

Fife Health
& Social Care
Partnership



Integration Joint Board Participation and Engagement Strategy For Fife 2022-25



Supporting the people of Fife together



August 15, 2022



Message from Nicky Connor

Director of Fife Health & Social Care Partnership

Hearing the voices of the people who use health and social care services and those who deliver those services is hugely important to how we plan, design, and deliver services. It is by strengthening a culture of engagement and participation with people and communities that will help us to do this.

This strategy will put mechanisms in place and remove barriers so everyone has the opportunity to comment and provide feedback on health and social care services, whether that's telling us we are doing well or where we need to make improvements – hearing from as many voices as possible, including those who are harder to reach, will help us to shape services that meet the needs of people across our seven localities now and in the future.

By working together across our communities, our staff, our partners, and colleagues from the independent and third sectors we can use knowledge and experience to help shape services, improve integrated working and better use of collective resources, with the common goal of supporting the people of Fife to live health and independent lives

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Foreword

Fiona McKay, Head of Strategic Planning



As Head of Strategic Planning, Performance & Commissioning for Fife Health & Social Care Fife HSCP I am committed to delivering the priorities and objectives that have been set out in our Strategic Plan.

We need to make sure that in order to meet our priorities we must build our services on sound evidence and ensure that services are transformed and delivered around people and communities and that we deliver to a high standard.

We need to build services around people's rights, needs and aspirations and work with individuals and communities to build up their resilience so that the people of Fife are supported to live healthy independent lives.

That means that we need to understand what it feels like for people who use our services and what gets in the way of their health and wellbeing needs being met. It is therefore crucial that the people who oversee and deliver these services and those who have lived experience, including carers, local communities, care providers and others, are involved in the planning, design and delivery of health and social care services in Fife.

The approaches we will focus on in this updated Participation and Engagement Strategy are informed by views of people with lived experience and other key stakeholders (**Appendix 1**) including national statutory guidance regarding community engagement and participation guidance for NHS Boards, Integration Joint Boards and Local Authorities that are planning and commissioning care services in Scotland.

This guidance was published by the Scottish Government in 2021. This statutory national guidance is known as '**Care services - planning with people: guidance**'.

We aspire to develop a service for participation and engagement where people who use services and staff at all levels, are involved and supported through services that deliver person centred and high-quality care. We want to be inclusive of all social, economic, and geographical groups. We aim to work with the population about how we co-produce, plan, design, and deliver our services and to actively engage where there are concerns noted by the people who use our services.

We aim to achieve this through ongoing planning, meaningful engagement, consulting, evaluation and providing feedback. We are aiming higher together to benefit all people and our communities.

The updated Strategy sets out how we will support Fife's Integration Joint Board to deliver on its vision through Participation and Engagement activity:

"Enable the people of Fife to live independent and healthy lives"

Introduction

Fife's Health and Social Care Strategic Plan sets out a vision for the transformation of health and social care in Fife. In terms of the Integration Joint Boards (IJB) Participation and Engagement Strategy this includes strengthening a culture of participation and engagement with people and our communities and embedding it into our business enabling and planning processes.

The integration of health and social care services is a major programme of reform, affecting most health and care services in Fife. With a population of 374,130, as of latest National Records of Scotland 30th June 2021, and involving approximately £600 million annually it is vital that we work with the people of Fife to plan, design, and deliver services that meets local need across communities and improves health and wellbeing outcomes.

Fife Health and Social Care Fife HSCP (HSCP) is responsible for the governance, planning and resourcing of all adults and older peoples social work and social care services, Primary and Preventative Care Services, Community Care Services and Complex and Critical Care Services. In Fife this also includes Children's Health Services and some acute hospital services. The updated strategy will focus on services which are managed by Fife Integration Joint Board and delivered by Fife HSCP. This will give scope to what this Participation and Engagement Strategy can and cannot do. A full list of these services can be found in **Appendix 2**.

Individuals and communities using health and social care services across Fife are in the best position to understand what works for them, what they need and what needs to be improved. Therefore, it is vital that the people of Fife are involved in the planning, shaping and prioritising of services to ensure the Fife HSCP improve and deliver effective and sustainable services that matter locally.



Our Vision

Our vision for the strategy towards the Fife HSCP overall strategic vision is to:

“Enable the people of Fife to live healthy independent lives by ensuring stake holder views, experiences and ideas are included in the design and delivery of health and social care services that meet the needs and aspirations of the people of Fife.”

Our Mission

To put people who use services and communities at the heart of planning and design of health and social care services that meets the needs of individuals and communities.

Our Goal

To maximise the opportunity of the people in Fife to participate and support them with planning, design and delivery of their health and social care services.

Equality and Human Rights

The Fife HSCP is committed to the elimination of discrimination and promotion of Equality and Human Rights. This will be embedded into public engagement and participation activities fulfilling the public sector duty under the Equalities Act 2010. The Fife HSCP will fulfil this duty by:

- Placing equality and human rights at the fore front of our approach as outlined by the Integrated Joint Board in the Mainstreaming Equalities Report 2020 – 2024.
- Carrying out Equality Impact Assessments (a process designed to ensure that a policy, project or scheme does not unlawfully discriminate against any protected characteristic) to reduce inequality caused by socio-economic issues as required by the Fairer Scotland Duty.
- Engagement activities will be planned to remove barriers by being flexible, accessible, and inclusive.
- Promoting this strategy by working collaboratively with stakeholders.
- Adhering to reflective practice to continually seek improvement in public participation including learning from the experience of others.
- Ensuring engagement is appropriate, proportionate, and effective to the participation and engagement activity.
- Employing a variety of innovative methods along with tried and tested methods to ensure maximum participation.
- Working in collaboration with stakeholders to ensure the appropriate people, communities and organisations are involved.

1. Why do we need a Public Participation and Engagement Strategy?

There is a strong legislative and policy context for Participation and Engagement across Health and Social Care that demands and promotes participation and engagement with individuals, communities, and our partners.

The Fife HSCP recognises the range of national standards, guidance, and principles to aid with the planning and organisation of participation and engagement activities to ensure they are meaningful, accessible, and flexible to encourage and increase participation. This strategy complies with these standards as can be seen within **Appendix 4** under 'Guidance, Standards & Principles'.

In view of the requirements and current context it is imperative that the Fife HSCP has robust mechanisms in place to ensure effective Participation and Engagement. In implementing the updated strategy, the Fife HSCP must also meet the requirements of Equality Legislation by actively seeking to involve those within local communities who are not often heard. Collaboration with Third Sector to build capacity and develop innovative ways of working will be a precursor to the successful implementation of the Strategy Action Plan.

Our approach is set within a local and national context and guided by **The Scottish Government Care Services – Planning with People Guidance (2021)** which recognises the importance of listening to the views of people who use services and how important it is to actively involve them throughout the process of planning care delivery. The statutory duties of community engagement states:

“The duty to involve people and communities in planning how their public services are provided is enshrined in law in Scotland. This guidance supports care organisations to meet their legal responsibilities. NHS boards are bound by duties of public involvement set out in the **NHS (Scotland) Act 1978** as amended by **National Health Service Reform (Scotland) Act 2004**. For Integration Joint Boards engagement and participation duties are specified by the Public Bodies (Joint Working) (Scotland) Act 2014. Integration Joint Boards are expected to apply this guidance and work with colleagues in Health Boards and Local Authorities to share learning and develop best practice. The duty to involve people in the design and delivery of care services was strengthened with the introduction of the **Community Empowerment (Scotland) Act 2015**. Participation is also a key element of a **Human Rights** based approach, which requires that people are supported to be active citizens and that they are involved in decisions that affect their lives.”

The current legislative and policy landscape summarised in **Appendix 4**, strongly reflects this view. In addition, Dr Campbell Christie, in the introduction to the **Christie Commission report on the Future Delivery of Public Services (2011)** states that:

“Reforms must aim to empower individuals and communities receiving public services by involving them in the design and delivery of the services they use.”

“. . . effective services must be designed with and for people and communities – not delivered ‘top down’ for administrative convenience”

It has been twelve years since the Christie Commission report was published which looked at the future delivery of public services in Scotland. **The Independent Review for Adult Social Care (IRASC)** published in 2021 made 53 recommendations which cover social care practice, structural change, workforce, and funding implications. The IRASC Strengthens and acknowledges that there is more work to be done to achieve the ambitions set out in the Christie Commission. The IRASC states that:

“Everyone in Scotland will get the social care support they need to live their lives as they choose and to be active citizens. We will all work together to promote and ensure human rights, wellbeing, independent living and equity.”

1.1 What this strategy is going to do for the Fife HSCP?

The strategy builds on the previous strategy's underpinning principles and engagement approaches and will enable the Fife HSCP to work together with people, communities, and our partners to improve and sustain health and wellbeing outcomes and our health and social care services that meet the identified needs across Fife's seven locality planning areas.

