details of MP activity.
- Analysis of trends and themes emerging from the cases dealt with.
- Examples of learning.

The information for this report was extracted on 10 October 2023.

#### Activity in 2022/23 and 2023/24

The table below records the number of contacts by type for each two-month period over the last year. This information is extracted from the 'Ulysses' case management system.

Туре	October- November 2022	December 2022– January 2023	February – March 2023	April – May 2023	June – July 2023	August – September 2023	Change from last period
Complaint	90	77	81	73	142	284	+142
MP Letter	36	42	41	59	61	51	-10
PALS Enquiry	157	113	156	126	255	317	+62

We closed 236 cases during these two months comprised of 183 complaints and 53 MP letters. This is a substantial increase on the last period when we closed 130. However, we opened more records than we closed which means the overall stock of cases continues to rise. At the last committee, we reported 287 open records. When the data for this report was extracted, this had risen to 416 (306 Complaints, 71 MP cases and 39 PALS).

#### 3.2 Complaints

We received 284 complaints in August and September 2023. This is exactly twice the number we received in June and July and almost four times the level we received in April and May. This is predominantly due to the transfer of Primary Care complaints from NHSE on 1 July 2023. During the first year of the ICB, we handled 498 complaints from patients (41 per month). For the period July to September there were 386 (129 per month). The trend is upward with fully 171 being received in September 2023.

The complaints we handle can be broken down into four categories as set out below. We first reported this to the June 2023 meeting of PIEAC and those numbers are included to allow comparison. This again demonstrates the significant increase in the Primary Care category.

Reporting Period	ICB	All-Age Continuing Care	Secondary Care Provider	Primary Care
April - May 2023	12	10	45	6
June – July 2023	17	16	50	59
August – September 2023	23	12	62	187

Primary care complaints are mostly about General Practice (101) and Dentistry (86). Dentistry complaints are centred on access to NHS providers whereas General Practice complaints are across the breadth of activity.

There were no new Parliamentary and Health Service Ombudsman (PHSO) contacts during this period. We have no PHSO cases open.

#### 3.3 MP Correspondence

During this period, we received a total of 51 letters. This is a reduction from the last period but in line with previous totals. Letters covered a wide range of topics but there was a particular concentration of correspondence about access to NHS dentists. The two most active MPs were from the two Cumbrian constituencies, Simon Fell (Barrow and Furness) with 11 and Tim Farron (Westmorland and Lonsdale) with seven.

#### 3.4 PALS enquiries

There was a significant increase in PALS activity during August and September with 317 enquiries. We had been receiving an average of 69 enquiries a month prior to July 2023. This has now grown to 163 for the period July to September.

#### 3.5 Learning from complaints

When any element of a complaint is fully or partially upheld, we identify learning and include it in our response. This could be additional actions to resolve individual complaints or broader service improvements. These examples could be about LSC ICB or a commissioned provider. More work is planned in 2023/24 to ensure learning is embedded and leads to tangible change. Examples of learning from this period are:

'You said'	'We did'
My mother-in-law was discharged from hospital to a nursing home on a Discharge to Assess (D2A) pathway. I have serious concerns about a breakdown in communication between the hospital and the provider, which resulted in them not having access to vital information about nursing and care needs.	The ICB recognises many areas of the system are under pressure, but we have prioritised D2A as an area to improve. We plan to make changes to D2A process to promote consistency across the Lancashire and South Cumbria health and care system and ensure a person-centred approach is being used. We are establishing a dedicated ICB D2A team to address the issues which have been highlighted in your complaint. We have also reiterated the importance of communication between the accepting provider and the discharging ward. The dedicated D2A team will now allocate a health professional on discharge who will stay in place until a patient's CHC eligibility

