

ICB Public Involvement and Engagement Advisory Committee

Date of meeting	12 December 2023
Title of paper	Public engagement and involvement assurance report: October to November 2023
Presented by	David Rogers, Head of Communications and Engagement
Author	David Rogers, Head of Communications and Engagement Communications and engagement team members
Agenda item	5a
Confidential	No

Executive summary

The report provides members of the Public Involvement and Engagement Advisory Committee (PIEAC) a summary of activities related to engagement, involvement and coproduction undertaken by the ICB and with partners between 1st October to 30th November 2023.

This report seeks to provide assurance to the committee and the ICB Board for the delivery against the strategy for working in partnership with people and communities across the ICB and embedding the principles of public involvement and engagement.

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

Advise, Assure or Alert

Assure the committee:

- The ICB is delivering activity across a range of programmes and initiatives to involve and engage members of public, patients, communities, staff, carers and wider partners.

Recommendations

The Public Involvement and Engagement Advisory Committee is asked to:

- Note the contents and summary of insights contained in the report
- Recognise and endorse the engagement and involvement activity undertaken across the ICB and the learning being embedded
- Note the forward view of upcoming engagement, involvement and co-production activities for the next period

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

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

Implications

	Yes	No	N/A	Comments
Associated risks	✓			
Are associated risks detailed on the ICB Risk Register?	✓			There is a risk proposed for this in another item on the committee agenda.
Financial Implications			✓	

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

Meeting	Date	Outcomes
Not applicable		

Conflicts of interest associated with this report

Not applicable

Impact assessments

	Yes	No	N/A	Comments
Quality impact assessment completed			✓	
Equality impact assessment completed			✓	EHIRA assessments are completed for individual programmes of work.
Data privacy impact assessment completed			✓	

Report authorised by:	Neil Greaves, Director of Communications and Engagement
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Public engagement and involvement assurance report: October to November 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.

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

As well as hopefully, evidencing good practice, this report importantly provides the ICB with assurance of engagement, co-production and involvement in its work and the compliance of the ICB in its duty to involve.

Significant work has been undertaken to ensure the work of the Public Involvement and Engagement Advisory Committee (PIEAC) and the Quality Committee are integrated and to avoid unnecessary duplication of effort and to ensure that there is strengthened oversight and connectivity between the committees.

2. Executive summary of engagement activities and key themes

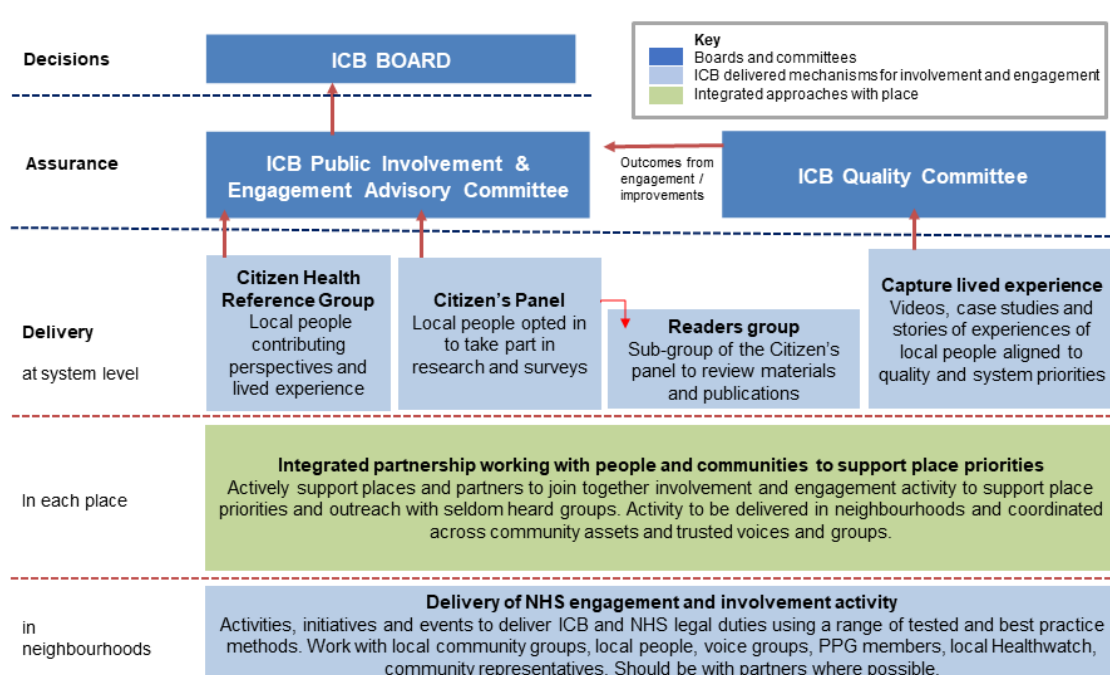
- The transformation communications and engagement team is actively supporting the recovery and transformation priorities of the system. Over the last two months planning and development has been taking place to prepare for engagement to support clinical services transformation priorities including urology, head and neck and vascular services.
- A Citizen's Health Reference Group is being established and an introductory session took place in November as part of its ongoing and coproduced induction. The aim of this group is to help us ensure that we can embed lived-experience and public perspective into engagement and involvement planning of the ICB and system priorities.
- The engagement collaboration to assess the experience and views of registered patients at Withnell Health Centre has resulted in the production of a draft engagement report which was shared with the group on the 30 November, and we are awaiting their feedback. We anticipate that the final report will be presented at the primary care commissioning committee in January 2024, along with an update and other related information.
- Following the discussion at an earlier PIEAC concerning the engagement of unpaid carers, we bid for and were successful in receiving NHS England funds to support targeted engagement with unpaid carers from minority ethnic communities in Lancashire. Members will recall that this was a point of discussion at the committee, and we are delighted to be working in partnership with Lancashire BME to deliver this work.

