

Summary Report – Trust Board Meeting (Part 1)	Date: 27th March 2013
Report Title: Community Engagement and Involvement Strategy 2013 to 2016. Progress update	
Agenda Item: 13	Enclosures: Vision for Engagement of Service Users and Carers
Sponsor; Hazel Watson	Presenter: Hazel Watson
Report Author: Alison Griffin	
Report discussed previously at:	Service user and carer steering group

Purpose of the Report and Action required		
To note progress in the development of the Community Engagement and Involvement Strategy and to get feedback to inform the production of the final version	Approval	
	Discussion	X
	Information	

Executive Summary of Key Issues
<p>The Strategy is being developed in partnership with service users, carers, FT members, voluntary sector organisations with an interest in Mental Health and our staff. Over 500 people have given up their time to work with us to share what currently works well, areas to improve and their vision for engagement within AWP.</p> <p>The need for a new strategy, and more importantly a new approach to engagement is recognised as a key priority for the Trust. .</p> <p>Through this process, users, carers, and staff have identified three areas where meaningful involvement and engagement should take place:</p> <ol style="list-style-type: none"> 1. regular general day to day, week to week, month to month engagement activities 2. involvement in specific service improvement and /or projects 3. enabling feedback to be given more effectively by service users and for staff to react to and resolve individual service users concerns about their treatment and care now. <p>These areas of engagement need to be considered at four specific levels within the Trust:</p> <ol style="list-style-type: none"> 1. engagement at a strategic level- mirroring and matching the strategic direction of the Trust, engaging with the specific membership constituencies, service users, carers, public and nominated stakeholders 2. engagement at a locality level - to develop appropriate and meaningful services by involving our service users and carers 3. engagement at ward/team level - so that our service delivery teams understand the experience of people who use our services 4. engagement at an individual level - so that the 1:1 interactions between service users, carers, and staff are based on respect, mutual decision making so that service users and carers feel involved in their own recovery journey. <p>The strategy will include a framework for its delivery.</p>

Community Engagement and Involvement Strategy 2013 to 2016

The Strategy does not yet describe the organisational process for ensuring that the voices of service users and carers are heard and responded to at all levels in the organisation, and how the Board will satisfy itself that this is so. Nor does it yet describe the process of monitoring the progress of the strategy. The last Service User Steering Group raised the issue of 'success criteria' and this is something that clearly needs more focus. The final version of the strategy is planned to come to Board in April 2013

Which Strategic Objective does this paper address

A sustainable value for money business	Y
Excellent service user access and experience	y
Excellent partnership working with other organisations	y
Effective engagement and improvement in staff satisfaction	y

Link to Fit for the Future Implementation Plan

<i>Specify objective number</i>	

Recommendations to other committees

Strategy to be presented by Head of Engagement and Responsiveness, service users and carers from steering group at April Quality and Safety Committee then brought back to Board for final sign off in April.

Recommendation/Decision

The Board is recommended to note progress on development of the Strategy and to give feedback to further inform the final version.

1. Introduction

This Strategy has been developed in partnership with service users, carers, FT members, voluntary sector organisations with an interest in Mental Health and our staff. Over 500 people have given up their time to work with us to share what currently works well, areas to improve and their vision for engagement within AWP.

We would like to thank everyone for their help and contributions and look forward to continuing on this journey of working together in equal partnership to embed engagement throughout everything we do.

2. What service users and carers told us

We have been told that engagement has been improving. This strategy will be taking us to the next level.

If we really change the way we engage with people it will feel collaborative, organised, energising, positive, innovative, driven, supported, equal, honest, respectful and safe.

Three areas of engagement have been identified for meaningful involvement and engagement to take place:

- regular general day to day, week to week, month to month engagement activities
- involvement in specific service improvement and /or projects
- enabling feedback to be given more effectively by service users and for staff to react to and resolve individual service users concerns about their treatment and care now.

Existing mechanisms (E) are included in the table below and will continue.

