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The projects highlighted in orange are just a snapshot of the variety of involvement work taking place every day in the Trust. The Integrated Involvement Plan will give these projects a structure to work within to ensure we highlight and promote these opportunities to drive real change as well as share learning across the Trust.



Foreword



The Western Trust is committed to Involvement and Co-Production at all levels and across all programmes of work. How we involve our service users, carers, public and staff in the development of our services is key to how we will effectively meet the needs of our population in the coming years to help address health inequalities and make this a Great Place to Live.

The Trust's new Integrated Involvement Plan has been developed in partnership with our staff, service users and carers and is intended to give life to our commitment to promote, develop and integrate involvement.

The Integrated Involvement Plan fits within the Western Trust's Corporate Plan 2019-21. In the Corporate Plan, we set out a clear statement of intent to work across boundaries and organisations to involve service users and carers:

"We can't do this without you and we are committed to involving and engaging with our service users, carers and public and to embedding a personal and public involvement (PPI) culture."

The Trust currently has several large programmes of work which can offer great opportunities to promote and carry out effective involvement, including No More Silos, Pathfinder, Safety Quality West, Flow Coaching and Working Together: Delivering Value. This plan sets out our vision for how these areas can together be effective models of involvement and co-production and help us meet our 4 key ambitions for our population, that the geographical area served by the Western Trust will be a

- Great Place to Start Life
- Great Place to Live Well
- Great Place to Grow Older
- Great Place to Work

We want our staff to be empowered to carry out effective involvement and to have service users and carers with the skills and knowledge to have their voices heard. To this end we will promote a culture of collective leadership to ensure involvement is everyone's responsibility and develop a culture of shared learning for staff, service users and carers. Service users and carers involved in the development of the plan told us that to help make this plan an effective one, which has a real impact on our population, we must pay attention to

- The importance of good communication – Information should be easy to understand, easy to access and continuously available or consistent?
- Effective promotion of opportunities for involvement so that those wishing to become involved know how to do so.
- Support to be involved. We need to build capacity and knowledge amongst our staff, service users and

carers to recognise the value of effective partnership working.

- Joint ownership. Service
 users and carers feel that
 involvement should not only
 be the responsibility of one
 team. Each staff member,
 programme of work and
 directorate need to take
 ownership of their
 responsibility to work in
 meaningful partnership.
- Measurement of effectiveness. Service users and carers feel it is important the Trust shows the impact of involvement and has good structures and processes in place to collect relevant information.

I believe this plan will make us better able to involve service users and carers as our partners. With your support, I am in no doubt we can make real, positive change together.

Dr Anne KilgallenChief Executive



Introduction



In this plan, we want to build on our current work of Personal & Public Involvement with service users and carers, Patient/Client Experience, Learning & Improving Work and Staff Engagement and develop these into a single organisational approach to Involvement

Our Integrated Involvement Plan will be aligned with the Western Trust's four key ambitions, ensuring effective care in all we do. We want the Western Trust area to be a

- Great Place to Start Life
- Great Place to Live Well
- Great Place to Grow Older
- Great Place to Work

Our Integrated Involvement Plan evidences the Trust's commitment to working across systems and organisational boundaries to improve services and sets out a clear approach for how we work with service users, carers, the public and our staff to deliver services that best meet the needs of our population.

Increasingly we are providing services not just for our own population but for people across the region, across Trust boundaries and jurisdictions both in Northern Ireland and Republic of Ireland. We can't do this without engaging with our service users, carers and public and embedding an involvement culture so that it becomes an intrinsic part of how we do our business.

The Trust's Corporate Plan notes
Making Life Better 2012-2023 as one
of its core strategic drivers which
seeks to reduce health inequalities
and support people to make healthier
and better informed life choices. To
do this, we must effectively engage
with our service users, carers, public
and staff to ensure we are offering
services and support that can best
reduce these health inequalities.
Some notable health inequalities
within the Western Trust area are:

1 in 4 families within the Western Trust Area experience poverty linked to high and lasting levels of unemployment and low wage rates.

Those employed in the Omagh and Fermanagh areas earn less than their counterparts elsewhere, additionally they may also:

Reside in areas with higher poverty rates;

Reside in isolated areas with little provision for support;

Be employed in the service or tourism industry, which is frequently associated with seasonal work, lower pay or zero hour contracts.