I am prescribed Ozempic to control my diabetes and it works for me. I haven't been able to get the injections for weeks now. Can you help me get this drug? If not, are there any alternatives that could be used?	is determined. This will enable the team to closely monitor patients during the discharge process and to become aware of any issues more quickly through a proactive end to end service. The ICB are aware of the shortages of Ozempic and have been informed that this is a national issue, which unfortunately is unlikely to be resolved for the foreseeable future. We have notified GP practices of the shortage through the GP newsletter, which also included a link to the Medicines Supply Notification. This provided specific recommendations for practices to follow when managing patients who are currently prescribed Ozempic and set out information on the alternative medications available. Following your email, we arranged for this to be shared to GP practices again to make sure that they are aware of the shortage and to ensure they have appropriate support when choosing suitable replacement medication for their patients.
Why was there a long delay in ratifying my mum's Continuing Healthcare eligibility and then sending out the decision.	Due to a lack of capacity in the service, there have been considerable delays. This is being addressed with a significant increase in budget to enhance staffing levels.

#### 3.6 Freedom of information requests

Freedom of Information (FOI) requests are a useful source of intelligence and therefore this report presents the number of FOIs received. This report does not present the key themes and topics which have been captured – this will be reviewed and included in the next report to the committee.

Month	No. Received
April 2023	35
May 2023	32
June 2023	28
July	30
August	49
September	33

During this period, the majority of cases have been received from members of the general public followed by the commercial sector.

ICB FOI	No Requests Open	Total Inc Place	Total cases closed
(Aug – Sept)	82	656	50

#### 3.7 Media interest and response

The ICB communications and engagement team manages media interest and enquiries along with coordinating partnership activity across NHS organisations. The team has a role to encourage the media to broadcast and print key messages in a way which influences the public.

	enquiries				Broadcast interviews
August	14	5	0	4	2
September	32	12	2	10	6

We are receiving a number of press enquiries from the press releases we issue which shows we're sharing the right type of content which attracts the interest of journalists and the public. Many of our broadcast interview requests are in response to industrial action and we are continuing to put spokespeople forward and work closely with the hospital trusts to ensure our messages are aligned.

Other areas of focus for September included COVID-19 vaccination campaign, World Suicide Prevention Day and responses to primary care related enquiries such as Withnell Health Centre and Haverthwaite Surgery.

#### 3.8 Online and social engagement

The ICB communications and engagement team manages social media accounts for the ICB.

#### Monthly combined data summary:

Combined following of ICB accounts: 44,400					
All a	ccounts:	ICB	accounts:	•	80.2% female and 19.8% male
٠	Facebook: 35,049 ↑ 353	٠	Facebook: 2261 ↑ 174		engagement
•	Twitter: 7,907 ↑ 215	•	Twitter: 1830 ↑ 119	•	2,045 total link clicks
٠	LinkedIn: 943 ↑ 131	•	LinkedIn: 943 ↑ 87	•	394 posts with a combined post
٠	Instagram: 501 ↑ 53	•	Instagram: 501 ↑ 32		reach of 5,355 (this doesn't included
•	YouTube: 73 ↑ 13	•	YouTube: 73 ↑ 13		Twitter as the data isn't available).
	,		1	•	1,076 inbound engagements.

\*This figure won't be truly accurate as some followers may follow several of our accounts

#### Most popular posts on social media

Clicks Likes Shares Reach
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1	Water supply – Lytham Primary Care Centre	<u>Best nurse / doctor</u> winners	1,800 COVID vaccines	1,800 COVID vaccines
2	1,800 COVID vaccines (Facebook ICB)			<u>ChatBot queries</u> (Facebook ICB)
3		(Instagram ICB)	Water supply – Lytham Primary Care Centre (Facebook ICB)	ICON week (Facebook ICB)

The data above suggests, as with previous months, and reports to PIEAC, that the most engaging social media content is local news and local updates which potentially have a direct impact on local people – for example the local water issue in Lytham. Of particular interest are the launch of the COVID vaccination programme and ICON week (a week highlighting the dangers of shaking babies).