The Strategy will meet the following objectives:

- Ensure the Fife HSCP has mechanisms to engage with a wide range of people at locality level.
- Provide a feedback mechanism to ensure the Fife HSCP is sighted on public/community views.
- Provide a forum for members of the public who are committed to supporting the work of the Fife HSCP.
- Raise the profile of participation and engagement and raise the profile of a Fife HSCP who values the experience of people accessing services or supporting those who do.
- Provide opportunities for collaborative working across sectors with an ability to build capacity for participation and engagement.
- Strengthen and improve community-based health and wellbeing services and supports in each of Fife's seven localities through a Participation and Engagement model, which aligns our strategies, plans and ways of working to deliver our ambitions in Fife HSCP with the people of Fife.

1.2 The Underpinning Principles of Participation and Engagement

The principles to underpin the participation and engagement approach and working practices for the Fife Health and Social Care Partnership.

1. Influence and support an overall 'cultural change' towards a person centred, personal outcomes approach with service users. Actively develop the knowledge, skills and experience of all staff to work in this way and develop service user and public confidence in providing input and feedback to our systems.
2. Go to where the people are – do not expect people to come to the Fife HSCP. To engage with 'people and groups whose voices are seldom heard' using the networks and places people trust, e.g., current community assets, groups and networks including specific care groups.
3. Produce positive changes in individual service user's experience. Provide a clear point of access to provide feedback, make complaints or suggestions for improvement for users of services and the public. Feedback given by the service should be efficient, open, and transparent – e.g., why an issue happened, how it will be resolved and details of how any change will be implemented. If feedback cannot be acted upon, an explanation is provided. Carer and service users' needs, and expertise should be reinforced.
4. Value and hold on to our existing knowledge, skills, and experience from the established groups: such as volunteers, members of Public Forums, People's Panel and Care Representation Groups. Take account of the best of systems previously in place but use these resources differently. Participation and engagement should be a two-way process with a focus on creating and maintaining partnerships.
5. Be a flexible, evolving model making the most of social media. Be focused on making step changes and continually improving, experimenting, and drawing upon input and feedback.
6. Be appropriately resourced and involve all stakeholders.
7. Learn from other organisations and systems of participation and engagement. Share our own learning and experiences with others.
8. Aim to remove unacceptable levels of bureaucracy. Monitoring, information, reporting and governance are focused on the use of plain English and what will make a difference to service users.
9. Make best use of users of services and public feedback to address issues proactively with local and national politicians.
10. Consider all relevant legislative requirements, standards, and guidance. Where appropriate have requirements defined and made clear in policies and procedures for organisations and staff. This must be influenced by the experience of those who use services.

1.3 How the updated Strategy has been developed

This updated strategy has been produced in collaboration with members of Fife Integration Joint Board which includes public members, elected members, representatives from Health and Social Care and the Third Sector.

Consultation and activity have been overseen by a subgroup made up of Integration Joint Board members which included:
- Carer Representative, Public Member, Elected Members and the newly appointed H&SC Participation and Engagement Team.

The process for developing the updated strategy was as follows:

- Reviewing revised and updated strategy requirements, policy drivers, quality standards and legal requirements.
- Consider how existing arrangements could support the Fife HSCP in line with strategic priorities.
- Seven engagement events were held in April and May 2022. Members of the public and wider stakeholders were invited to participate through Fife Council's People Panel and NHS Fife Public Partner Volunteers virtual network. Wider stakeholders were invited to attend through Fife's Health and Social Care Partnerships Locality Planning Wider Stakeholders Network including various other participation groups throughout Fife. The events focussed on feedback received so far to build on the previous strategy approaches to participation and engagement and work undertaken across all partners. Participants had the opportunity to ask questions and raise concerns regarding the approaches and how this should be taken forward over the next three years.

2. The Approaches: For Participation and Engagement for Fife Health and Social Care Partnership

The strategy will cover a three-year period in line with the Fife HSCP Strategic planning cycle.

The agreed Participation and Engagement approach is made up from seven identified key areas of activity. These activity areas link together to form an overall framework that coordinates the citizen's voice. This ensures that citizens are heard in the participation and engagement activities, decision making and feedback processes of the Fife HSCP and work within the set of ten principles (as highlighted in section 1.2).

1. Gathering views and community knowledge
2. Individual experience
3. Specific topics - Planning with People - special interests and service redesign and transformation
4. Governance and Accountability through formal meetings
5. Social Media
6. Internal and external supporting infrastructure
7. Consultation Activity.

The following sections provide more detail on the proposed updated approaches. See section 5 of this document for explanation of how the framework and approaches will be supported in relation to implementing the strategy and alignment with formal statutory groups and governance structures of the Integration Joint Board and the Fife HSCP.

2.1 Gathering local community views and knowledge

Participation and Engagement begins and ends with communities, through supporting them to engage with the Fife HSCP and by providing communities with feedback on the impact of their engagement. This type of activity is still acknowledged as one of the most important components in the participation and engagement approach and is a recurring theme in ongoing feedback. The aim is to ensure that individuals within communities can have their voice heard on current and future planning, redesign and delivery including individual experiences in a way that suits them and will allow us to engage directly with and work with individuals that services find hard to reach.

Fife is divided into seven areas for the purpose of planning and delivering services in each locality. These areas are known as 'Localities'. The seven areas are:

- Cowdenbeath (includes Lochgelly, Kelty and Cardenden)
- City of Dunfermline
- Glenrothes (includes Thornton, Kinglassie and Leslie)
- Kirkcaldy (includes Burntisland and Kinghorn)
- Levenmouth (includes West Wemyss, Buckhaven, Methil, Kennoway and Leven)
- North East Fife (includes Auchtermuchty, Cupar, Taybridgehead, St. Andrews, Crail and Anstruther)
- South West Fife (includes Inverkeithing, Dalgety Bay, Rosyth, Kincardine, Oakley, and Saline).



Locality planning is a key element of Health & Social Care Integration and with the enactment of the Public Bodies (Joint Working) (Scotland) Act 2014 has become a legal requirement in relation to the planning and delivery of health and social care services.

Locality Planning arrangements **support** participation and engagement locally and currently provide a platform for carers representatives, local health and social care staff, including the third and independent sectors, Fife Council Community Planning Partners and NHS Fife staff to engage in the planning process to influence the Fife HSCP strategic planning and annual commissioning process.

Public engagement activity with user groups will be specific and informed by local people, professionals who deliver health and social care services in and across communities highlighting 'need' in their area. This includes the analysis of Intelligence led data produced and updated by Local Intelligence Support Team (LIST) Public Health Scotland. For example: at time of writing, the Levenmouth Locality Planning Group informs the locality that there is a need for improving health and wellbeing outcomes for those affected by addictions. In future

the Public Engagement Officers (PEO) will then be focussed on the identified need in each locality to support the gathering of people's views who are most affected by the issues and feed those views back into locality planning groups and the Fife HSCP. This will ensure that there is scope and boundaries around the public engagement activities which is informed by identified need in relation to health and social care services for individuals and across communities.

The Locality Planning Groups will then feed up priorities, views, and action plans to the HSCP Strategic Planning Group for consideration and inclusion in the Strategic Commissioning Plan based on the identified priorities for each locality. Locality Planning and the Strategic Planning Group roles and responsibilities in relation to participation and engagement is explained further in Section 5 of the strategy, How will the Strategy be Implemented in practice 2022 -2025.

The responsibility for locally based engagement does not lie entirely on HSCP PEOs and Locality Planning Groups. Forums, networks, and groups across Fife are constantly involved in engagement activity. The role of the HSCP is to support linking the defined geographical communities with the other community-based engagement structures. This will support better use of collective resources and reduce consultation fatigue.

The approach in each locality will be different and needs to be tailored to meet identified need in each of the seven localities as laid out in their respective annual Locality Plans.

Tailored Models for Participation and Engagement

Tailored models of participation and engagement are in operation across Fife to suit specific communities of interest and their own requirements. Examples include the “Home First” strategy development to transform discharge from hospitals and a model of participation and engagement that will enable active participation by patients and their carers ensuring that they understand and are able to contribute as appropriate to care delivery and discharge planning to enable people to live longer healthier lives at home, or in a homely setting.

To achieve the ambitions set out in national and local strategies for the development and delivery of community-based mental health and wellbeing services and supports in Fife we recognise that we need to strengthen and improve coproduction approaches to meet unmet needs and promote population mental health and wellbeing which puts people who use services and communities at the heart of design. We recognise that this will need a system-wide approach which ensures that every person in Fife can access local mental health services.