Pathfinder

The Western Trust Pathfinder programme has developed 3 Collaborative Implementation Groups focussing on Mental Health, Carers and Community Care. Each group consists of Trust staff, representatives from the Community and Voluntary sector and service users and carers, evidencing the Trust's commitment to working within a model of co-production and across boundaries. In working with service users and carers, each of these programmes of work have an agreed set of key priorities to work towards as well as making some initial actions. Examples of these are:

Carers Group Develop a database of resources (available services). Provide more timely and effective support for Carers. Involve Carers in staff training. Development of a co-produced plan for unpaid carers in the Fermanagh and Omagh Area.

Mental Health Development of a "live" directory using an electronic platform. Engage with the Education Authority to ensure involvement. Better community activities that really connect people and communities and target the hard to reach groups e.g. Community Hubs. Train together (staff across primary and secondary care, community and voluntary sector, service users) e.g. Recovery College training. Improve accessibility and reduce waiting lists to specialist services.

Community Care Review successful partnerships in the area, identify learning and benchmark these. Skill up community health workers. Develop the health literacy of the population. Make navigation of the system easier. Work to reduce social isolation.

Derry is a statistical outlier in relation to unemployment with February 2018 figures indicating that the Foyle Constituency has an unemployment rate that is more than twice the Northern Ireland average (7.9% v 3.8%).

Fermanagh is one of the areas of Northern Ireland with the greatest proportion of houses without central heating.

Derry City has the highest % of school children entitled to free school meals at 43.3% versus a Northern Ireland average of 30.7%.

Our Minister has made a formal commitment to involvement and this is expressed in the Plan Direction Ministerial Target 2019-2020: By March 2020 Health and Social Care should ensure that the regional Co-production Guidance has been progressively implemented and embedded across all programmes of care. This will include integrating Personal and Public Involvement, Co-production, and Patient Client Experience into a single organisational plan.

Co-Production of a 16+ Service app

Young people informed us that they do not always hear about 16+ Service activities and events and that always timely. In conjunction involvement Transformation monies, the young people have been working with the 16+ Service Development Manager and Unity Training to develop a 16+ Service App. Young people have been involved in deciding future. The young people involved in this project are and are looking forward to receiving information about the service in a timely looking forward to being able to communicate with very real need and service users and carers.

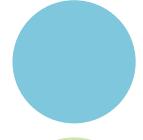
Effective governance and leadership to embed involvement as part of the Trust's culture are key and to this end, the Board of the Trust has established the Improvement through Involvement Committee to provide assurance and leadership.

The Integrated Involvement Plan was developed through several workshops with key stakeholders in the Trust and other stakeholders. Discussions included Patient Client Experience, Compliments and **Complaints and Quality** Improvement. This was completed with staff initially as it is key that staff across the Trust formalise how best we will work together to further involvement and shared learning. The plan was then reviewed and developed at a series of workshops targeted at service users, carers and the general public to listen to the needs of those who use and experience our services.

All of the above is central to hearing the voices of those who live in the Western Trust area and involving them in a way that is meaningful and leads to real change.

'Finding Hope'

Resource Book from the Recovery College. Recovery College students, peer trainers and staff identified the need for an accessible, easy to use, recovery focused guide to information on mental health and wellbeing support in the Western Trust area. Service users have been able to give real life examples of what has worked for them and therefore may be of benefit to other people in similar situations. This is not only an example of user involvement leading to a real tangible outcome for those involved but utilising their expertise and experience to help others.



What is Involvement?



Involvement is a process whereby service users, carers, staff and the public are empowered and enabled to inform and influence the commissioning, planning, delivery and evaluation of health and social care services in ways that are relevant and meaningful to them.

Health & Social Care (Reform) Act (NI) 2009

Co-production

Co-production has become an increasingly popular approach in policy making, public health, service delivery organisations and in the community and

voluntary sector. It is important to recognise that the evolution of engagement and involvement to co-production in health and social care holds the promise of improving outcomes. It is not always clear what counts as or what is meant by "co-production", what it entails in practice, or what is actually being co-produced.