3. Progress on engagement infrastructure, delivery and mobilisation

3.1 Working with people and communities strategy and plan

In July 2023, the ICB executive endorsed a revision to the [ICB strategy for working in partnership with people and communities](#). This took into consideration learning from 2022/23, feedback from PIEAC members in the June meeting and reflects the publications of the [Integrated Care Strategy for Lancashire and South Cumbria](#) and the [NHS Joint Forward Plan for Lancashire and South Cumbria](#).

The engagement and involvement model below depicts the context and levels of assurance for the ICB and is included within the revised strategy.



3.2 Engagement and involvement toolkit and guidance for ICB staff

A toolkit and guidance for use by ICB teams has been developed to support engagement across the NHS with public, communities and partners. The toolkit aims to support teams to embed the ten principles for engagement and involvement in all areas of the organisation and partnership. The toolkit and related information is now on a dedicated section of the ICB intranet, illustrated below. The toolkit includes:

- An Engagement, involvement and coproduction framework for the NHS in Lancashire and South Cumbria
- An Engagement, involvement and coproduction quick-start guide for staff
- A demographic insight report – with key insights on the population and health inequalities in Lancashire and South Cumbria
- A diversity and inclusion glossary of terms

3.3 Response to internal audit of public, patient and carer engagement

A number of recommendations and actions from the internal audit of public, patient and carer engagement have been progressed:

Review ICB public involvement and engagement policy:

The ICB public involvement and engagement policy has been reviewed to align with the ICB strategy for working in partnership with people and communities which was an action from the Merseyside Internal Audit Agency (MIAA) review of public engagement in the ICB. The policy is included as an Appendix A to this report for members to endorse ahead of this being ratified.

Setting targets for public engagement programmes:

A recommendation was to set targets for the reach into communities that we aspire to on individual programmes and to demonstrate whether we have achieved this and key learnings in any analysis of projects. Work has been undertaken to ensure this is the case and it is included in the insight report for Withnell. This will now be included within engagement planning undertaken by the communications and engagement team as an aspirational target. It is important to note that often this will not be able to be evidence based and advice from the Consultation Institute recommends the focus on quality rather than reach. The setting of targets will involve a comparison of similar programmes of work and will take into consideration the purpose of the engagement, demographics and qualitative approaches.

Evaluating engagement and involvement phases:

We have developed a simple system for understanding phases of engagement and involvement to support programmes. This will enable us, the committee members, the workforce, and our partners to understand (a) at what stage engagement is at and (b) an indication on whether it has resulted in change. This builds an infographic that we can apply to each engagement project so that the committee, the engagement team and beyond, can obtain a quick visual and sense of the status of any given project. Below is an example of a graphic showing a piece of work which is in a stage of planning for engagement and involvement.



3.4 Citizen's Panel

The Citizen's Panel is a core element of the ICB's system engagement and involvement approach and includes a distribution list of members of the public who have agreed to receive regular emails and take part in NHS research and provide feedback.