A recurring theme emerging from feedback is that, considering rising demand and growing levels of need, current approaches are becoming increasingly unsustainable and new ways of operating are required. There is a growing body of evidence that real improvements to people’s lives can be made by creating additionality that not only expands and improves mental health and wellbeing provision in localities, but that brings about even greater improvement through coproduction approaches that are based on an understanding of what matters most to people in terms of their values, outcomes, and experiences.

Coproduction is an approach to designing with, rather than for people. The Fife HSCP Mental Health & Wellbeing in Primary Care Services (MHWPCS) programme commits to creating the enabling conditions for coproduction whilst ensuring parity of service provision across Fife and greater collaboration at local level. The coproduction process will support those with lived experience to engage as equal partners and will place individuals and communities at the heart of design. Success will be evaluated on the difference that is made to people’s lives.

A programme will be developed with our partners that commits to operating in a way which creates the enabling conditions for **coproduction** whilst ensuring greater **collaboration** and **responsiveness** at a **local level**.

2.2 Individual feedback mechanisms

This approach considers the value of the individual experience and how this can influence individual experience of the care and support they receive and also service changes to achieve positive outcomes. Mechanisms will include:

- The participation and engagement officers will work in Fife's local communities engaging with people and groups that services often find hard to reach to gather their views and feed them back through locality planning structures up to the Integration Joint Board.
- Online feedback systems such as Care Opinion where general comments as well as specific issues can be raised and responded to quickly. Care Opinion will allow us to give people who use our services a seamless way of sharing feedback about their care and treatment, across both health and social care.
- General surveys of people who use services which will be tailored to individual responses as and when required. For example, easy read, read aloud, Braille, ESOL. Where people who do not read or write, read aloud functions are available and where people with learning disabilities are involved we will engage with local advocacy groups and key workers to support people to participate as independently as possible to express their views and opinions.

- Concerns/complaints/ compliments processes are already in place across the partnership. These follow the guidelines provided by the Scottish Public Services Ombudsman. Details on how to make a complaint are readily available to the public online, by leaflet and on premises used by the Partnership. Each organisation ensures that all comments, compliments and complaints are reported to a central point and monitored and recorded in a standard format. Information on complaints across the partnership is collated and reported to the Senior Leadership Team and the Integration Joint Board on a regular basis.
- Clear feedback processes for the public in relation to what has changed as a result of their experience and input

2.3 Planning with People: Specific topics, special interests, service redesign and Transformation

As already identified, during 2021 the Scottish Government issued guidance to NHS Boards, HSCPs and Local Authorities Care services that are planning and commissioning care services in Scotland. This is called **Planning with People Guidance 2021**. Listening to the views of people who use services, and actively involving them throughout the process of planning care delivery, is also a key improvement recommendation of the recent **Independent Review of Adult Social Care in Scotland**. This guidance will help us achieve that widely and with consistency.

As previously identified, a recurring theme emerging from feedback, and in light of the ongoing challenges regarding Covid-19 and recovery resulting in rising demand and growing levels of need, current new ways of operating are required. This strategy commits to operating in a way which creates the enabling conditions for co-production whilst ensuring greater collaboration and responsiveness at a local level.

When services are reviewing strategies, redesigning, and planning change, we will work with the people who use services and those who deliver services to ensure the right people with the right knowledge are involved as early as possible in the co-producing, planning and redesign of services as they relate to each topic.

To do this we will work closely with service providers to ensure that they provide structure to activities and ensure they meet the national engagement standards whilst meeting the agreed objectives of different projects.

Requests for participation and engagement will be directed to the Public Engagement Team following a process that will be based on best methods of engagement for the particular outcome of the request as set out in the national standards for engagement and explained further in **section 3** of this document.

2.4 Social Media

During COVID-19, social media was a great way for individuals and communities to stay connected.. The power of digital and social media solutions will be utilised to help local people find their voice and continue to use these platforms to communicate and engage with our stakeholders.

We will use social media as an effective tool to engage with a large diverse range of people in various ways. Supporting and encouraging wider participation by offering opportunities to build and maintain networks, by offering ongoing communication and various opportunities to become involved in stages from discussion to coproduction. It will enable us to connect with communities who might be interested in collaborating, consulting, and sharing their own lived experience to help inform what services are required in Fife.

Social media will not be used as a replacement for in person activity but will be used as a complimentary tool alongside traditionally recognised face to face methods for engagement and participation.

2.5 Governance and Accountability – Engagement with Fife HSCP Integration Joint Board

We know that formal meetings and bureaucratic processes often put people off or prevent people from participating and engaging in planning and redesign of services. Therefore, we aim to limit the number of formal meetings and simplify the way the public voice is heard in HSCP. It is recognised that some activity will need to continue through formal meetings and that there needs to be a framework to ensure accountability and good governance, but this will play a smaller part and will be more focussed in line with the updated strategy.

It is proposed that a new Fife wide “Community Engagement Forum” is developed. This will be aligned to the Strategic Planning Group and already established seven Locality Planning Groups and will be fully supported by the Fife HSCPs Participation and Engagement Team. Other existing established networks will be aligned to this forum with input from the Third and Independent Sectors which will be critical in terms of building capacity to deliver on the proposed model for Participation and Engagement. This will be a structured and supported forum for public representatives. A structure is set out in **section 6** of this document Consultation on Proposed New Model of Engagement and Participation. The newly formed Community Engagement Forum will have

carers and public representation. A process for electing public representatives will be put in place.

The Community Engagement Forum will not be a public engagement ‘forum’ for members of the public to attend and raise issues or enter into debate with staff on personal agendas but is a forum that members of the public are entitled to attend and observe.

Through the Fife HSCP’s Strategic Planning Group and Locality Planning structures, the people of Fife, and local Third and Independent Sector organisations will have a much stronger voice and active role via the Community Forum. There will be a direct route of engagement and role in influencing the strategic planning and commissioning process and ultimately enable the community and public voice to influence the decisions made by the Fife HSCP Integration Joint Board.

In Fife, our Third and Independent sectors are already partners in decision making structures of the Integration Joint Board and its Committees, Strategic Planning Group and Locality Planning Groups as well as key partners in transformation programmes across health and social care. The Integration Regulations state that the Integration Joint Board must have a carer and service user as Integration Joint Board members. We will continue to build on these relationships to ensure we make better use of the experience and knowledge they bring and to ensure a more efficient use of collective resources across Fife by formalising involvement and representation on the community forum.

2.6 Remit of the Community Engagement Forum

The remit of the Community Engagement Forum is to

- Feed the voice of the people of Fife up to the Integration Joint Board via the Strategic Planning Group and the Integration Joint Boards Carer Representative and Public Representative.
- Provide a feedback loop from the IJB back to localities and local group regarding decisions made by the IJB as a result of feedback from localities and communities.
- Understand where we need to do more work using the themes emerging from Care Opinion and complaints mechanisms.
- Be sighted on service changes planned and underway in relation to the HSCP.
- Understand emerging themes for carers.
- Consider equalities issues.
- Monitor and review the development and implementation of the Fife HSCP Integration Joint Boards Participation and Engagement Strategy.

The Community Engagement Forum will be responsible for ensuring the public voice is heard in line with agreed principles and support the changes being developed in line with the agreed approach. They will also be key to the ongoing evaluation of the model.

Membership of the Community Engagement Forum will include:

- Public Representatives
- Third and Independent Sector
- IJB Member
- Members of FHSCP Forums
- Representatives from Fife's Health & Social Care Third Sector Interface Forum

2.7 Consultation Activity

We already benefit from existing mechanisms and approaches to consultation activity across our Third and Independent sectors, NHS Fife, and Fife Council. The strategy will seek to learn from the past and improve the quality of participation and engagement methods and better coordinate activities with our partners avoiding consultation fatigue and duplication of effort across services and partners.

To ensure the HSCP consults effectively with communities regarding proposals for the delivery of health and social care we will utilise existing networks across the Third and Independent Sectors, NHS Fife, and Fife Council.

Fife Voluntary Action including our Third and Independent sectors and organisations have in place various support networks and user group panels such as carer support representatives, and mental health alcohol and drugs groups. When relevant and appropriate we will engage with these organisations and groups to ensure we have the voice of lived experience included in all feedback.

NHS Fife hosts a directory of virtual group of patients, carers, members of the public, and community groups who have an interest in knowing about and improving local health and care services in Fife. Being a member of the Directory for health and care means people receive up to date information about the health and care services that are developing and proposals regarding changes to services. Members of the virtual directory can get involved in one-off discussion groups giving their views and opinions on proposals and be involved in working groups to influence decisions regarding changes.

Fife Council also host Fife People's Panel which is an online group of people who have volunteered to help improve Fife by giving their opinions and observations on a variety of public issues.

Panel members receive questionnaires (either online or by post) around four times a year and may also be invited to participate in telephone surveys, focus groups, or other consultation projects.

