



PUBLIC INVOLVEMENT STRATEGY

SEPTEMBER 2021

PATIENT EXPERIENCE

WHAT WE DO
TOGETHER
MATTERS



SUMMARY

- The revised approach to public engagement and involvement redefines the overarching vision for the Patient Experience Directorate to 'What We Do Together Matters' in line with the Trust re-brand.
- This should be considered as the first segment of the overarching Patient Experience and Engagement Strategy. The subsequent section will cover co-design and co-production but this will be co-produced with the 'EPUT Community Council' [name TBC].
- The objectives for public engagement and involvement have also been better defined to provide clarity on what we aim to achieve when using the array of engagement methods which are now also defined.
- Further to this, involvement is now centred around 5 distinct roles; Member, Volunteer, Ambassador, Governor and Partner. To clarify, Partner status is reserved for external organisations that wish to work with EPUT and share our vision.
- The case for change is driven by the need to engage and involve experts by experience to become a true learning organisation as assessed in July 2021.
- Finally, this revised Public Engagement and Involvement strategy will be reviewed frequently by the 'EPUT Community Council' once established to maintain its validity and viability
- The executive team will be asked to approve this approach before any transformation starts.

PURPOSE & RATIONALE

- This documents details the new Public Involvement Strategy for EPUT
- This Public Involvement Strategy is the foundations for the wider patient experience strategy at EPUT, including Co-Production
- It is aligned to NICE guideline NG197 (Shared Decision Making) and NSUN's 4Pi Involvement Standards
- The strategy has been through consultation with a variety of groups including People With Lived Experience
- Through conversations with service users, staff, and partners, It is clear that although the Trust does lots to engage and involve the public, it is without a common purpose or set of objectives and no clear input to decision making.
- This activity often gives the perspective of 'just a tick in the box' or 'talking shop without action' and we must move away from tokenism
- Further to this, there is a significant lack of clarity across the organisation in how a person or partner organisation can get involved
- As a result of Covid, the way we engage the public and our service users has needed to become more dynamic and varied. This presents a great opportunity to transform our approach to involvement and engagement.
- If we get this right we have a huge opportunity to influence regionally and nationally

CONTENTS

This document covers at a high level the 'Why', 'What', 'Who', 'How', and 'When' aspects of the new Public Involvement and Engagement Strategy under 3 headers:

1. **Vision and Objectives** [What does good look like]
2. **Participation** [Involvement roles and engagement methods]
3. **Delivering** [The plan and key dates]



VISION & OBJECTIVES

WHAT WE DO TOGETHER MATTERS

Our people (patients, carers and families included) are involved with key decisions and engaged in driving forward meaningful change; with learning from lived experience at the heart of everything we do.

Together we will ensure that the experience of those that use our services is seen as equal in value to safety and quality; explicitly recognised is a golden thread throughout the Trust;

OBJECTIVES

There are 2 key objectives that underpin the Public Involvement and Engagement strategy and inform what success looks like are:

1. Increase and elevate public involvement and engagement across the trust
2. Breed a culture that values patient experience through public involvement



DEFINITION OF SUCCESS

We will consider the new Involvement Strategy a success when we meet the following tests with a positive result:

- Ways to get involved are clear and simple for all.
- Participation is at an all time high.
- Across the organisation all types of involvement are being used effectively.
- Patient experience is explicitly valued equally to safety and quality by all.