The total membership: 1,369 (as at 1 December 2023). 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.

The ICB manages a readers' group which is a subset of the citizen panel and consists of 187 residents who have expressed an interest in reviewing documents and materials produced by the ICB.

Insights from the citizen panel are included in the insights report.

3.5 Capturing lived experience

Our programme of capturing lived experience and patient stories is an important aspect of our work. These are captured either in video or narrative format. A growing number of people are keen to share their experiences and insights through patient stories. The communications and engagement teamwork with the quality team to follow up the actions arising from these stories, while recognising that action, change and improvements do take time to agree and embed. The Quality Committee will be holding a workshop in December 2023 to review the programme of lived experience, and consider implementation of changes as a result of these stories, and also a proposed schedule for 2024 which will also widen our scope to bring stories from the community via the Voluntary Community Faith and Social Enterprise (VCFSE).

Date	Topic of story	Committee
October 2023	Autism	Quality Committee
November 2023	Deafness and end of life care Dentistry https://youtu.be/GOm6XTXKzkw	Quality Committee ICB Board
December 2023	End of Life via Healthwatch	Quality Committee
January 2024	Deafness and end-of-life care	ICB Board

4. Integrated partnership working with people and communities to support place priorities

4.1 Blackburn with Darwen

Engagement with family hub parent/carer panels

In Blackburn with Darwen there are eight children's centres managed by Blackburn with Darwen Council, four of which have been made into family hubs. As part of the hub model, parent/carer panels have been developed. The panels allow parents and carers to meet with professionals and help shape and inform services and the delivery of those services to ensure they work for all families in the community.

As the start of an on-going engagement programme with families in Blackburn with Darwen, three engagement sessions were arranged with the family hub leads held at Darwen, Little Harwood and Livesey on different days and different times including the evening. These were to ensure there was the opportunity for parents and carers to attend. Also supporting the sessions was the ICB's children and young people network and place lead.

The panels were asked what they thought the barriers were to health services and what services they think are missing, and how could we make services better for them. A total of 25 people, excluding a number of children, attended the sessions. Professor Bola Owolabi, director of health inequalities at NHS England and a GP in the Midlands, who was visiting system health leaders in East Lancashire and Blackburn with Darwen dropped into the final session at Little Harwood. She was interested in talking to those parents and carers present and understanding why they had joined and what they hoped to gain from doing so.

A good range of insight was captured from the discussions including themes such as: people don't know what they don't know; health professionals need to take more time in asking more rounded questions and be more proactive in giving information; carers need support - some have special needs or disabilities too in addition to those they are caring for. Views were shared that there is not enough respite available, wrap around services have been lost over the years, patients are being passed from pillar to post because services don't know where to refer and autistic children with mental health issues are falling through gaps between services.

A full insight report is in the process of being drafted and will be shared in due course.

October half-term family flu vaccination clinics

During the autumn half-term week in October, nine flu clinics were held over four days across the family hubs/children's centres. A total of 129 people were vaccinated including 91 children and 4 pregnant women. Vaccinations were available to all eligible cohorts and were delivered by Blackburn North Primary Care Network and Intrahealth.

Supporting winter pressures

To complement the overarching Lancashire and South Cumbria winter communications and engagement plan, a targeted Blackburn with Darwen engagement plan was developed working with partners. This included developing a briefing sheet for volunteers, community leaders, councillors and staff from community organisations and groups to use to help share important messages when they are in contact with people who are vulnerable, or likely to benefit from support from health and care services. The document consists of five key messages: stay warm; keep well; look out for others; look after your mental health; and get more information. This includes links to the winter page on the ICB website as well as links to Government and local authority such as help with cost of living and where to get help and support for rough sleepers/homeless. Discussions were held with a range of voluntary and community organisations as well as with various local authority teams who agreed to cascade these messages and share insights/feedback.

Videos have also been developed in some key community languages including Polish - this was done for free from a register interpreter and who is a member of the Blackburn CVS network.

Dying Well Strategy

Blackburn with Darwen Borough Council is developing a 'Dying Well Strategy' which will form part of the borough's overall Health and Wellbeing Strategy 2023-2028. Healthwatch Blackburn with Darwen has been listening to people's views and experiences of support for individuals and families/carers to help to develop an approach to end-of-life care that meets the needs of residents. The [findings](#) have been shared with Blackburn with Darwen Council's Health and Wellbeing Board and Place Based Partnership.