#### Facebook

Metric	Jul	Aug	Sep
Followers	2,087	2,107	2,261
Total posts	68	60	85
Post impressions	22,811	14,919	40,154
Post reach	21,625	14,181	38,140
Link clicks	208	157	716
Post engagement	1.93%	1.98%	2.64%

#### Twitter

Metric	Jul	Aug	Sep
Followers	1,711	1,783	1,830
Total posts	65	58	86
Post impressions	60,350	25,641	33,974
Post reach	N/A	N/A	N/A
Link clicks	586	187	325
Post engagement	1.87%	1.26%	1.92%

#### Instagram

Metric	Jul	Aug	Sep
Followers	469	483	501
Total posts	25	34	47
Post impressions	2,003	2,606	3,906
Post reach	2,204	2,533	4,018
Link clicks	N/A	N/A	N/A
Post engagement	2.3%	1.23%	1.18%

LinkedIn				
Metric	Jul	Aug	Sep	

Followers	856	887	943
Total posts	8	5	9
Post impressions	2,308	1,020	3,568
Post reach	1,542		2,320
Link clicks	57	36	271
Post engagement	4.94%	6.37%	8.91%

# ICB and Lancashire and South Cumbria Integrated Care Partnership website statistics

The ICB communications and engagement team manages the ICB website, as well as hosting and supporting the development of the Provider Collaborative, Integrated Care Partnership, and New Hospitals Programme websites.

	New users	Page views	Engaged sessions
July	24,367	75,505	37,410
August	24,536	72,525	37,436
September	39,616	93,652	57,762

#### Most popular web pages

Top five viewed web pages (not including homepages). The pages in italics denote either a paid for campaign or areas of communications focus – particularly via social media.

August	September		
<ul> <li>ChatBot: Waiting lists</li> <li>CYP: Information for children and young people</li> <li>ICB: Contact us</li> <li>ICB: What is an integrated care board?</li> <li>ICB: General enquiries</li> </ul>	<ul> <li>ChatBot: Waiting lists</li> <li>Fylde Coast winter vaccines bus</li> <li>CYP: Information for children and young people</li> <li>NHS Talking Therapies</li> <li>Orange Button community scheme</li> </ul>		

#### **Cabinet Office Accessibility Audit**

Website accessibility regulations came into force on 23 September 2018. The regulations mean that public sector bodies now have a legal obligation to meet accessibility requirements for their websites. To check how well the public sector are meeting the requirements, the Government Digital Service (part of the Cabinet Office) has been monitoring a sample of public sector websites. In August, a report on Lancashire and South Cumbria Integrated Care Partnership website (<u>https://lscintegratedcare.co.uk</u>) was published. The report (<u>published online here</u>) details which parts of the website were audited for accessibility, how those pages were audited and listed issues and remedial actions to take place. The audit picked up on a few technical issues with parts of the website. These issues have now been resolved and a reaudit has been requested. These improvements are in place across all ICB hosted websites.

#### 4. Survey responses

The number of surveys with members of the public that we are managing has been relatively consistent over recent months. The responses received continue to fluctuate from month to month, depending on the subjects being surveyed and where we are in the engagement cycle on any subject. This is both an indication of the specialist nature of most of the surveys that we have been undertaking, and that the number of 'big ticket' surveys, such as COVID-19 vaccines, and the New Hospitals Programme are less prevalent.

Overall, we have received 22,215 responses to our surveys over this last 11 months, which equates to approximately 1.2% of the population of Lancashire and South Cumbria.

	Number of live public Total number of response		
	surveys	-	
September	12	14,953	
October	13	2,428	
November	14	948	
December	11	356	
January	14	98	
February	16	115	
March	16	717	
April	13	149	
Мау	18	1,176	
June	18	952	
July	17	323	
August	19	1,510	
September	20	2,537	
Running total of responses		26,262	

The survey with the highest number of responses in August was the Haverthwaite GP practice survey, with a total of 1,175 responses. The responses were incorporated into a report which has been considered by the Primary Care Commissioning Committee. The survey with the highest number of responses in September was the Withnell Health Centre survey, which in September had a total of 2,103 responses, but at the time of writing has surpassed this.