Involvement, engagement and co-production approaches are all part of a continuum as outlined in the co-production pathway below. This ranges from involvement, to co-design and co-delivery. Variation in approaches is often influenced by the context, culture and beliefs about when co-production is appropriate.

Department of Health Co-production Guide





Why Involvement Matters to the Western Trust



The Western Trust's Corporate
Plan sets out our strategic
direction and priorities as we
work to deliver the public
commitments made in the
Programme for Government in
Health and Wellbeing 2026:
Delivering Together, the draft
Programme for Government
Framework 2016-21, the Making
Life Better Public Health
Framework and local
government Community Plans.

Our corporate plan identifies four key priorities:

Implementing the Transformation programme;

Taking forward change in Fermanagh and West Tyrone through our Pathfinder work;

Working Together: Delivering Value. Our financial and performance recovery programme;

Reset and Rebuild. Our programme of work for restarting and rebuilding services in response to Covid-19.

Each of these priorities for the Western Trust will mean changes to services to respond to current need and to make improvements for the future in order to serve the changing needs of our population.

Effective involvement with our service users, carers and the public has a number of benefits for the Trust and those who access our services:

Help tailor services to the needs of our population, and improve efficiency;

Utilise service user and carer expertise and knowledge;

Help to inform commissioning and set priorities;

Improve the quality and safety of services;

Increase ownership of health outcomes for individuals and communities;

Increased job satisfaction for our staff, knowing we are meeting the needs of our population.



Models of Involvement at the Western Trust



This plan aims to outline and bring together the different models of involvement within the Trust. The purpose of this is to create a greater collaborative approach to involvement so that we continue to put staff and the people who use our services at the centre of decision making.

The 5 involvement models included in this Plan are:

Personal and Public Involvement (PPI)

Patient/Client Experience (PCE)

Quality Improvement

Learning from Incidents,
Compliments and Complaints

Staff Engagement

Adult Learning Disability

The Western Trust Adult Learning Disability Service is continuing with a process of developing an involvement mechanism for service users, carers, Trust staff and providers to shape and influence service delivery in the Western Trust area. Following the appointment of an interim PPI Advisory Group and a series of meetings and workshop events, a model has been developed for moving forward with this process. This is a 'Hub and Spoke' infrastructure with 5 local implementation groups working with a Strategic Involvement Group which reflects on the 5 levels of involvement



PPI - Personal and Public Involvement



Personal and Public Involving you, Involvement (PPI)

Personal and Public Involvement is a term used to describe the active and meaningful involvement of service users, carers and the public in the planning, commissioning, delivery and evaluation of Health and Social Care (HSC) services, in ways that are relevant to them.

It can also be described as the process of empowering and enabling service users, carers and the public to make their voices heard, ensuring that their knowledge, expertise and views are heard and acted upon.

People have a right to be involved. Personal and Public Involvement is a HSC requirement; HSC has a statutory duty to involve and consult with service users, carers and the public in relation to:

the planning for the provision of care;

the development and consideration of proposals for changes in the way that care is provided;

decisions that affect the provision of care.

A set of five Standards outlines what is expected from Health and Social Care (HSC) organisations and staff in relation to personal and public involvement, and were developed in partnership with service users, carers and the community and voluntary sector. They were formally endorsed by the Department of Health in 2015.

Standard One - Leadership

Standard Two - Governance

Standard Three - Opportunities and support for involvement

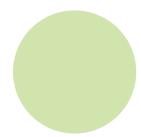
Standard Four - Knowledge and skills

Standard Five - Measuring outcomes



"I never had been a part of a group before where the staff felt like part of the group. That's the way this felt – as if we were all equals"

MDT Support Group



PCE - Patient Client Experience



In April 2009, the DHSSPS published the 'Improving the Patient & Client Experience' Standards document. The development of these standards incorporated significant consultation and involvement of patients, carers and service users or their representatives. The document comprises five core standards:

- 1. Respect
- 2. Attitude
- 3. Behaviour
- 4. Communication
- 5. Privacy and Dignity

Two of the ways the Trust meets these standards are through the 10,000 Voices programmes of work and as of August 2020, using a new model of collecting service user and carer experiences, Care Opinion.