We will measure the quality of our improvements based on 2 key objectives and their key performance indicators:

1. Greater Public Involvement and Engagement

- I. More people involved
- II. Increased attendance of forums
- III. Volunteering increased across the Trust
- IV. Better partner network that delivers real value system wide

2. Patient experience is more valued

- I. Evidence to support a cultural shift
- II. Better evidence of learning
- III. Better feedback from our partner network
- IV. Improved outcomes from complaints

PARTICIPATION



Essex Partnership University
NHS Foundation Trust

WHAT WE DO
TOGETHER
MATTERS

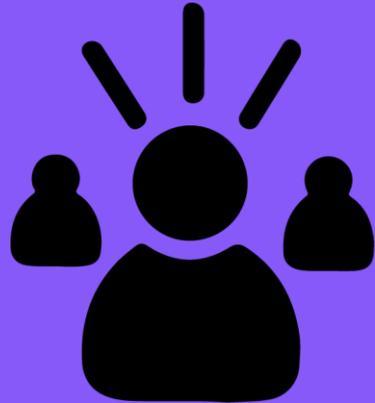
INVOLVEMENT ROLES

As part of the new strategy we will define 5 core involvement roles:



Member

- Limited information required to get started
- Mailing list for surveys
- Invited to forums and other open meetings
- Interdepend on Governors



Governor

- Is an elected or appointed, staff or public
- Acts as a critical friend to the Trust
- Gathers and represents members views
- Statutory duties



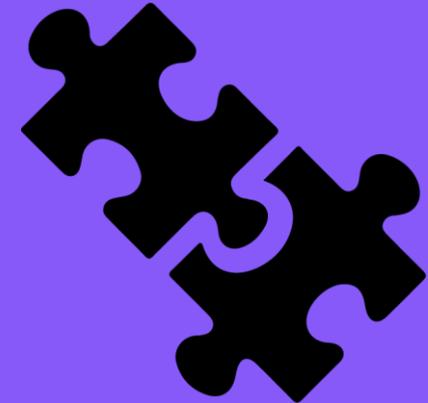
Ambassador

- The same registration process as a Volunteer
- Can qualify for recompense
- Specifically for people with lived experience
- Consults as a service user



Volunteer

- More detail needed to get started
- Simple registration process
- Can get involved with a wide range of tasks



Partner

- Reserved for other 3rd party organisations
- Works in partnership with EPUT to improve I&E
- Not exclusive to NHS organisations

ENGAGEMENT METHODS

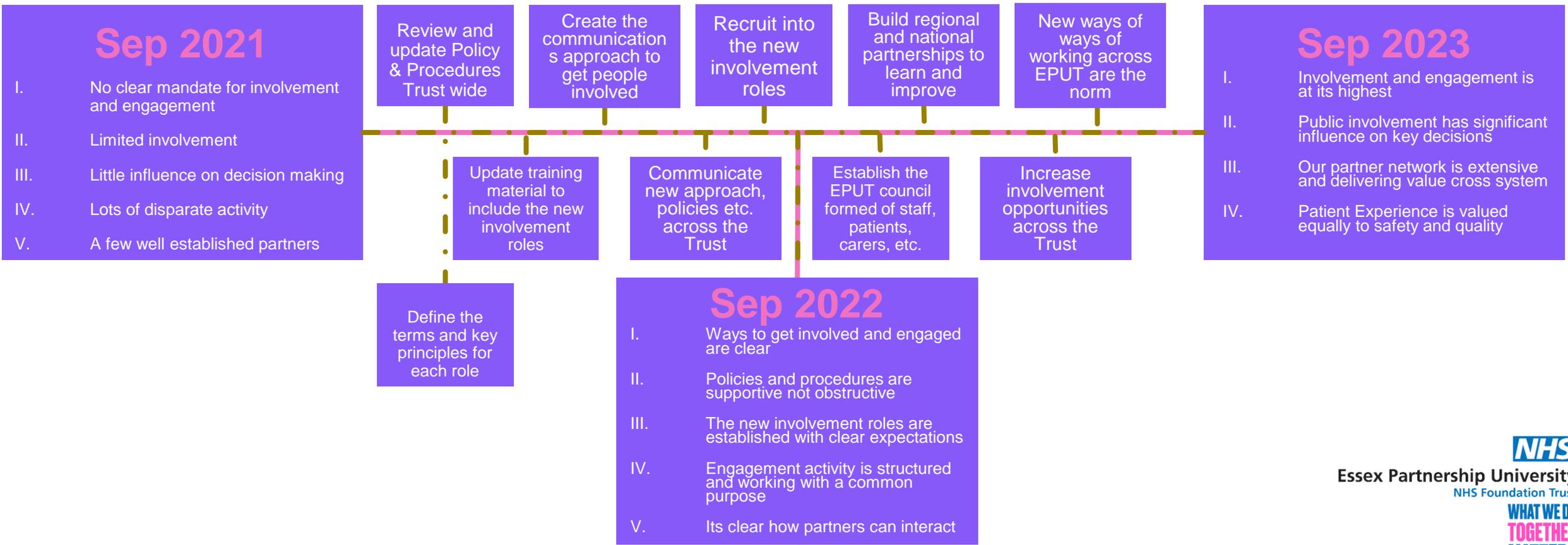
Although there are lots of ways to get involved at EPUT we believe the common methods are the 7 detailed below. As part of embedding the new strategy, we will define the purpose, principles, presence, process and impact for each to ensure collaborative working to a common objective.