Living with dementia

Healthwatch Blackburn with Darwen has been carrying out an engagement exercise to understand the dementia care pathway and support system in Blackburn with Darwen. The [report by Healthwatch](#) details a number of key themes of areas for improvement in services and recommendations which are being reviewed and actioned by the place-based partnership.

4.2 Blackpool

Fylde Coast Patient Participation Group Chairs network

The first in-person session of the Fylde Coast Patient Participation Group Chairs network took place at Bickerstaffe House on 16th October 2023, with the next network meeting planned for 11th December. Chairs shared updates from their respective practices, shared projects, discussed concerns and issues for their practices and across the network more broadly. For example, concerns about resources and capacity, recruitment, lines of accountability and dentistry.

Priority wards

Building on the work undertaken by Healthwatch Blackpool and Revolution, a multi-agency steering group has been established comprising of health, local authority, public health and VCFSE partners. The main focus on the identified priority wards (Bloomfield, Claremont, Grange Park, Talbot and Tyldesley) will be around respiratory conditions, preventative measures, and the impact of wider health determinants such as poor-quality housing and smoking. Chronic Obstructive Pulmonary Disease (COPD) data from Aristotle informs an initial action plan, to be discussed at the Blackpool South Central Primary Care Network/ Integrated Neighbourhood Team during the meeting planned for 29/11/23.

The opportunities to align existing activities and pathway were discussed, particularly clinical pathways, virtual wards, social prescribing link workers, enhanced health checks, targeted lung health checks, More Positive Together (MPT), and the Revoe engagement team. For example, linking up door knocking of MPT and Revoe team with enhanced health checks to support case finding for social vulnerability. This activity will be reviewed by the steering group throughout December and January.

Health Determinants Research Collaborative

The Blackpool Health Determinants Research Collaborative (HDRC) hosted National Institute for Health and Care Research's 'Mobilising community assets in coastal communities workshop' on 15 November 2023, with the HDRC's first annual learning event at Blackpool Football Club on 22 November. Both events saw members of HDRC presenting their work in communities focusing on the intersection of health, poverty and wellbeing, and offered the opportunity for colleagues from anchor institutions, statutory and VCFSE organisations to share learning, challenges and aspirations for the future of Blackpool. More information can be found here: [Health Inequalities Research Project \(blackpool.gov.uk\)](https://blackpool.gov.uk/health-inequalities-research-project)

Cost of Living workshop

Public health and Blackpool Council colleagues hosted a Cost-of-Living workshop on 16 October, with partners from statutory and VCFSE organisations sharing their projects, research and findings. This was an exciting opportunity to find out about grassroots community groups and projects, for colleagues to network and align priorities. An immediate outcome was support from Job Centre, Healthwatch Blackpool, Blackpool Food Bank, The Platform and Blackpool Coastal Housing colleagues in distributing NHS winter messaging leaflets and toolkits to their clients and service users. The next Cost of Living workshop is planned for January 2024.

4.3 South Cumbria

We are delighted to welcome Trina Robson to the ICB. Trina is our new engagement coordinator for South Cumbria. We are working through an induction plan for the ICB, at place and with partners over the coming months. The South Cumbria leadership team and the communication and engagement team have established an action plan for Trina who will be supported by the wider team to deliver this. While waiting for Trina's start, David Rogers has been supporting work in South Cumbria and has been supporting the winter communication and engagement plan, preparation for the Special Educational Needs and Disability (SEND) inspection in 2024, and the place-based partnership newsletter.

4.4 Lancashire

Supporting winter pressures

To complement the overarching Lancashire and South Cumbria winter communications and engagement plan, a targeted Lancashire engagement plan was developed which focused on each locality. This included developing a briefing sheet for volunteers, community leaders, councillors and staff from community organisations and groups to use to help share important messages when they are in contact with people who are vulnerable, or likely to benefit from support from health and care services. The document consisted of five key messages: stay warm; keep well; look out for others; look after your mental health; and get more information. This included links to the winter page on the ICB website as well as links to Government and local authority such as help with cost of living and where to get help and support for rough sleepers/homeless. Discussions were held with a range of voluntary and community organisations as well as with various local authority teams who agreed to cascade these messages.