2.8 Putting in place an internal and external supporting infrastructure

The above approaches will be supported and resourced through the existing infrastructures currently in place but realigning them to the Locality Planning Groups, Community Engagement Forum (CEF), Strategic Planning Group (SPG), Qualities and Communities Committee and the Integration Joint Board. To make this work we know that there needs to be leads with capacity to undertake engagement activity within each locality and provide support for public engagement in service changes, strategic plan reviews and service redesign. We now have a new service development for Participation and Engagement within the Fife HSCP with a team of four staff who will be responsible for working alongside all partners and communities to make this updated strategy work. Additional funding may need to be identified to provide administrative support and communications moving forward.

The Community Engagement Forum mentioned in **section 2.5** of this document will be made up of members of community representatives, the IJB, SPG, Locality Planning Groups, and will be chaired by advisors representing the Third and Independent sectors and equalities groups.

Through the locality planning structure, the people of Fife and local Third and Independent sector organisations can play an active role in the forum and have a direct route of engagement and role in the decisions made by the Integration Joint Board.

Developing Fife wide Engagement across Communities and Localities

Most of the participation and engagement activity will take place at a local level through existing networks and groups and with individuals and will be the main methods for members of the public to get involved and engage in two-way communication on the work of the Integration Joint Board. There is also an important role for Fife wide activity.

Examples of Fife wide activities include how the public influence service planning and delivery which includes the development of the Fife HSCP Strategic Plan and associated strategies, Locality Plans, and ongoing consultation on transformational change programmes.

As part of the process of Fife wide engagement, we will close the feedback loop with communities via the seven-locality planning networks to ensure people are able to see the impact of their involvement as well as the difference that has been achieved because of the decisions made or implemented.

This might include hosting engagement events when appropriate or making use of social media and use current planning and engagement structures that exist across the Fife HSCP.



Each Locality Planning Group hosts an annual event to report back to their Wider Stakeholder Group which includes all partners, including interested volunteers such as carers representatives. These events highlight the work and activities that have taken place and report on what was delivered and to identify and explore with them next steps to discuss issues and priorities of shared importance and to influence priorities of annual Locality Plans to feed into the strategic commissioning plan. It is proposed that to avoid duplication and confusion we will redesign our annual locality planning wider stakeholder events to include the newly formed Community Engagement Forum so that they come together on an annual basis.

The topics for discussion would mainly focus on the Strategic Planning Group receiving information from the public but also to share information from each locality planning group to and from the Fife wide Community Engagement Forum. This means we will coordinate and bring together the various local and Fife wide internal and external groups which includes public representatives to engage on issues of importance to communities.

The topics for discussion would focus mainly on.

- Understanding where more work needs to be done using the priorities emerging from public feedback through information gathered from the views gathered across communities by the Public Engagement Officers, Care Opinion and Complaints, analysis of data as they relate to intelligence led locality profiles and the voice of people who deliver HSC services in and across communities.
- Understand emerging themes coming from Carers.
- Feedback from the Integration Joint Board via the newly formed Community Engagement Forum.
- Consider any equalities issues.
- Service changes planned and underway.
- 'Our Voice' National Updates.

The Community Engagement Forum will plan the work that is required for the following year and ensure the public voice is heard in line with agreed principles and to support changes being developed. The Community Engagement Forum will also be key to ongoing evaluation of the model and Strategy.

3. National Standards, Guidance and Programmes for best practice

Fife HSCP is committed to providing person centred care and services. Participation and Engagement activity for services will comprise of the seven elements, as previously mentioned in section 1, albeit that engagement activities will be bespoke to each service and will therefore look different. In order to do this, we will make use of the following well-known standards, programmes and methods which are tried and tested nationally. They will underpin all participation and engagement activities undertaken with individuals, communities, services, and staff.

3.1 Voices Scotland

Chest Heart and Stroke Scotland (CHSS) has developed a Voices Scotland Programme which supports individuals and communities, and support groups and organisations by providing the knowledge, skills, and confidence to help people have their say and influence local and national health and social care services.

3.2 The Participation Toolkit – Healthcare Improvement Scotland

The Participation Toolkit is intended as a resource for staff across the public, private and voluntary sectors to help them involve people in shaping and improving services.

3.3 National Standards for Community Engagement

The National Standards for Community Engagement are good-practice principles designed to improve and guide the process of community engagement. Community engagement is a way to build and sustain relationships between public services and community groups - helping them both to understand and take action on the needs or issues that communities experience.

4. Fife Health and Social Care Partnership Support Team

The newly appointed HSCP Participation and Engagement Service Manager along with the three Public Engagement Officers and the Locality Planning Coordinator will provide:

- A point of contact and day-to-day support and advice for volunteers involved in participation and engagement activity.
- Ensure guidance and governance to support a system that has minimal bureaucracy but is safe, effective, legal, and sustainable.
- Provide administration and organisation to support all our participation and engagement work (needs supported by business support).
- To work closely with recognised groups and partners that are valuable resources and should be used more regularly to gather public views and as a source of volunteers for specific topics.

The newly appointed Public Engagement Officers role is primarily to engage with and support public members particularly those who use H&SCP services (such as carers) so

that they can effectively influence change; to help them to identify and act on community needs and ambitions and to influence the strategic commissioning plan.

The Public Engagement Officers will:

- Work within and with local communities.
- Gather information from individuals and existing local groups.
- Provide a clear route to Locality Planning Groups exchanging of information between communities and HSCP and the IJB.
- Encourage and support seldom heard groups and voices.

They will provide the Locality Planning Groups with the public voice to be fed into the Strategic Planning Group and upwards into the Integration Joint Board as shown in the model diagram in figure 1.

Figure 1
**Integrated Model for Public Engagement
Fife Integration Board**



5. How will the Strategy be Implemented in practice 2022 -2025?

Localities exist to ensure that the benefit of better integration improves health and well-being outcomes. They provide a local forum for professionals, communities, and individuals to inform redesign and improvement for their locality and avoid a top-down approach.

Localities Role

Localities feed into the annual strategic commissioning process a collective view on what needs to be made available in respect of their locality – with a focus on local design, delivery, and priorities.

Localities are also represented on the Strategic Planning Group

The groups on an on-going basis decide on proposals from local clinicians and professionals, people using services and communities on ways to improve the delivery of services for the locality.

5.1 People and Professionals Involved in Locality Planning

The relevant and appropriate people are represented on Locality Planning Groups which include:

- Health and social care professionals
- Carers Representatives
- Representatives of third and independent sectors
- Representatives of the housing sector
- Carers and people using services reps
- People managing services in the area of the integration authority.

Working from a “top-down, bottom-up” approach we aim to reach all our communities and ensure their voices are heard. To do so we have identified how this could be achieved. Figure 2 in **section 6** of this document Consultation on Proposed New Model of Engagement and Participation illustrates how we will successfully achieve working with our communities and making decisions based on their needs and requirements.

5.2 Strategic Commissioning Plan

The Public (Joint Working) (Scotland) Act 2015 sets out the requirements for integrated bodies to develop a local Integrated Strategic and Commissioning Plan.

5.3 Strategic Planning Group (SPG)

Each integrated body is required to establish a Strategic Planning Group (SPG) for the purpose of preparing the commissioning plan.

The SPG is concerned primarily with support and informing the development process for the Fife HSCP's Strategic Commissioning Plan, together with ongoing iterative reviews. It provides stakeholder advice to the Integration Joint Board. Details of the representatives of this group can be found within the table shown in **Appendix 5**.

The Implementation of this strategy will align with the remobilisation of groups across Fife and will also align with the three priorities for application of the approach for the next three years placing communities and services users at the heart of planning and design. The priorities for action include:

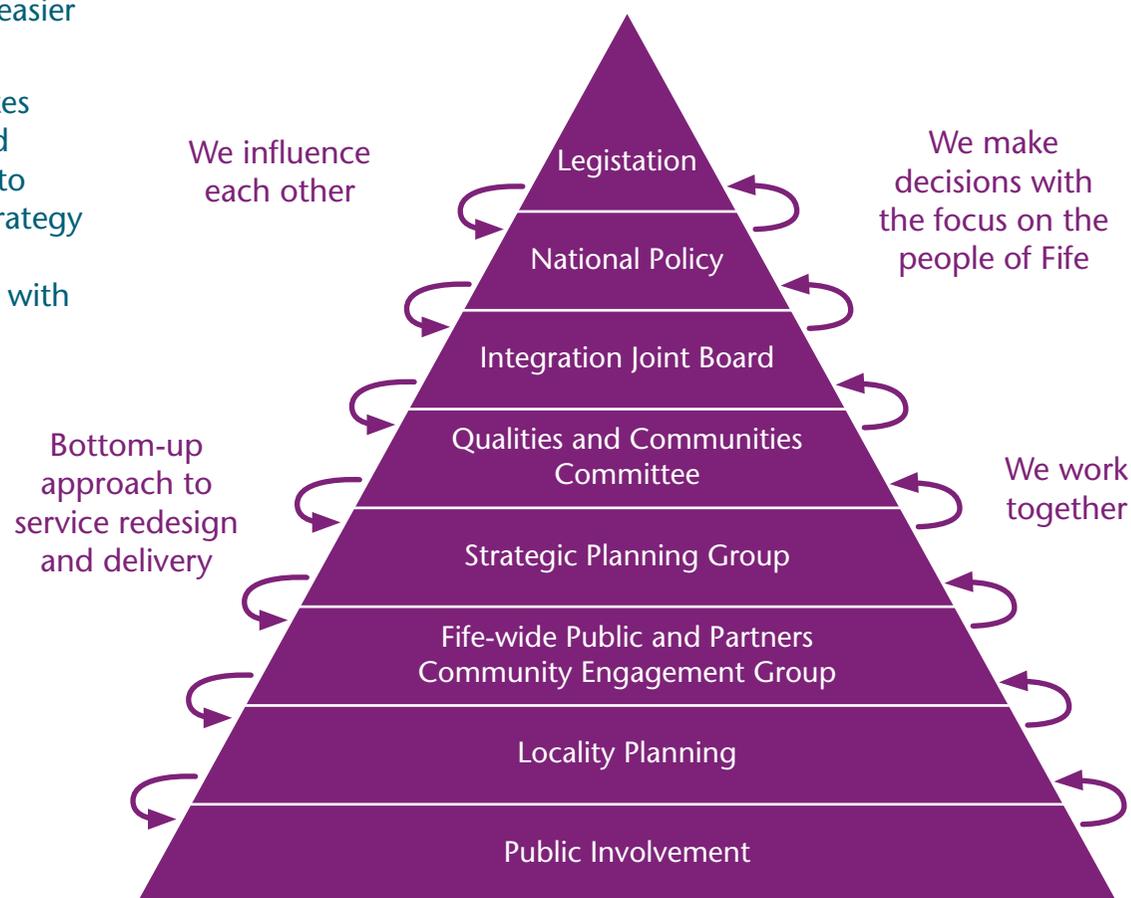
- Those agreed within the Strategic Plan for Fife
- The priority areas set out within the NHS Critical Care Strategy
- Priorities emerging from service redesign changes identified by the public.

6. Consultation on Proposed New Model of Engagement and Participation

The proposed model was sent out to wider participation networks in Fife in April 2020. There was a total of 71 respondents. The majority of respondents agreed with the proposed approaches agreeing that they would make it easier to have their voice heard.

The table Activity Timeline shown in **appendix 5** illustrates a timeline of engagement and participation activities and has informed and will ensure a co-production approach to producing an updated Participation and Engagement Strategy for Fife and will ensure that future activity will meet with legislative requirements as outlined in **appendix 4** along with the Fife HSCP's expectations for locality planning.

Figure 2
Working from a “top-down, bottom-up” approach



Appendix 1

Key stakeholders

Figure 3: Key Stakeholders



Appendix 2

List of Services

What services does the Fife Health and Social Care Partnership covers?

The Strategic Plan will cover all services delegated to the IJB as set out in the Integration Scheme. The budget for these services amounts to over £600m annually involving a workforce of around 5,500 staff. Those services, for which budgets are delegated and services managed by the Fife Health and Social Care Partnership, are:

Fife Council

- Social work services for people aged 16 and over
- Services and support for adults with physical disabilities and learning disabilities
- Mental health services
- Drug and alcohol services
- Adult protection and domestic abuse services
- Carers support services
- Community care assessment teams
- Support services
- Care home services
- Adult placement services
- Health improvement services
- Aspects of housing support, including aids and adaptations
- Day services
- Local area co-ordination
- Respite provision
- Occupational therapy services
- Reablement services, equipment, and telecare.

Housing

The interface with housing is crucial to the success of the integration agenda. The housing functions, which are delegated to the Integrated Health and Social Care Fife HSCP are described fully in the Health & Social Care Strategic Plan include:

- Housing support services
- Housing adaptations.

NHS Fife

- Community Services
- District nursing services
- Substance misuse services
- Services provided by allied health professionals in an outpatient department, clinic, or out with a hospital
- The Public Dental Service
- Primary Medical Services
- General Dental Services
- General Ophthalmic Services
- General Pharmaceutical Services
- Community geriatric medicine services
- Community palliative care services
- Community learning disability services
- Community mental health services
- Community continence services
- Services provided by health professionals that promote public health
- Community children's services
- Sexual Health Service
- Rheumatology Service
- Health visitors
- School nursing
- Community Children and Young Persons Nursing Service

- Family nurse Fife HSCP team
- Child health administration team
- Allied health professions
- Child protection nursing team.

Hospital Inpatient Services

- Community hospital inpatient facilities
- Palliative Care inpatient services
- Psychiatry of learning disability
- Mental Health including Forensic.

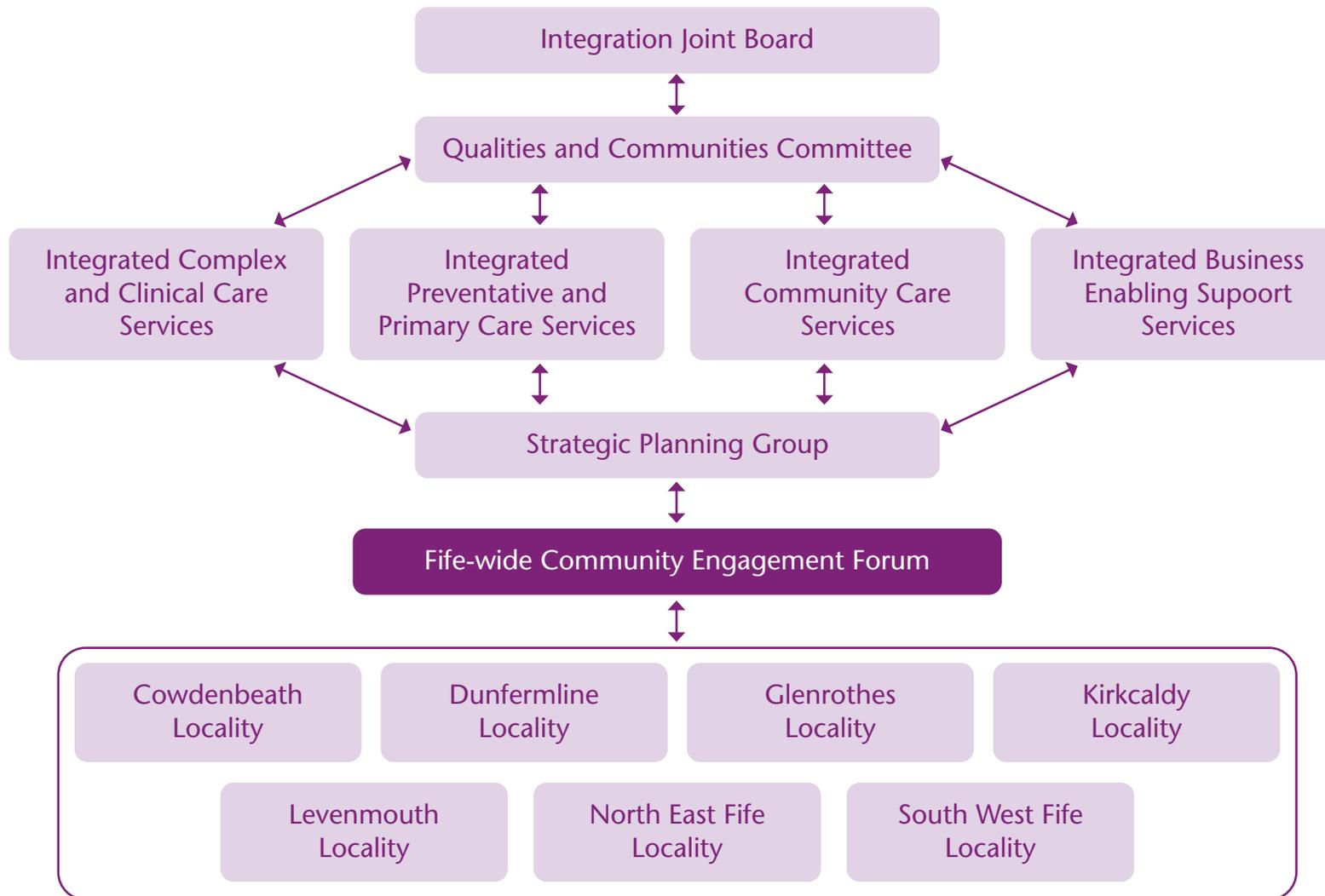
Fife HSCP will be responsible, also, for strategic planning of those aspects of acute hospital care which are most commonly associated with emergency care i.e., specialties where most of the unplanned hospital admissions are for adults. These are areas where there may be potential to design and deliver services to prevent admission. The operational management remains the responsibility of the Acute Services Division of NHS Fife. These services include:

- Accident and Emergency services provided in a hospital
- Inpatient hospital services relating to:
 - general medicine
 - geriatric medicine
 - rehabilitation medicine
 - respiratory medicine.