 <p>The EPUT Community Council</p> <ul style="list-style-type: none"> Key decision making body that has direct input from and to the executive team Vital in driving forward co-production Made up of staff, patients, carers, governors, execs, volunteers and partners 	 <p>Forums</p> <ul style="list-style-type: none"> Run by the service managers and divided in to localities supported by Patient Experience Communicate key initiatives and updates, i.e. You said we did capture concerns and feedback 	 <p>Governor Events</p> <ul style="list-style-type: none"> Elected members of the public and staff Critical friend that attends many meetings Attends forums to represent public voice Reviewing key documents Organisational development days to support continuous improvement Your Voice Events
 <p>Surveys</p> <ul style="list-style-type: none"> Imperative to understand the key themes for patient experience across the Trust Includes both local and national requirements such as FFT Can be set up a distributed to a specific group 	 <p>User Reference Groups</p> <ul style="list-style-type: none"> Specialist group consisting of service users and care providers (both current and not) Integral to continuous improvement Invited to forums and other open meetings 	
 <p>PALS and Complaints</p> <ul style="list-style-type: none"> Direct access to patients, carers, and friends and families to provide feedback Key to capturing and addressing concerns Identifies themes and trends for compliments and complaints 	 <p>Inpatient Events</p> <ul style="list-style-type: none"> Frequent event for service users, friends and family, and care providers Communicate key initiatives and updates locally, i.e. You said we did Local resolution and continuous improvement 	

