



Agenda Item No:	10
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Report to:	Humber and North Yorkshire Integrated Care Board
Date of Meeting:	13 September 2023
Subject:	Voice of the Lived Experience
Director Sponsor:	Anja Hazebroek, Director of Communications, Marketing and Media Relations
Author:	Frankie Jackson, Community Engagement and Insight Manager, Kirsten Spark, Community Engagement and Insight Manager, Jonathan Brooks, Senior Evaluation and Insight Officer

STATUS OF THE REPORT: *(Please click on the appropriate box)*

Approve Discuss Assurance Information A Regulatory Requirement

SUMMARY OF REPORT:

Meaningful engagement with our communities and people is vital to truly understand local sentiment, need, priorities, and concerns in Humber and North Yorkshire.

Following the update provided to the July Board on the workshop and resulting task and finish group for the Voice of the Lived Experience, a summary report (dashboard) has been developed to provide Board members with the key themes arising from engagement and insight activity delivered through the ICB and Healthwatch. This will continue to be iterated as the work delivered by the task and finish group progresses and becomes more sophisticated.

The first dashboard report highlights the key themes being:

- i) Access to services – mainly primary care and dentistry
- ii) Waiting times
- iii) Perceived and real difficulties in making appointments

In addition, the aim is to also provide the Board with more comprehensive insight into key aspects of the public engagement and insight activity taking place across the system and as such, important reports will be brought to public Board meetings.

This month's report presents the findings from the community engagement activity that took place over the week of the NHS's 75th Birthday in July 2023, whereby conversations and insight activity took place with over 700 people in 20 of our most deprived communities across Humber and North Yorkshire to understand more about perceptions and priorities for the NHS now and in the future, building on the national engagement activity undertaken through the NHS Assembly.

Key themes are:

- iv) Concerns about lack of access to NHS dentists.
- v) Feeling that primary care appointments are less available, and people want face to face appointments. Care navigators are viewed as a barrier to getting care, and alternative appointment methods are not always accepted by patients.
- vi) Desire for clear and transparent communication from the NHS – especially waiting times and support to 'wait well'.
- vii) Important to publicise the good work taking place across the health and care system.

- viii) People need educating and supporting to use the NHS responsibly.
- ix) People want services in their local community - concern that travelling to other areas for care is widening health inequalities.

RECOMMENDATIONS:

Members are asked to:

- i) Note and discuss the key themes and recommendations.
- ii) Provide any initial feedback and input.

ICB STRATEGIC OBJECTIVE *(please click on the boxes of the relevant strategic objective(s))*

Managing Today	<input checked="" type="checkbox"/>
Managing Tomorrow	<input checked="" type="checkbox"/>
Enabling the Effective Operation of the Organisation	<input checked="" type="checkbox"/>

IMPLICATIONS *(Please state N/A against any domain where none are identified)*

Finance	N/A at present but and may have implications if particular themes and/or recommendations are progressed in the future.
Quality	Better understanding of public perceptions and experience is key to improving quality, access to care and reducing health inequalities.
HR	N/A at present.
Legal / Regulatory	The ICB is required to meet its statutory duties as part of the NHS Act to make arrangements to secure that people are appropriately 'involved' in planning, proposals and decisions regarding NHS services.
Data Protection / IG	N/A at present.
Health inequality / equality	Better understanding of public perceptions and experience is key to improving quality, access to care and reducing health inequalities.
Conflict of Interest Aspects	N/A at present.
Sustainability	N/A at present.

ASSESSED RISK: The primary risk is that the ICB fails to appropriately involve the public in its planning, proposals and decision regarding NHS services, as part of its statutory duty. Ensuring that the Voice of the Lived Experience is part of every Board agenda, and that the dashboard and key reports are brought to the Board's attention is a key part of the mitigation.

MONITORING AND ASSURANCE: *(Please summarise how implementation of the recommendations will be monitored and the assurances that can be taken from the report)*

As part of the task and finish group activity, governance and assurance is being reviewed.