Appendix 3

Governance Arrangements for Participation and Engagement in Health and Social Care

Figure 4



Public Engagement Officers x3

- Work in and with local communities
- Be the clear route to feedback and exchange information across communities, Localities, SPG up to IJB.
- Gather information from individual's and existing networks e.g. Carers Centre, Local Area Coordination, The Wells and other existing local groups.

Appendix 4

Current Legislative and Policy Landscape

Legislative and Policy Context

The Public Bodies (Joint Working) (Scotland) Act 2014

The Public Bodies (Joint Working) (Scotland) Act 2014 sets the framework for integrating adult health and social care, to ensure a consistent provision of quality, sustainable care services for the increasing numbers of people in Scotland who need joined-up support and care, particularly people with multiple, complex, long-term conditions.

It sets out what the Scottish Government is aiming to achieve. It's established a set of nationally agreed outcomes, which will apply across health and social care, and for which NHS boards and local authorities will be held jointly accountable.

Users of health and social care services can expect to be:

- listened to
- involved in deciding upon the care they receive
- an active participant in how it is delivered

This will mean better outcomes for people, helping them enjoy better health and wellbeing in their homes and communities.

Planning with People – published In March 2021 the Scottish Government and COSLA published Planning with People. This document provides guidance which applies to all care services. It supports organisations to deliver their existing statutory duties for engagement and public involvement, with a direction that it should be followed not only by health and social care providers but also by local, regional, and national planners, Special Boards and all independent contractors and suppliers such as care homes, pharmacies and general practices. The Planning with People Guidance replaces **CEL 4 - Chief Executive Letter 4** guidance relating to engagement required for Informing, Engaging and Consulting People in Developing Health and Community Care Services set out in the Scottish Government document CEL 4

Health and social care integration - localities: guidance - gov.scot (www.gov.scot) The Public Bodies (Joint Working) (Scotland) Act 2014[1] (the Act) puts in place the legislative framework to integrate health and social care services in Scotland. Section 29(3)(a) of the Act requires each Integration Authority to establish at least two localities within its area.

This guidance reinforces the importance of localities. Achieving the aspirations, we share for health and social care integration will rely upon partners across the health and social care landscape, and their stakeholders, focussing, together, on their joint responsibility to improve outcomes for people. Every locality will involve a range of people from different backgrounds, who are accustomed to different working styles and arrangements.

CEL 4 - Chief Executive Letter 4 (CEL 4). NHS Boards are required to involve people in designing, developing, and delivering the health care services they provide for them. A Board is responsible for ensuring that the informing, engaging, consulting process is fully accessible to all equality groups and ensuring that any potentially adverse impact of the proposed service change on different equality groups has been taken account by undertaking an equality impact assessment. Where a Board is considering consulting the public about a service development or change, it is responsible for

- Informing potentially affected people, staff and communities of their proposal and the timetable for engagement and decision-making
- Ensuring that the process is subject to an equality and diversity impact assessment
- Ensuring that any potentially adverse impacts of the proposed service change, on, for example, the travel arrangements of patients, carers, visitors and staff, have been taken account of in the final proposal
- Providing evidence of the impact of this public involvement on the final agreed service development or change. Where a proposed service change would impact on the public in another area, the Board proposing the change should lead the public involvement process. The Board, and any other affected Board(s), should aim to maximise the involvement of affected individuals and communities in the process.

The Community Empowerment Act (Scotland) 2015

The Community Empowerment (Scotland) Act 2015 The Act is based on the principles of subsidiarity (that social and political decisions are taken at as local a level as possible), community empowerment and improving outcomes. Underpinning all these provisions is the intent to focus attention on reducing disadvantage and inequality.

The aims of the legislation are to:

- Empower community bodies through ownership of land and buildings and through strengthening their voices in the decisions that matter to them
- Support an increase in the pace and scale of public sector reform by cementing the focus on achieving outcomes and improving the process of community planning.

Part 1. National Outcomes: This requires Scottish Ministers to continue the approach of setting national outcomes for Scotland, which guide the work of public authorities.

Part 2 is about strengthening community planning, so communities have more of a say in how public services are to be planned and provided.

Part 3 enables communities to identify needs and issues and request action to be taken by public bodies on these. These are known as participation requests.

Part 4 and **part 5** extend the community right to buy or otherwise have greater control over assets.

Commission on the Future Delivery of Public Services -

This Commission, chaired by Campbell Christie, highlighted that, if they are to be effective, public services must empower individuals and communities by involving them in both the design and delivery of services. Such an approach requires understanding the needs of communities and working together. It advocated a fundamental overhaul of the relationships between institutions responsible for delivering public services and the needs of individuals and communities.

2021 Independent Review of Adult Social Care – A key recommendation from this independent review led by Derek Feeley and published in 2021 was to listen to the views of people who use services and actively involve them throughout the process of planning care delivery.

National Standards for Community Engagement - National Standards for Community Engagement (Scottish Development Community Centre) applies to all engagement. The seven National Standards for Community Engagement as set out by The Scottish Executive are INCLUSION, SUPPORT, PLANNING, WORKING TOGETHER, METHODS, COMMUNICATION, IMPACT.

The Gunning Principles (R v London Borough of Brent ex parte Gunning 1985) - The Gunning Principles are the founding legal principles applicable to public consultation in the UK. They consist of four principles, which if followed, are designed to make consultation fair and lawful: 1: Consultation must be at a time when proposals are still at a formative stage, 2: Sufficient reasons must be put forward for any proposal to permit “intelligent consideration” and response, 3: Adequate time is given for consideration and response, 4: The product of consultation is conscientiously taken into account by the decision maker(s).

Freedom of Information (Scotland) Act 2002 - An Act of the Scottish Parliament which gives everyone the right to ask for any information held by a Scottish public authority

Human Rights Act - In Scotland, civil and political rights are protected by the Human Rights Act 1998 and provisions in the Scotland Act 1998. These rights come from the European **Convention on Human Rights (ECHR)**.

NHS Reform (Scotland) Act 2004 - The Act of the Scottish Parliament contains a section on Public Involvement. Under Duty to Encourage Public Involvement, it states, 'It is the duty of everybody to which this section applies to take action with a view to securing, as respects health services for which it is responsible, that persons to whom those services are being or may be provided are involved in, and consulted on — (a) the planning and development, and (b) decisions to be made by the body significantly affecting the operation, of those services. (2) This section applies to — (a) Health Boards, (b) Special Health Boards, and (c) the Agency. (3) For the purposes of subsection (1) a body is responsible for health services if they are health services.

Fairer Scotland Duty 2018 - The Fairer Scotland Duty, Part 1 of the Equality Act 2010, places a legal responsibility on particular public bodies in Scotland to actively consider ('pay due regard' to) how they can reduce inequalities of outcome caused by socioeconomic disadvantage, when making strategic decisions.

Healthcare Improvement Scotland Community Engagement participation toolkit - The Participation Toolkit suggests a range of tools, guidance and resources which can be useful for planning community engagement.

Healthcare Improvement Scotland Quality Framework for Community Engagement - This framework developed by NHS Healthcare Improvement Scotland is currently being tested by a mix of Fife HSCPs and health boards.

Local Strategies

- **Plan for Fife 2021-24 | Our Fife - Community portal**
The Fife HSCP has a vision for Fife as place where communities really matter, where people set the agenda and contribute to how change is being delivered.
- **Fife Health and Social Care Fife HSCP Strategic Plan**
- **Fife Health and Social Care Locality Plans**
 - **Getting to Know Glenrothes**
 - **Getting to Know Cowdenbeath**
 - **Getting to Know Levenmouth**
 - **Getting to Know Dunfermline**
 - **Getting to Know Kirkcaldy**
 - **Getting to Know North East Fife**
 - **Getting to Know South West Fife**

Appendix 5

Activity Timeline

	Activity	Date	Process	Outcome / Next Steps
1	<ul style="list-style-type: none"> IJB Strategy Review Working Group - Members of the Integration Joint Board including Carer and Service User Representatives, elected members, NHS staff, Third sector 	17/12/21	<ul style="list-style-type: none"> Review of previous strategy 2016 – 2019 The role and statutory responsibilities of the IJB The purpose of the revised strategy Highlights from the previous strategy Proposals for the new strategy Next steps for the group Mapping current landscape for public engagement and participation Local structures for public engagement alongside existing Locality Planning structures Fife wide structure (Care opinion for example) Engagement with the Integration Joint Board through the Strategic Planning Group structure and future committees Engagement with the Third, Independent & Private Sector's Consultation activity Equalities Plan for Fife. 	<ul style="list-style-type: none"> Co-production and co-delivery of strategy with all partners / services / people Minimise meetings for the public – go out to the public Use of existing engagement structures i.e., third sector user panels, peer support networks, Fife People Panel, NHS Public Partners virtual volunteers Clarity of what we 'can' do and what we 'can't' do relating to outcomes of engagement Furthering lived experience involvement Working within localities Considering seldom heard group engagement Underpinning honesty, integrity, and objectivity Using the good conversation aspect to gather feedback, person centred approach Ensuring the people of Fife know what services are currently in place to help inform what can be improved. Public engagement team to refresh draft strategy Input on impact of the Independent Review of Adult Social Care recommendations and Planning with People Guidance, take account of review recommendations, new guidance and statutory duties of the IJB and the changes to the Fife HSCP's structure and leadership.