DELIVERING CHANGE

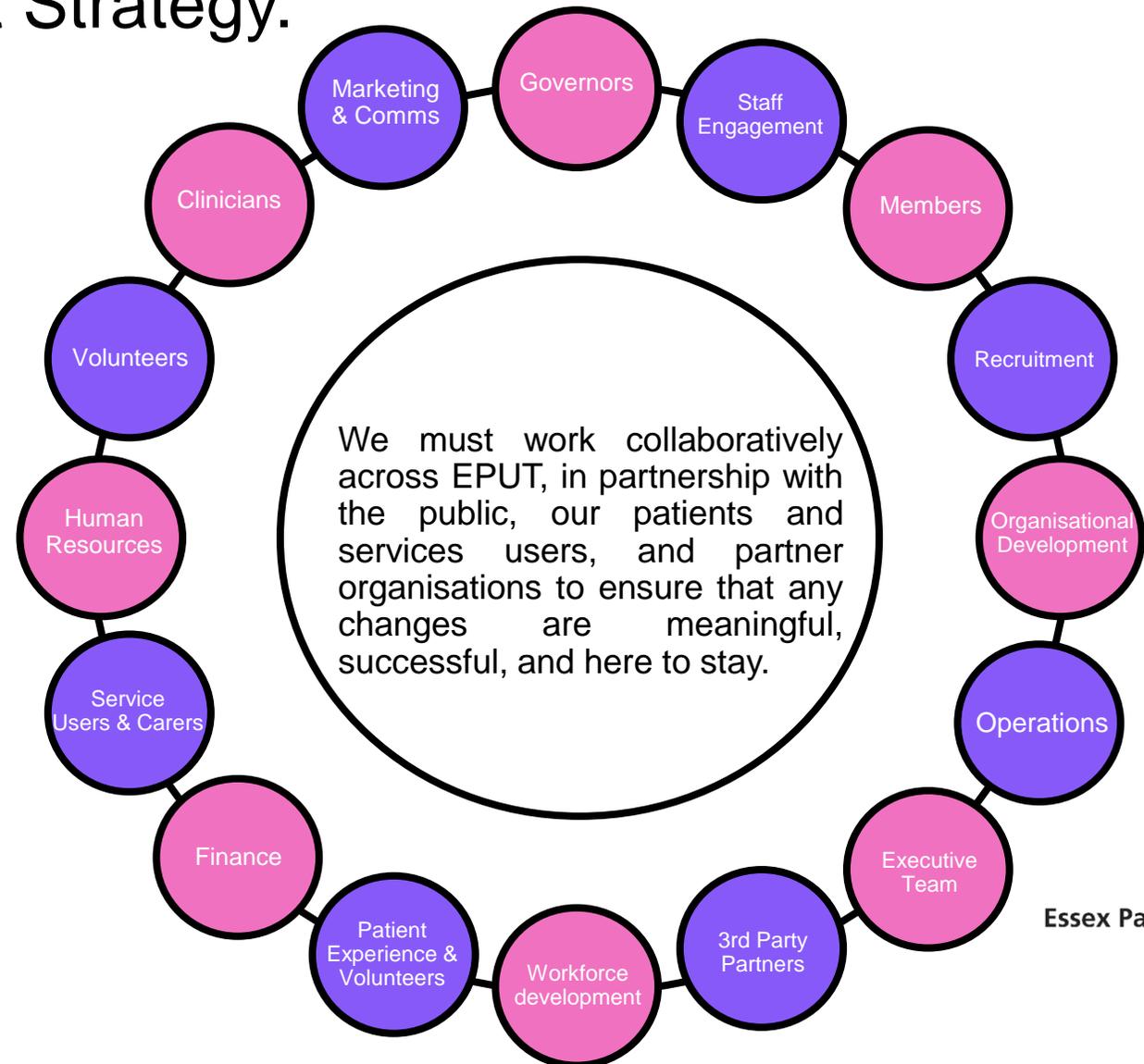
THE PLAN

We will deliver this new Public Engagement and Involvement strategy in 2 years (by 2023) and we will take a co-production first approach at every opportunity. Regular checkpoints will be scheduled with the working group to ensure the strategy continues to be valid and viable.



Key Stakeholders

We will form a working group including all the key stakeholders to support the deliver of the new Involvement Strategy.



Starting Point

- Get approval to proceed with this approach from the Executive team and then with the governors [DONE 07/09/2021]
- Baseline current position o benchmark and monitor progress.
- Establish a working group to drive the strategy forward.
- update all policies and procedures that underpin engagement and involvement.
- The processes (and forms) for public involvement and engagement must be simplified
- All involvement roles must be properly defined with clear guidelines around the purpose, objectives, and expectations from those that take up any involvement activity
- A standard set of principles and objectives will be created for each engagement method. Providing clarity to those that chair them how they should be run and how they fit within the overarching structure.
- Reporting structures for all engagement methods will be clarified with supporting templates
- A clear communication approach will be defined, with supporting media to begin communicating out to the public to encourage involvement and engagement under the new offering.
- All training material will be updated, and new training modules offered trust-wide, with a mandatory core module as part of induction and the management development programme

END

Contact the Patient Experience and Volunteers team for more info.