The main survey subject areas in August were:

- Travel and transport
- Citizens' Panel monthly check-in
- Haverthwaite Surgery
- Withnell Health Centre
- Pendle View Medical Centre
- Place virtual ward experience survey

The main survey subject areas in September were:

- ICB Annual General Meeting 2023
- Citizens' Panel Monthly check-in
- Haverthwaite Surgery
- Withnell Health Centre
- Frailty
- Place virtual ward experience

#### 5. Citizen's Panel

The Citizen's Panel is a cohort of members of the public from across Lancashire and South Cumbria who have agreed to receive regular emails and take part in NHS engagement (ostensibly surveys and focus groups), research and provide feedback.

The total membership at the end of September was: 1,360.

The items in the citizen panel newsletters include surveys or opportunities to feedback which contribute to engagement initiatives as described in the survey responses section of the report above.

Popular (% of total clicks) stories in last newsletter (September):

- Monthly check-in survey 26%
- Moderate frailty survey 24%
- Haverthwaite surgery update 13%
- Lancs and South Cumbria New Hospital Programme roadshow 9%
- July check in findings 4%

Popular (% of total clicks) stories in last newsletter (August):

- Monthly check in 32%
- Flu and covid winter vaccinations 16%
- Urology cancer services 10%
- September snapshot findings 7%
- Lancaster medical branch closure 5%

Engagement with the monthly Citizen Panel bulletin:

	April 23	May 23	June 23	July 23	Aug 23	Sept 23
Total recipients of the bulletin	1,304	1,303	1,290	1,292	1,291	1,289
Email opens	757	747	733	640	770	736
Open rate (%)	58%	57%	56%	49.5%	59%	57%
Total clicks	109	123	121	186	172	163

# 6. Reports, insights and outcomes from engagement activity – including recommendations and action

This section of the report summarises outcomes and insights from completed engagement programmes and initiatives.

Report name	Description and key findings	Next steps / Actions
BwD Place – Neighbourhood Survey	<ul> <li>A neighbourhood review, initially via an online survey, has commenced with teams and partner organisations. The aim of the review is to: <ul> <li>Assess ambitions for integrated neighbourhood working.</li> <li>Identify and agree what works well with regards to current service delivery arrangements and what could be improved.</li> <li>Define and agree support requirements.</li> </ul></li></ul>	An engagement plan is in development to conduct stakeholder discussions/focus groups and public engagement facilitated by external Local Government Association (LGA) colleagues. This phase of the neighbourhood review will focus on current delivery and its perceived effectiveness.
	<ul> <li>The online survey was part of phase one of the neighbourhood review and intended to explore stakeholders' ambitions for integrated neighbourhood working. Respondents were therefore asked to outlined: <ol> <li>what their ambitions are for primary care neighbourhoods in Blackburn with Darwen</li> <li>what they think system leaders need to do in order for these ambitions to be achieved</li> <li>which services they think should be included within integrated neighbourhood teams (INTs)</li> <li>if there are any functions/services currently missing from the INTs</li> <li>the impact that this way of working should have for local residents</li> <li>how well the ambitions for Blackburn with Darwen align to national ambitions</li> <li>three words summing up what integrated working means for them</li> <li>what they like about integrated neighbourhood working that should continue (or do more of)</li> </ol> </li> </ul>	
	Phase two of the review will be to undertake further stakeholder discussions/focus groups and include public engagement.	
	There were 70 responses to the survey.	
	There are 23 recommendations outlined within the report which are highlighted for consideration as part of our commitment to evolve integrated working in Blackburn with Darwen. These recommendations will form part of the final neighbourhood review report which will be presented to the Blackburn with Darwen Place-based Partnership Board	