Activity	Date	Process	Outcome / Next Steps
2	<ul style="list-style-type: none"> IJB Strategy Review Working Group - Members of the Integration Joint Board including Carer and Service User Representatives, elected members, NHS staff, Third sector 	<ul style="list-style-type: none"> The evolving approach to participation and engagement. National Standards for Community Engagement which provide a framework of clear principles – inclusion, support, planning, working together, methods, communication, and impact. Standards for Community Engagement – levels of engagement. Principles of community engagement. Community engagement process. HSCP success statement ‘we can show how local voices are helping us design the future of the Fife HSCP’, based around the National Outcomes. <p>continued /</p>	<ul style="list-style-type: none"> Strategic Planning Group – requires to be remobilised Localities groups to be remobilised Develop processes to gather public views across communities that don’t expect the public to attend meetings all the time. Develop one community forum Local Public - Purpose to develop public voice and into the Strategic Planning Group via locality planning groups. Ensuring the forum is accountable and effective, potentially a third sector representative fully supported by the public engagement officers who will support and develop the forum. Training through The Voices training for representatives Participation and engagement team meet with people and groups, services and find seldom heard people homeless projects, addictions projects etc to assist in bring the voice in. Develop Fife wide Community Engagement Group - A structured strategic group with representation from the locality groups, local public engagement forums and the Strategic Planning Group. This group to feed into the IJB via the SPG. The remit for this forum will be across health and social care Carer’s representatives Review relaunch of Care Opinion –relaunch

Activity	Date	Process	Outcome / Next Steps
2	<ul style="list-style-type: none"> IJB Strategy Review Working Group - Members of the Integration Joint Board including Carer and Service User Representatives, elected members, NHS staff, Third sector 	21/01/22 <ul style="list-style-type: none"> Proposed HSCP vision 'enable the people of Fife to live healthy independent lives by ensuring all our stakeholder views, experiences and ideas are included in the design and delivery of health and social care services that meet the needs and aspirations of the people of Fife', links into the strategic vision, strategic plan, and strategic objectives. The revised strategy goals. The revised strategic objectives. Proposed integrated strategic public engagement structure (IJB Strategic Context). Integrated model for participation and engagement and how this will be achieved. Integrated model for public engagement (IJB). Way forward – Action Plan. 	<ul style="list-style-type: none"> considering the pandemic and where does this fit into the proposed structure. Pilot test proposed structure in a small number of areas to keep the process manageable ahead of rolling out to the seven localities challenges regarding Covid-19 and recovery has resulted in rising demand and growing levels of need, current new ways of operating are required. Real improvements to people's lives can be made by creating greater improvement through coproduction approaches that are based on an understanding of what matters most to people in terms of their values, outcomes, and experiences.

Activity	Date	Process	Outcome / Next Steps	
3	<ul style="list-style-type: none"> IJB Strategy Review Working Group - Public & Carer Rep Sub Meeting 	02/02/22	<ul style="list-style-type: none"> Reviewed goal and objectives Reviewed streamlined integrated model structure Reviewed governance arrangement structure Reviewed recruitment of public representatives on IJB Sought approval of both structure and governance arrangements 	<ul style="list-style-type: none"> Further explore recruitment mechanism of public and carers representation on IJB Revised new strategy to be written around the Fife HSCPs success statement regarding Participation & Engagement. Work towards developing the refreshed strategy around existing approaches and principles as they are still relevant today and what gets feedback through existing mechanisms.
4	<ul style="list-style-type: none"> IJB Strategy Review Working Group - Members of the Integration Joint Board including Carer and Service User Representatives, elected members, NHS staff, Third sector 	18/02/22	<ul style="list-style-type: none"> Build and harness relationship with public through consistent and meaningful engagement 	<ul style="list-style-type: none"> Build a model for Public Engagement that meets strategic goals & objectives of the team and the partnership as a whole
5	<ul style="list-style-type: none"> Carers Representatives Group supported by Fife Voluntary Action – Voices Training 	25/02/22	<ul style="list-style-type: none"> Carer’s representatives need their own platform to have their voices heard at strategic and planning level 	<ul style="list-style-type: none"> Need to develop a more formal process for carers to have their voice heard like a ‘Community of Carers’. This would mean that a representative from this group could represent the voice of Carers at the Integration Joint Board

	Activity	Date	Process	Outcome / Next Steps
6	Carers Centre	10/03/22	<ul style="list-style-type: none"> Identify process for recruitment of carers representatives at IJB level. Sharing of thoughts about how carers representatives should and could be supported locally and at IJB level Identify transparent and open process for recruitment of public representative at IJB level 	<ul style="list-style-type: none"> The Fife HSCP needs to undertake a fair, open transparent process in the recruitment of Carers Representatives who represents the voice of Carers at IJB level. This needs to be communicated across various platforms, radio advert, videos Any new forum to support carers needs to link in with the Carers Centre The IJB need to consider how to make board meetings work for carer representatives. Example: have carers and public feedback first on the agenda for board meetings. The IJB papers need to be much more accessible to carer representatives and distributed timely to give carers representative time to read papers Understood that the HSCP in Fife has not integrated children's services but we still need to consider how adult carers of children needs are being met. Need to understand and consider how we bring carers of children, adults, and older people and how this could and should work
7	Online Engagement Event	13/04/2022 (am)	<ul style="list-style-type: none"> An independent organisation needs to be identified to chair the proposed Fife Wide Community Engagement Forum 	<ul style="list-style-type: none"> Majority of participants are in favour of the proposed approaches over the next three years.

Activity	Date	Process	Outcome / Next Steps
8 Online Engagement Event	13/04/2022 (PM)	<ul style="list-style-type: none"> Ensure that there are various methods of collecting individual experiences that do not rely on use of technology 	<ul style="list-style-type: none"> Majority of participants are in favour of the proposed approaches over the next three years
9 Online Engagement Event	14/04/2022 (am)	<ul style="list-style-type: none"> Chair and remit of the Community of Carers needs to be agreed with carers. Community of carers needs to ensure that all carers are represented 	<ul style="list-style-type: none"> Majority of participants are in favour of the proposed approaches over the next three years
10 Online Engagement Event	14/04/2022 (evening)		<ul style="list-style-type: none"> Majority of participants are in favour of the proposed approaches over the next three years
11 People First (online)	9/05/2020	<p>The top health and social care issues for adults with learning disabilities are</p> <ul style="list-style-type: none"> Housing Access to information Access to support such as how to manage finances and day-to-day living Day services and community-based groups Building up our communities to increase our confidence 	<ul style="list-style-type: none"> proposed approaches are good ways of communicating.

Activity	Date	Process	Outcome / Next Steps
People First (Face to Face)	11/05/2022	<ul style="list-style-type: none"> • The top health and social care issues for adults • with learning disabilities are • Closure of day services and community groups. • Care at home and housing support. • Easy read information including signs in public places. • Good quality of support to help people to live independently. • Community centres and local activities. 	<ul style="list-style-type: none"> • Participants agreed proposed approaches are good ways of communicating.
People First (Face to Face)	12/05/2022	<ul style="list-style-type: none"> • The top health and social care issues for adults with learning disabilities are • Lack of services • More resources need to be available • Waiting lists for services such as housing are too long • Community based services / Day Services • Clear and open conversation with us is important so we know what is going on 	<ul style="list-style-type: none"> • proposed approaches are good ways of communicating.