An engagement network has been established in Central Lancashire to support more targeted work with partners in Chorley, South Ribble, Greater Preston and West Lancashire. Work is under way to achieve this in East Lancashire and North Lancashire, and as such targeted engagement has been undertaken throughout the last two months. Videos have also been developed in some key community languages.

As part of the Lancashire response to winter we are working with Together an Active Lancashire (TaAF) to develop a campaign to encourage winter and general health and resilience through keeping active. We are now working with public health Lancashire to integrate this campaign. We anticipate this will take place in the new year, early in 2024.

'Our voice in Health and Social Care' British Sign Language users

This project has been developed in response to feedback that Healthwatch Lancashire have heard about the experiences of British Sign Language (BSL) users and the barriers they face when accessing health and social care services.

Healthwatch Lancashire have collaborated with a range of professionals (including those from the Lancashire and South Cumbria Integrated Care Board, County Councillors and Deaf Link Workers) as well as BSL users to design and shape the project.

The project aims to gather feedback from BSL users as well as carers and/or relatives to learn about the barriers faced by the Deaf community and formulate key recommendations which will be presented to NHS leaders and decision-makers to help influence and improve services. The views of professionals working within Health and Social Care will also be investigated to

explore whether organisations are accessible to the Deaf community and what arrangements they have in place.

The work will include focus groups to understand the experiences of health and social care services. A service users survey is being promoted: [here](#). Healthwatch Lancashire are also gathering views from professionals working within health and social care to gather feedback about the accessibility of services in Lancashire.

5. Formal consultations and service change

There are currently no formal consultations taking place in Lancashire and South Cumbria. The following areas relate to potential future formal consultations or service changes where work is underway:

5.1 New Hospitals Programme:

On 25 May 2023, the Government announced a record investment of more than £20 billion, ring-fenced for the next phase of the national New Hospital Programme, which brings proposals for new cutting-edge hospital facilities for Lancashire and South Cumbria a step closer. Planning for pre-consultation engagement and consultations that may occur in the future as part of this programme is underway collaboratively across organisations. The latest information on this programme is available here: <https://newhospitals.info/>

5.2 Clinical services transformation for Lancashire and South Cumbria

Building on insights captured through engagement during the summer on clinical service transformation with public and staff, more targeted engagement has been carried out to support specific fragile services across hospitals in Lancashire and South Cumbria which are at an early stage of developing networked models of care. These are:

- Urology
- Head and neck cancer
- Vascular services.

Focus groups and questionnaires have been used to gather feedback from patients of each of these services. The aim for each has been to seek opinion on proposed changes to a network model of operation. Patients have been asked about services in the community, in hospital and what should be considered if a model were to initiate a single centre for all complex surgeries in each specialty.

Engagement has been carried out in September and October 2023 hearing from a total of 87 patients within the target population (36 Vascular, 21 Head and Neck and 30 Urology). Although this is low in numbers, and there have been some barriers to overcome when reaching patient groups, the engagement has been meaningful with high quality feedback from patients that have lived-experience of the services. The questionnaires have been discussed with the Lancashire and South Cumbria Cancer Alliance to so that findings will also be useful to the delivery of cancer services. In all three specialties the majority of patients were favourable towards the idea of a single central site for complex surgery and moving as many services as possible to local community settings. There were however some areas that people thought should be considered, for example, the impact of very localised settings would have on opportunities to meet other patients and access peer support, the need to coordinate services so that multiple visits to the same location for different appointments could be avoided and fundamentally the need to ensure that any network model facilitates better communication

between clinicians to encourage better coordination of treatment and fewer delays waiting for records to be updated. The findings have been combined with the results of the clinical services transformation survey and reports for each specialty have been prepared and shared with the respective network boards and are included within the insights report.

6. Engagement and involvement by the ICB October to November

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

Withnell Surgery Health Centre, Central Lancashire

The previously reported and successful programme of engagement to Withnell Health Centre has concluded. This programme was supported by the Withnell patient group and an online survey. Feedback was received from more than 2,500 people as part of the process. A full report of the engagement has been drafted and shared with the Withnell patient group for comment and will be published in the new year. Updates on this are available here: <https://www.lancashireandsouthcumbria.icb.nhs.uk/get-involved/have-your-say-current-opportunities/withnell-health-centre>

Adult Attention Deficit Hyperactivity Disorder (ADHD)

The demand for Adult ADHD services has increased by more than four times from April 2021/22 to March 2022/23. This reflects a national picture, but without a defined ADHD framework included within the NHS Long Term Plan, there is a requirement on local ICBs to make local decision on how to meet this demand. The rise in demand for referrals is likely to be underpinned by multiple factors, but includes media influence, awareness of the condition, and patient behaviour. It is felt by the project team that to fully ensure the commissioned service meets the demands of this population it is important to engage with both patients and referring clinicians to understand the reasons for this increase in referral and how we can structure services to meet this demand. An extensive engagement programme commenced in July. The findings of the survey of service users are being used by the commissioning team to shape their considerations about the service need and demand. The fieldwork for the data is continuing and we anticipate a report in early 2024.