3. These areas of engagement need to be considered at four specific levels within the Trust:

- **engagement at a strategic level**- mirroring and matching the strategic direction of the Trust, engaging with the specific membership constituencies, service users, carers, public and nominated stakeholders
- **engagement at a locality level** - to develop appropriate and meaningful services by involving our service users and carers
- **engagement at ward/team level** - so that our service delivery teams understand the experience of people who use our services
- **engagement at an individual level** - so that the 1:1 interactions between service users and staff are based on respect, mutual decision making so that service users feel involved in their own recovery journey.

The table overleaf provides a framework for what needs to be in place to deliver this Strategy. Timescales will be set in April by the Service User and carer Steering Group and will then be presented to Quality and Safety Committee and brought back to board for final approval.

Community Engagement and Involvement Strategy 2013 to 2016

	General day to day engagement	Involvement in service improvements/ projects	Acting on feedback to resolve individual service users concerns being treated now	Outcomes
Strategic level	<p>Council of Governors FT membership – over 16,500 people to engage with.</p> <p>New and improved strategy for member engagement.</p> <p>Improved information and mechanisms for how to become a Member (E, leaflet exists)</p> <p>Improved information and approach to encourage people to becoming a Governor (E, leaflet exists)</p> <p>To review and improve our 'you said, we did' (E)</p> <p>Review the range of external organisations meetings, forums, condition specific, third sector groups (E)</p>	<p>Trust website to better promote different ways to be involved.</p> <p>Trust wide agreed service improvement projects with Service users and carers then recruited on to specific projects</p> <p>Support for people involved in improvement projects</p> <p>Policies, procedures and guidelines</p> <p>Agree and implement 'Time to change' projects to reduce mental health</p>	<p>Board reports</p> <p>Website feedback forms (E)</p> <p>Improved trust wide ways to give your feedback (E – leaflet exists)</p>	<ul style="list-style-type: none"> • Setting the strategic direction of the Trust • More people meaningfully involved and better informed • Service and economic priorities of the Trust identified • Influencing commissioning priorities • Advocating for mental health within communities • Engaging with initiatives to reduce mental health stigma • Involvement with the clinical academy to set standards across the Trust

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	Website communication on how to get involved.	stigma		
	General day to day engagement	Involvement in service improvements/ projects	Acting on feedback to resolve individual service users concerns being treated now	Outcomes
Locality level	<p>Identify named lead for involvement in each locality.</p> <p>Employ Service user/carer involvement worker for each Locality</p> <p>Actively recruit employees with lived experience</p> <p>To review and improve 'you said, we did' (E)</p> <p>Review and improve Carers forums (E) one in each locality</p> <p>Review and improve Community care forums (E)</p> <p>Review and improve adult inpatient acute care forums (E)</p>	<p>Review and improve processes for staff to request service user/carer to be involved in service improvement projects from involvement data bases (E)</p> <p>Review and improve local Payment process for involvees (E)</p> <p>Support for people involved in improvement projects</p> <p>Access to training Trust and local induction for involvees</p>	<p>PALS and Complaints reports (E)</p> <p>Quality reports</p> <p>Review and improve process for Staff attending external partnership meetings to enable and respond to external feedback</p> <p>Review and improve process for Community forums to review feedback and take action where necessary / inform projects</p>	<ul style="list-style-type: none"> • Understand and respond to diversity issues within local communities • Engagement plans which address diversity and reflect local interest • Plans developed and agreed with partner agencies / 3rd sector organisations • Recovery approach in place and owned by everyone • Survey results inform service improvement • Feedback on what we have changed • Increased percentage of people giving their feedback • More people wanting to be involved and know how they can have a voice • Communities understand mental health issues and stigma