	<ul> <li>for consideration in November. The general themes of the recommendations emerging from the ambitions survey are as follows:</li> <li>Continue to build on the existing good work and passion for integration</li> <li>Clearly communicate roles and functions of Primary Care Neighbourhoods (PCNs) and Integrated Neighbourhood Teams (INTs) as an outcome of the review</li> <li>Strengthen connectivity with children's services including early years, education and social care</li> <li>Strengthen connectivity with wider "social" support services including housing support, financial advice, drugs and alcohol support, etc.</li> <li>Strengthen engagement and co-production with residents and service users as a core function of PCNs and INTs</li> <li>Further develop a culture of collaboration and empowerment across our neighbourhood workforce</li> <li>Undertake a more detailed desktop review of wider national ambitions for neighbourhood working to identify any disconnect with our proposed direction of travel.</li> </ul>	
Haverthwaite Surgery	<ul> <li>Haverthwaite Surgery in Backbarrow is a GP practice which serves a small rural community and dispenses medicines. Due to issues regarding a lease on the premises an engagement exercise was quickly undertaken. The detail of the engagement approach is included in the engagement assurance report.</li> <li>The survey ran for a month, from 21 August 2023 to 21 September 2023, and received a total of 1,323 completed responses. Haverthwaite Surgery has a list size of around 2,800, so the survey had a response rate of more than 47%. In the context of national surveys, this is an exceptionally high response rate. The key findings were:</li> <li>Almost half of the registered patients at Haverthwaite Surgery have provided comments during the public engagement exercise regarding the practice's current and future location.</li> <li>Those who have taken part have made it clear that the service is extremely highly valued within the local area and that any loss of</li> </ul>	The patient engagement insights contributed to a decision by the Primary Care Commissioning Committee on the 12 October. For information about the decision visit https://www.lancashireandsouthcumbria.icb.nhs.uk/about-us/pccc-1/meetings-and-papers/upcoming-meetings/12-october-2023-primary-care-commissioning

	<ul> <li>primary care services in this rural location will be detrimental to many people locally.</li> <li>The services and staff at the surgery are highly rated and patients value this more than the bricks and mortar surroundings of the building those services are provided from.</li> <li>Many respondents accepted that the current surgery building is not in an ideal state for the delivery of modern day primary health care services and accepted that refurbishment works were needed or a new facility developed nearby.</li> <li>The full engagement report is available here: <a href="https://www.healthierlsc.co.uk/download_file/9006/0">https://www.healthierlsc.co.uk/download_file/9006/0</a></li> </ul>	
Frailty	A survey sent to the ICB's Citizen's Panel to capture their views on what is meant by the term frailty and the kind of needs and support this entailed received a reasonably good level of responses. Overall, there was a high degree of commonality around what people understood by the term frailty, with a significant proportion of respondents agreeing with the example the ICB provided or with large elements of it. Taking all the responses into account, frailty was felt to encompass people with multiple health conditions, who have difficulty performing day-to-day activities or are unable to look after themselves, have reduced mobility and may be elderly or vulnerable and are at risk of falls or accidents. Two-thirds of respondents felt they had experience of frailty, and this included support with housework/daily living; shopping and appointments; mobility; medication and physiotherapy; and with the associated finance and paperwork. It was also highlighted that some people have little or no support and that for some, even the simplest of things can impact on someone who is frail and, if not done, can lead to problems or even hospitalisation. Although seen with some negativity, the use of the term frail/frailty was supported by a good proportion of respondents and there was little cohesion around using an alternative word or phrase.	The report will be considered by the Action on Frailty Group chaired by Dr John Miles and will be considered at a workshop in October as part of "Engineering Better Care". Discovery interview methodology is also being considered, along with a wider survey of the population. PIEAC members are advised that frailty, which is considerable focus as we move into the winter months, would be an ideal subject for a deep dive at a future meeting, perhaps December or early in 2023.

When considering the specific needs of people who are frail respondents emphasised the need for staff to listen to and treat people who are frail, and their family and carers, with respect and honesty. Staff need to be adequately trained to deal with the issues that arise in the community. Concern was also expressed about not understanding the nature or level of support provided by families, which can hinder the continuation of care and make it more inaccessible. In essence, respondents were indicating that, in the community, lives do not fit neatly into a clinical model. Mention was also made of the need to provide support to carers, without whom an even greater burden would fall on the health and care system.
he full insight report is available here: https://www.healthierlsc.co.uk/download_file/9004/0

## 7. Published reports with patient and public insight from partner organisations

Report name and organisation	Description and key findings	Next steps / Actions
Healthwatch Blackburn with Darwen: Priority wards engagement	The aim of this work was to carry out engagement with communities living in the priority wards to understand what matters to them and the barriers to accessing healthcare including potential reasons for higher urgent and emergency admissions. Whilst there are many differences between the wards, and indeed within the wards, there are emerging themes which are common across many areas, these include: • Diagnosis and management of common conditions, there are some differences across the wards about which are most prevalent but the conditions below are common across all areas: • Hypertension • Respiratory conditions	The findings are influencing the development at place in Blackburn with Darwen and have directly influenced the winter communication and engagement plan which seeks to engage with people living in 10 of the 11 priority wards as agreed with population health colleagues and place based leaders.