Enhanced Health Checks (EHC)

Considerable progress has been made to date with an ongoing commitment in rolling out and embedding enhanced health checks across our communities in Lancashire and South Cumbria. The team have acknowledged that public and patient involvement is a key factor to consider improvements, and to reflect on what is working well and measure the outcomes. Working with local teams, approaches are in place to capture patient experience and feedback that most of the teams would be collecting routinely after an appointment, and it will form an important part in the data and intelligence we need to evaluate the EHC and shape the future of the project. Feedback from patient survey is positive— 97% of those surveyed would recommend the enhanced health check. The most common issues captured are lack of physical activity, excess weight, smoking and drinking. These are all captured in a standard NHS health check. We anticipate a full report in 2024.

Children in care leavers' health review

Across Lancashire and South Cumbria children in care leaving care receive a health check and health documentation as part of their transition to independent adult life. The process is markedly different across the three local authorities and the ICB is working with local authority children in care, and safeguarding leads to develop an engagement approach to eliciting the views of children and young people to inform a single, consistent and agreed approach to care leavers health reviews and documentation. The engagement will be led by the ICB but

undertaken by our partners. The data collection phase has concluded, and the findings are being considered by the children in care and care leavers health teams. As previously reported the safeguarding teams have found it challenging to reach care leavers to engage in this survey. We are currently considering a bid for NHS England funding to support engagement for care leavers.

SEND engagement and communications

The communications and engagement team are now actively working with the SEND team (NHS and Local Authority) to support engagement around SEND in anticipation of an imminent inspection for Lancashire. We are currently scoping the work involved and building relationships with the POWAR group (children and young people network) to contribute to the work we are doing to support the implementation of the Lundy model. In Lancashire a communication and engagement plan with supporting materials has been agreed, and it is anticipated that Professor Sarah O'Brien, ICB Chief Nursing Officer and Senior Responsible Officer (SRO) for SEND will provide briefings to staff and the workforce about this important area of work. As part of our integrated work on this important agenda, we are considering how we enable the voice of SEND users, parents and carers is heard and acted upon.

Frailty

We are continuing to work with the frailty team to develop appropriate engagement and involvement to support the assessment and implementation of a coproduced model of frailty to support those with moderate frailty. This aims to reduce the number of people who have moderate frailty attending urgent and emergency care and being admitted to hospital during episodes of frailty unnecessarily. With the right assessment, self-care, support and interventions, those with moderate frailty should be able to be supported to live independently at home without needing hospital care which for this group of people may have negative unintended consequences. Data from an initial survey with the citizens panel has been shared with the team, and we are working to produce a report with an action plan. We anticipate that more depth engagement using focus groups, discovery interviews and a service user/carer survey as well as a professional survey will be developed for 2024.

7. Planned engagement and involvement by the ICB for December and January 2024

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

Unpaid carers from ethnically diverse communities – experiences of health and health services

Following the presentation of the findings from 'I Care' the engagement of unpaid carers in South Cumbria, members were keen to see engagement in Lancashire, and particularly to focus on the needs and experiences of unpaid carers from the minority ethnic communities in Lancashire. During September, NHS England invited bids from ICBs to support engagement, particularly to improve insight and reach. We are delighted that following joint work with Lancashire BME, our bid to undertake engagement of BME unpaid carers was successful. The £7,000 funding award was the maximum we could be awarded, but it enables us to work with Lancashire BME to undertake this work. Members can be assured that their concerns were listened to and acted upon. It is anticipated that the findings from this engagement will be reported in March/April 2024.