Appendix 6

Participation and Engagement Action Plan

No.	Action	Owner	Timescale	Outcome
1	Develop a Strategy Framework & Communications Plan Adapt the stakeholder engagement framework adapted the Reimaging Third Sector Commissioning Plan	Participation & Engagement Team	December 2022	Framework that sets out how we will undertake engagement activity with people to design our approaches to planning, delivering, and monitoring public involvement in the decision making of the Integration Joint Board and where appropriate service changes in Health and Social Care.
2	In collaboration with key stakeholders and partners develop a process to recruit Carer and Public representatives to represent Carers and Public on the Integration Joint Board			Encourage and harness public participation in decision making of the IJB through membership of recognised formal structures
3	In collaboration with key stakeholders and partners establish Fife Wide engagement network or seven forums across localities (depending on resource available) to feed the voice of local communities up to the Integration Joint Board. This will include inclusivity group representatives			Inclusive communication that is coordinated across communities, localities up to the Integration Joint Board and back to communities Services are planned and developed in a way which actively and engages with the community and local professionals
4.	In collaboration with key stakeholders and partners establish 'Community of Carers' network that supports carers voices to be fed into the Integration Joint Board via the Integration Joint Board Carer Representative			Inclusive communication that is coordinated across communities, localities up to the Integration Joint Board and back to carers Encourage and harness public participation in decision making of the IJB through membership of recognised formal structures

No.	Action	Owner	Timescale	Outcome
5	Put in place an internal and external supporting infrastructure for when HSC delegated services are reviewing strategies, redesigning, and planning change to ensure the right people with the right knowledge are involved as early as possible in the co-producing, planning and redesign of services and strategies as they relate to each topic.		September 2022	Services are planned and developed in a way which actively and systematically engages with the community and local professionals so that services are redesigned in a person-centred way.
6.	Develop Communication and Engagement Mechanisms for example an Engagement Tracker that seeks to track what engagement activities are planned and what the result was.	Participation & Engagement Team		To ensure meaningful two-way participation and engagement around the integration of health and social care
7.	Relaunch of Care Opinion	Participation & Engagement Team	September 2022	Ensure all people can have their voice heard as an individual person who uses services without needing to join a structured meeting
8.	Develop participation guidelines to ensure a common understanding and set of expectations for both stakeholders and partnership staff	Participation & Engagement Team		

No.	Action	Owner	Timescale	Outcome
9.	Develop links to HSCP locality planning structures to identify priority areas for participation and engagement	Participation & Engagement Team		Localities can consult with communities on identified priorities
10	Develop and ensure the partnership allocates appropriate financial resources and volunteer support by developing Volunteer Induction Guidelines Volunteers Expenses Guidelines			Make sure community, service user and carer representatives are not worse off as a result of contributing to the work of FHSCP and there is provision for out-of-pocket expenses Make sure volunteers can be supported in their role as carer and public representatives contributing to the work of FHSCP.
11	Engagement opportunities should be accessible and engagement materials offered in accessible formats			

Glossary

Defining community engagement

- Community refers to a group of people that share a common place, a common interest, or a common identity. There are also individuals and groups with common needs. It is important to recognise that communities are diverse, and that people can belong to several at a time.
- Engagement covers a range of activities that encourage and enable people to be involved in decisions about issues that affect them. This can range from encouraging communities to share their views on how their needs are best met and influence how services should be delivered, to giving communities the power to inform decisions and even provide services.

The National Standards for Community Engagement defines engagement as:

'A purposeful process which develops a working relationship between communities, community organisations and public and private bodies to help them to identify and act on community needs and ambitions. It involves respectful dialogue between everyone involved, aimed at improving understanding between them and taking joint action to achieve positive change.'

What do we mean by participation?

Participation refers to the service user or public involvement processes by which perceptions and opinions of those involved are incorporated into decision making (**Scottish Council Participation Toolkit**) It is used as an umbrella term for the numerous words and phrases used to describe involving people in:

- Decisions about their own health and care
- Shaping and influencing service provision as communities of interest or geography, and
- Working in Fife HSCP with service providers.

What do we mean by levels for engagement?

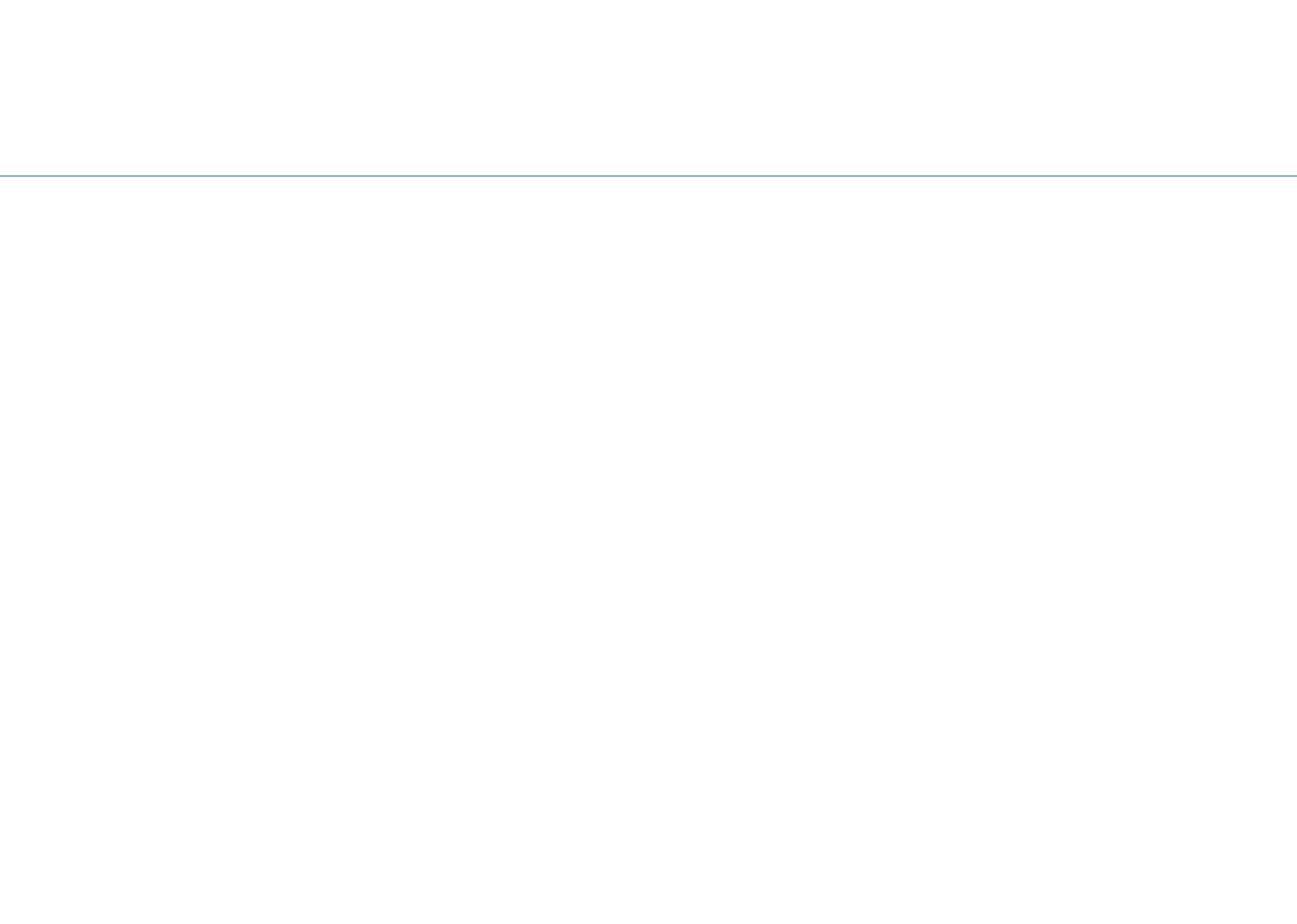
The revised National Standards for Community engagement has set out five levels for engagement and seven standards. The 5 levels are detailed below and visually represented (figure 3).

The revised 7 National Standards for Community Engagement

The revised **National Standards for Community Engagement**, provides guidance and acts as a general reference point for best practice when engaging between communities and public agencies. This will enable us to identify the role of each stakeholder and level of engagement each stakeholder will have in any decision-making as seen in **Appendix 1**, figure 3.

Figure 5

		Engagement Goal
	Empower	To involve stakeholders in shared decision making about strategic priorities and service delivery.
	Collaborate	To work in partnership with stakeholders, seeking their perspectives and encouraging their ideas and solutions to inform priorities and planning.
	Involve	To involve stakeholder throughout the process , ensuring their specific concerns and aspirations are understood and considered . Provide feedback on how their input influenced the decision.
	Consult	To obtain stakeholder feedback , listening to and acknowledging concerns and aspirations.
	Inform	To provide stakeholders with information to assist them in understanding the problem, alternatives, opportunities and/or solutions.



Alternative Formats

The information included in this publication can be made available in large print, Braille, audio CD/tape and British Sign Language interpretation on request by calling 03451 55 55 00.

Language lines

خط هاتف اللغة العربية: 03451 55 55 77

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