	<ul> <li>Depression</li> <li>Literacy, and specifically health literacy and digital literacy.</li> <li>Lack of support for living healthy lives – including access to healthy food</li> <li>Lack of support for those living with frailty, some areas seem to have had some success in identifying and agreeing care plans for those living with frailty but in other areas this is not as evident</li> <li>Sense of community and the degree to which parts of the community may feel isolated (for a variety of reasons – age, culture, transport etc)</li> <li>Read the full report: Priority-Wards-Engagement-Report.pdf (healthwatchblackburnwithdarwen.co.uk)</li> </ul>	
Healthwatch Blackburn with Darwen: Child poverty	Blackburn with Darwen Public Health team are developing a child poverty strategy to mitigate the impact of poverty and working with organisations to reduce the barriers that children, young people and families who live in poverty may experience. Young people's views and experiences of child poverty are pivotal to shaping the borough's strategy therefore Healthwatch Blackburn with Darwen undertook engagement with young people across June 2023 to gather their views.	Blackburn with Darwen Public Health, the implications and insights are being considered at place and across the system.
	Read the full report: <u>Child-Poverty-Report-young-peoples-views.pdf</u> (healthwatchblackburnwithdarwen.co.uk)	
Healthwatch Blackpool: Our Coastal Town: Local Perspectives on Unplanned	<ul> <li>A project, commissioned by the Population Health Team at Lancashire Integrated Care Board, aims to understand why these Priority Wards in Blackpool have a high number of unplanned hospitalisations.</li> <li>Overarching recommendations:         <ul> <li>Embedding door knocking within the community</li> <li>Make community involvement a priority for healthcare providers:</li> </ul> </li> </ul>	Blackpool Healthwatch will continue working with population health and the ICB place leadership to ensure the findings and recommendations are considered and acted upon
Hospital Admissions	<ul> <li>Improvements to appointment availability in primary care:</li> <li>Importance of long term condition management</li> <li>Every contact counts</li> <li>Empowering individuals to understand and prioritise own health</li> </ul>	

	Cost of living support	
	Read the full report: <u>Engaging on Blackpool doorsteps – the Blackpool</u> community voice Healthwatch Blackpool	
Wellness: An investigation into people's experiences and the accessibility of	mental health during 2022/23. Particularly, the long waiting lists people were experiencing when accessing mental health support. In response, 'Waiting for Wellness' was set up to explore people's experiences of mental health in Lancashire. There was a particular focus on the waiting times of those accessing mental health support and whether people were	These findings have informed a series of recommendations for service providers. This report includes provider responses with their plans for the future to aim to improve mental health services in Lancashire. The ICB has contributed a response to the report.
Healthwatch Lancashire:	In winter 2021, Healthwatch Together completed face to face engagements in Emergency Departments, Walk-in Centres and Urgent Treatment Centres to investigate patient experience and presentation.	This report has been shared with the urgent care team and has informed the winter communication and engagement planning for ICB.