Special allocations scheme

Special allocation schemes were created to ensure patients who have been removed from a practice patient list can continue to access healthcare services. The NHS has a responsibility to ensure all patients can access good-quality GP services and that patients are not refused

healthcare. In Lancashire and South Cumbria, the special allocation scheme is currently provided by Compass Medical Practice, which currently supports 259 patients across the region. The contract currently held by Compass Medical Practice is now due for review. This means NHS Lancashire and South Cumbria Integrated Care Board (ICB) will look at the service from a number of perspectives to determine whether a full procurement exercise is required to identify the long-term provider of the service. An online survey has been developed which will allow patients to provide feedback on their experiences of the service and contribute to any potential procurement process. The engagement exercise will take place throughout December with all patients written to directly including a paper copy of the survey and a stamped addressed envelope to ensure the process is as accessible as possible.

Integrated Neighbourhood Teams (INT)

We have developed a communication and engagement plan for the ICB system and place based work around integrated neighbourhood teams. This plan sets out how we can effectively engage with health, social care and VCFSE sector staff and partners working within communities and organisations across Lancashire and South Cumbria. The purpose of this engagement is to raise awareness and build support for an Integrated Neighbourhood Care Team approach and the development of neighbourhood leadership and Multi-Disciplinary Team 'team of teams' as part of the recommendations set out in the Fuller Stocktake Report. This plan will support the system-level communication and engagement with key audiences across Lancashire and South Cumbria and will be the foundation for local plans within INTs and at Place.

Lundy Model of engagement with children and young people

An audit of engagement opportunities for children and young people using the Lundy model has been undertaken and a plan for engagement has been drafted. Work is ongoing to support this engagement between the communication and engagement team and the children and young people's team. Priority actions include:

- Community engagement, involvement and coproduction – our children and young people across the system, at place, and in neighbourhoods, will be listened to, heard and involved so that their views can provide us with insight, and learning leading to change and improvements.
- Service engagement, involvement & coproduction— Our children/young people and families will be engaged concerning their experience of, and concerns about existing services, on the need for change to existing services, and the introduction of new services. This includes planning and delivery, understanding needs and feedback.
- Recruitment— Our children/young people and families are involved in the recruitment process for those with whom they will have contact with
- Establishment of a children's panel who can quality assure (QA) our services using methods such as the 15 steps and other methods.
- Communication—participation requests are timely and consistent across all services working with children/young people and families
- Strategic governance and decision making—children, young people/families/carers are regularly involved through representation at our board/decision making meetings

We anticipate that this will return in full to the PEIAC via the insight report and this assurance report. We are working with Lancashire County Council who already use this model of engagement and anticipate working with other local authorities who are considering this.

Integrated Care Experience survey

Lancashire and South Cumbria ICB is one of eight ICBs nationally who are leading a pilot to develop a national Integrated Care Experience Survey (ICES). The aim of this is to collect and use the data of up to approximately 40,000 patients nationally and approximately 5,000 per ICB to carry out phase one (the pilot) of the Integrated Care Experience Survey (ICES). Phase one fieldwork is expected to go live in quarter 4 (of the 23/24 financial year), offering participating ICBs support and flexibility around winter pressures and other operational priorities. The ICES is a new nationally coordinated data collection which will allow ICBs to understand how well integrated care is working for people with multiple and complex needs and their informal carers. The survey will initially target service users with clinically complex needs identified through GP records based on their electronic Frailty Index score as this is seen as a cohort with complex clinical health and care needs and likely to require joined up support from multiple health and care providers. Professor Sarah O'Brien is the SRO for this project and a small team are working to ensure that this important piece of work can be undertaken, this includes engagement, business intelligence, information governance and primary care colleagues. Currently we are awaiting sign off for materials to go to GPs and primary care to elicit their expressions of interest. In tandem we are preparing for what will be a data extract and the management of this. We will continue to report progress on this work, and anticipate a report in summer 2024.

Maternity and Neonatal engagement

Several projects are ongoing, including smoking in pregnancy, close relative marriage and genetic risk, increasing placental growth factor screening to improve outcomes of pre-eclamptic and eclamptic women, Birth Afterthoughts (Reproductive Trauma Service) and maternal nutrition. The Birth Afterthoughts project incorporates the CORALS project provided by Prof. Gill Thomson, UCLan, where evidence shows that there is massive variation in the practice of having afterbirth conversations with women who have experience birth trauma. Healthwatch Together are now supporting the Maternity Voices Partnerships in Lancashire and South Cumbria and working with the ICB to ensure that these become an active part of our engagement strategy. We are planning a maternity and neonatal engagement network to bring together service users, and volunteers to ensure that there is consistency and coherence across the system.

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

Glossary

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