

Working in Partnership with People and Communities





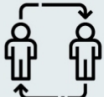





Update for Dorset Health and Wellbeing Board (November 2021)

National Guidance

Action required

- ICBs are expected to develop a system-wide strategy for engaging with people and communities by April 2022, using the 10 principles in this document as a starting point.
- ICB constitutions are expected to include principles and arrangements for how the ICB will work with people and communities.
- ICBs should work with partners across the ICS to develop arrangements for ensuring that integrated care partnerships (ICPs) and place-based partnerships have representation from local people and communities in priority-setting and decision-making forums.
- ICBs are expected to gather intelligence about the experience and aspirations of people who use care and support and have clear approaches to using these insights to inform decision-making and quality governance.

Engagement approach

 <p>1. Put the voices of people and communities at the centre of decision-making and governance, at every level of the ICS.</p>	 <p>6. Provide clear and accessible public information about vision, plans and progress, to build understanding and trust.</p>
 <p>2. Start engagement early when developing plans and feed back to people and communities how their engagement has influenced activities and decisions.</p>	 <p>7. Use community development approaches that empower people and communities, making connections to social action.</p>
 <p>3. Understand your community's needs, experience and aspirations for health and care, using engagement to find out if change is having the desired effect.</p>	 <p>8. Use co-production, insight and engagement to achieve accountable health and care services.</p>
 <p>4. Build relationships with excluded groups, especially those affected by inequalities.</p>	 <p>9. Co-produce and redesign services and tackle system priorities in partnership with people and communities.</p>
 <p>5. Work with Healthwatch and the voluntary, community and social enterprise (VCSE) sector as key partners.</p>	 <p>10. Learn from what works and build on the assets of all ICS partners - networks, relationships, activity in local places.</p>

Our deliverables

- Co-design ICS strategy for working in partnership with people and communities
- Ensuring that ICPs and place-based partnerships have representation from local people and communities in priority-setting and decision-making forums.
- Co-design formal agreement for engaging and embedding the VCSE sector in system level governance and decision-making arrangements
- Reference public involvement in ICS Constitution and policy as appendix
- Work with people and communities and VCSE sector to inform ICP Strategy
- Consider recommendations for partnership working with Healthwatch and agree actions
- ICS transformation communications and engagement strategy (with three months to launch plan)
- Communicate vision and narrative for new ICB and ICP, including brand identity and website

Continuing the conversation

As an ICS we engage with communities and stakeholders on a wide range of issues. This 'continuous conversation' with residents helps inform our services and gives us a mechanism for feeding back to communities with you said > we did.

Nov 2018



Dorset ICS discovery workshop

Sept 2019



Our Dorset Looking Forward

Sept 2020



Children's mental health

Sept 2020



Dorset ICS rapid insight

Nov 2020



Community mental health services

Nov 2020



Dorset health and social care Covid-19

Feb 2021



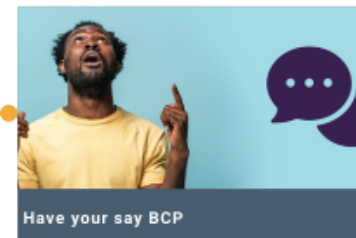
Dorset Council residents' survey

Apr 2021



Supporting BCP community sector

Jul 2021



Have your say BCP

What the insights are telling us

Over the summer an independent analyst has been reviewing 19 important pieces of engagement.

These were carried out by a range of partners within



The analysis is identifying themes around:

- Partnership working
- Digital access and inclusion
- Inequalities
- How people want to engage/be communicated with.

Consideration is also being given to 'who' we are hearing from – to help identify gaps.

The insights and learning will be widely shared, used to inform ICS development and to help ensure our future approach to working with people and communities is appropriate and inclusive.



What the insights are telling us

Partnership working	Digital access & inclusion	Inequalities	Engagement and Communications
Joined up approach	Online engagement	Reaching out	Content
Information sharing	Virtual consultations	Working with	Language
Shared resources	E-consult	Geography & transport	Platform & approach
Communication	E-prescriptions	Digital exclusion	Access
One voice & view seeking	Staff use of platforms	Protected characteristics - PLUS	Inequalities
VCSE sector	Data sharing	VCSE	

VCSE co-designing agreement

- NHS England and Improvement approved our bid to embed the VCSE sector in our ICS
- Task and finish group set up to co-design the co-design!
- Small group will link with larger group and together extend opportunity to provide views across Dorset
- Next meeting – Function of Place Based Partnerships being presented to help inform what form alliance needs to take

ICS Citizen's Panel

- Great opportunity
- Strongly supported
 - Reduce duplication
 - Increase reach together
 - Build on Trusted Voices and Community Health Ambassadors
 - Focus on inequalities
- C1 task and finish group developed the EOI
- Linking to the ICS Innovation Hub