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	<p>Review and improve Local involvement networks (soon to become HealthWatch) (E)</p> <p>FT membership engagement events in each Locality (E)</p> <p>Review and improve process for staff to request service user/carer from involvement data bases (E)</p> <p>Review and improve process for Involvement in staff recruitment (E)</p> <p>Review and improve Specific specialist user forums (E)</p> <p>Review and improve processes to link to external organisations meetings, forums, condition specific, third sector groups (E)</p> <p>Promoting opportunities to get involved in experience based design and time to change projects</p>	<p>Working in partnership with involvees to deliver training.</p> <p>Work with staff, service users, carers and voluntary sector to agree specific time to change initiatives</p>		
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	Promote opportunities to be involved in research (E).			
	General day to day engagement	Involvement in service improvements/ projects	Acting on feedback to resolve individual service users concerns being treated now	Outcomes
Ward / team level	<p>Actively promote community meeting dates.</p> <p>Ward community meetings (E)</p> <p>Regular meetings held and recorded.</p> <p>Employees with lived experience in each team.</p> <p>Service users and carers encouraged to give regular feedback to staff.</p> <p>Staff actively promote carers' involvement in care planning.</p> <p>Improved 'You said, we did' feedback available (immediate). (E)</p>	<p>Identified involvement lead.</p> <p>Staff training in involvement methodologies and experience based design</p> <p>Involvement opportunities promoted to service users and carers. Appropriate support and training provided.</p> <p>Joint partnership working to deliver projects</p> <p>Involvement in research (E)</p>	<p>Direct to staff (informal concerns) (E)</p> <p>PALS and Complaints (E)</p> <p>Feedback cards (E)</p> <p>Letters (E)</p> <p>Phone (E)</p> <p>'You said, we did' feedback</p> <p>Clear processes in place for service users to understand their care and treatment.</p>	<ul style="list-style-type: none"> • Engagement in setting team standards • Employees with lived experience • Involvement of families in care • Involvement and advocacy • Pleased and appreciated for giving feedback • More people would like to be involved • More people feel they have been listened to

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	<p>Website communication on how to get involved.</p> <p>Make available 'Ways to give your feedback' leaflet (E)</p>	<p>Provide training and support for involvement in research (E)</p>		
	General day to day engagement	Involvement in service improvements/ projects	Acting on feedback to resolve individual service users concerns being treated now	Outcomes
Individual level	<p>Understanding how to be involved in setting goals in own Care plan.</p> <p>Carers understanding the care planning process.</p> <p>Everyone offered friends and family test question.</p> <p>Understanding how feedback makes a difference - 'you said, we did' (E)</p> <p>Ways to give your feedback leaflet (E)</p> <p>Named individual responsible for their care.</p> <p>Access to Peer support</p>	<p>Service user and carer access to recovery college courses</p> <p>Service user and carer involvement in experience based design</p>	<p>Family involved in care planning.</p> <p>PALS and Complaints (E)</p> <p>Feedback cards (E)</p> <p>Email (E)</p> <p>Opportunities to be involved in experience based design</p> <p>Open dialogue</p>	<ul style="list-style-type: none"> • Service users and carers involved in care planning • Every service user has a copy of their care plan. • Where involved, carers have a copy of the care plan. • Every service user understands what's in their care plan and its actioned • Service users and carers involved in experience based design

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	workers Carers given appropriate information and signposting.			
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What do we need to do to get to next level?

Individual recovery

- recovery approach and access to recovery education through recovery college for all
- involvement in own care plans, being given a copy and the care plan being delivered as agreed in plan
- carer engagement in care planning
- access to peer support workers
- opportunity to complete friends and family test
- opportunity to be involved in experience based design to improve individual experience.

Ward and team level

- community meetings held regularly
- listening and reacting to Service User / Carer feedback and sharing what has changed
- lived experience employees (ambition for one in every team)
- staff want to engage to continually improve the quality of services

Locality level / speciality

- employ service user and carer involvement workers
- diversity of local communities
- engaging and working with voluntary sector
- system in place for understanding and acting on feedback
- development of educational programmes (recovery college)
- working in partnership to set standards for engagement
- co-production

Strategic and Board engagement

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- member constituency engagement processes in place to set/inform strategic direction of Trust
- conversations to reduce mental health stigma/advocating mental health within communities
- engaging in time to change initiatives
- influencing commissioning priorities
- involvement with clinical academy to set standards across the Trust

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