	These findings were presented to Lancashire and South Cumbria Health and Care Partnership to assist them with emergency care winter planning.	
	One year on, Healthwatch Together has revisited this project and further engaged with people in Emergency Departments, Walk-in Centres and Urgent Treatment Centres. Findings have been analysed to investigate whether the recommendations made in 2021 have been implemented and whether they have made an impact on patient experience and presentation.	
	Healthwatch Lancashire engaged with 52 people across Central and West Lancashire between November 2022 and March 2023. Patients were asked for their reason for seeking emergency care, as well as their awareness of other available services. Themes emerged surrounding accessibility of GP appointments and a lack of awareness of the NHS 111 service. A reflection on the recommendations made in 2021 have also been made. Read the full report: <u>Guidance (healthwatchlancashire.co.uk)</u>	
Westmorelan d and Furness Healthwatch – Emergency Care – one	In 2021, Healthwatch Together completed face to face engagements in Emergency Departments, Walk-in Centres and urgent Treatment Centres at 17 sites across Lancashire and South Cumbria. The aim was to support Lancashire and South Cumbria Health and Care Partnership with winter planning, messaging and communication. Recommendations were made to the partnership based on our findings and one year later, Healthwatch staff revisited Barrow Hospital's Emergency Department to follow-up, this report reveals the findings: <u>Guidance (healthwatchwestfurn.co.uk)</u>	This report has been shared with the urgent care team and place leaders at Lancashire and South Cumbria Integrated Care Board for consideration and dissemination. The report will also be sent to Healthwatch England. The findings will be considered as part of the winter communication and engagement strategy, planning and delivery.

<ul> <li>Healthwatch Cumberland and Healthwatch Westmorland &amp; Furness. The project was designed to allow us to hear what matters most to local residents so that we could address the key issues in our upcoming projects. It is all part of our continued efforts to keep the public involved in everything we do and tackle the subjects that really matter to them. Therefore, we wanted to find out what residents' love about their area and what they would like to change about it, as well as what works about services locally and what needs improvement. This report correlates our findings:</li> <li>People like living in their areas mainly because they have a nice friendly community</li> <li>Many liked that they lived somewhere rural and close to big green spaces · Lack of public transport was an issue for many</li> <li>Spaces/services for young people need improvement in the local areas · Town centres are struggling due to lack of shops</li> <li>It was mentioned that there are issues with getting a GP appointment · Difficulty with getting a dental appointments or accessing any dental care</li> <li>Accessing mental health services is difficult</li> <li>Staff recruitment in social care is a problem</li> <li>Social care can cost a lot of money for family members</li> </ul>	leaders and with ICB commissioners, as well as with the engagement team for further insight. With the appointment of the South Cumbria engagement coordinator, we anticipate that this will be a focus for her.
We are delighted to receive Lancashire and South Cumbria Youth Voices' 2022-23 Annual Report. Members will recall that the Chair, Ben Wilson-Mayor contributed to our programme of lived experience telling his story of eating disorders and health care at the ICB and with the Quality Committee. Over the past twelve months. Youth Voices have been involved in a	We are continuing to build relationships and work with Lancashire and South Cumbria Youth Voices.
	<ul> <li>The project was designed to allow us to hear what matters most to local residents so that we could address the key issues in our upcoming projects. It is all part of our continued efforts to keep the public involved in everything we do and tackle the subjects that really matter to them. Therefore, we wanted to find out what residents' love about their area and what they would like to change about it, as well as what works about services locally and what needs improvement. This report correlates our findings: <ul> <li>People like living in their areas mainly because they have a nice friendly community</li> <li>Many liked that they lived somewhere rural and close to big green spaces · Lack of public transport was an issue for many</li> <li>Spaces/services for young people need improvement in the local areas · Town centres are struggling due to lack of shops</li> <li>It was mentioned that there are issues with getting a GP appointment · Difficulty with getting a dental appointments or accessing any dental care</li> <li>Accessing mental health services is difficult</li> <li>Staff recruitment in social care is a problem</li> <li>Social care can cost a lot of money for family members</li> </ul> </li> <li>Read the full report: Here 4 You Report - Healthwatch Westmorland and Furness (healthwatchwestfurn.co.uk)</li> <li>We are delighted to receive Lancashire and South Cumbria Youth Voices' 2022-23 Annual Report. Members will recall that the Chair, Ben Wilson-Mayor contributed to our programme of lived experience telling his story of eating disorders and health care at the ICB and with</li> </ul>

https://www.lscft.nhs.uk/get-involved/youth-voices/youth-voices-
annual-report-2022-2023

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