ENGAGEMENT: *(Please provide details of any clinical, professional, or public involvement work undertaken or planned. Summarise feedback from engagement and explain how this has influenced your report. If you have not yet engaged with stakeholders include a summary of your plans.)*

The dashboard report summaries the engagement activity undertaken. The NHS@75 activity engaged with over 700 people.

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No Yes

If yes, please detail the specific grounds for exemption.

VOICE OF THE LIVED EXPERIENCE

1. INTRODUCTION: Why is authentic public involvement so important and what are our responsibilities as an ICB?

Meaningful engagement with our communities and people is vital to truly understand local sentiment, need, priorities, and concerns. It is also a statutory obligation.

Feeding this insight and intelligence to the ICB Board is crucial to ensure that Board members are regularly tuned in to the local narrative and consider this in its planning, when reviewing proposals and in making decisions. It is important that community views and experience in Humber and North Yorkshire inform and help shape our decision-making.

A regular engagement and insight summary 'dashboard' report, supplemented by more extensive theme or topic reports, should be useful tools in achieving this, providing regular engagement updates and in turn, ICB Board members will gain valuable insights into the sentiments, priorities, and concerns of the wonderfully diverse communities we serve.

2. THE SUMMARY 'DASHBOARD' REPORT

A snapshot of our engagement and insight activity will serve as a central document for reviewing local community engagement exercises - showcasing exactly what communities are telling us, capturing their emotions, concerns, and aspirations as key themes. It will provide an overview of recent engagement activities that have taken place across Humber and North Yorkshire, shedding light on the scope and depth of interactions between the partner organisations, communities, and patients. It will link closely with the Voice of the Lived Experience programme of work – where the creating, and learning from, public intelligence reports will be more collaborative and coordinated than ever before.

Content will include:

- PALS data
- Healthwatch insight
- ICB engagement and insight – place-based and central
- National insight
- Spotlight on local networks and forums
- What's coming up and future work

In time, the ambition is to extend this across the System, including other partners including Local Authorities.

An updated summary report will be provided for each Public ICB Board meeting. It should be understood that two months is a very short period of time in the world of public engagement and, sometimes, public opinion and themes may not be hugely different from the previous report. Engagement projects, consultations, general surveys and more take considerable time to plan and coordinate if we are to maximise our audience, reach the right groups and extract the most useful insight.

3. COMPREHENSIVE INSIGHT REPORTS ON KEY ISSUES

As referenced, meaningful engagement and insight projects are necessarily time and resource intensive. The aim is to bring a key, comprehensive report to each Board, providing a deeper dive into key topics and themes.

4. THE ROLE OF THE ICB BOARD

4.1 Transparency and accountability:

The ICB Board must play a crucial role in ensuring findings outlined in our engagement and insight reports, and subsequent recommendations, translate into concrete actions and improvements that must be communicated back to the communities we have spoken with and heard from. Through this process, the ICB Board will gain a deeper understanding of our communities - creating a more responsive, accountable, trusting and transparent system.

4.2 Feedback loops: Closing the communication gap

It is essential the ICB Board ensures that our communities are not left in the dark regarding the actions taken in response to their thoughts and opinions - especially when many community participants may have travelled a distance to give their views or who have built a strong and trusting relationship with other ICB representatives before feeling comfortable about voicing their opinions.

The Board plays a pivotal role in providing transparent feedback to our communities and patients, clearly outlining the steps being taken to address their concerns. And if we can't action what communities are asking for, then telling them why this is not possible. In the first instance, the Communications, Marketing and Engagement team, who will have built hundreds of strong relationships across our communities, would help with this.

Regularly feeding back key decisions and actions made in a meaningful way can foster trust between our local communities and the ICB, reinforcing the notion that community voice is heard, valued, and acted upon.

5. RECOMMENDATIONS

5.1. Members are asked to:

- i) Note and discuss the key themes and recommendations.
- ii) Provide any initial feedback and input.