10,000 Voices. Patient, client and staff feedback is integral to the Trust's continuous improvement focus. We are committed to promoting a regional and local culture to listen and learn from the stories and improve the quality of services for patients.



"Co-production means involving service users from the beginning, which really means getting together to have the ideas and come up with a project together, not afterwards once a project has been decided on".

Service Use



What's your story?

Real time feedback on all health and social care services in Northern Ireland providing a platform for people to share their experiences of the health and social care services they received. What was good? How did it make them feel? What would have made a better experience?

How we use the information we collect

To provide evidence of the quality of health and social care

To inform quality improvements in Trusts

To inform regional policies and strategies around how services are shaped for the future

To inform education and training

Understanding the Needs of Younger People With Dementia.

Engagement with younger people affected by dementia and those who support them, allowed us to hear and understand their experiences of their dementia so far, what worked well, what needs to be improved and ideas on how we can enhance our current services in the future to meet their unique needs. Based on the feedback a number of recommendations were made on how to improve the service for these individuals and families. Other outcomes include:

- A young person with Dementia has been invited onto the Service Improvement Project Board;
- Resources have been sourced to help patients explain dementia to a child or younger person within the family.

Participants found this project positive and said although they could not change their experience of the diagnosis process they were hopeful it would improve other younger people's diagnosis experience in the future. They said they felt listened to and motivated to get more involved with initiatives such as awareness raising campaigns.



Quality Improvement. A Learning and Improving Organisation





Improving Quality of Care Together

Quality Improvement aims to improve the safety, effectiveness and experience of Health and Social Care services. A quality culture has several key standards for services. They must be:

Safe

Effective

Person-centred

Timely

Efficient

Equitable

To meet these standards, it is imperative that service users and carers are involved.
The Trust supports staff to gain skills and knowledge about effective quality improvement through different levels and models of learning:

Online eLearning

Safety Quality West

FLOW coaching

Embedded in all of these areas of work is a commitment to leadership by highly involved staff who work or is a leader at any level in the service, and also by involving service users and carers wherever possible.

Breastfeeding Support Group

Established in 2019 to hear views of service users, support new mothers and their partners and increase the numbers of mothers breastfeeding by offering peer support and information.



Learning From Incidents, Compliments and Complaints



The Western Trust actively encourages the reporting of incidents and risks. Staff have embraced the learning culture by participating in incident reviews which focus on the lessons for improvement for the organisation as a whole. To support this process, a learning template has been developed that requires Directorates to report the learning from serious incidents, claims and complaints. The Western Trust Safety Quality Management System and Improvement Plan continues to provide a framework to monitor and improve practice.

We have made a decision to include this important area of work in our Integrated Involvement Plan as it goes to the heart of involving service users and carers in the investigation, remedy and learning from serious incidents in the care of our patients and clients.

Supporting those who have made a complaint to become proactively involved in improving

services will lead to better outcomes for service users, carers and staff.

The Western Trust can learn from compliments received to share learning and good practice. When a complaint is resolved or compliment received, those service users and carers should have a clear pathway to remaining involved in the development of Western Trust services if this is something they wish to pursue.

The Involvement team can provide the opportunity, structure and support to facilitate this involvement. This will lead to more skilled service users and carers, empowered to have their experiences, both positive and negative, acknowledged and acted upon in a supportive, proactive manner.



"We felt like the invisible workforce. I don't feel invisible anymore since setting up the carer's group alongside the staff."

Carer from MDT Carer's Group



Staff Engagement and Involvement



The Western Trust wants to be a "Great Place to Work". We know that Staff who are highly involved in decision making and are able to influence and deliver improvement in their area of work will be happier in their jobs, and this is important to us.

The evidence tells us that high levels of staff engagement tend to lead to lower levels of patient mortality, better use of resources and stronger financial performance, together with staff who show empathy and compassion despite work pressures. We are also aligning to key regional and Trust organisation and leadership development, workforce, and quality improvement strategies and enabling the corporate gims to make the Western Health and Social Care Trust a great place to start life, live well, work and grow older.

The Trust has developed a staff Engagement and Involvement strategy "every encounter matters" and highlights that the Western Trust strive to provide excellent care for our patients, clients, service users and carers. The outcomes we expect from improved engagement and involvement are:

Improved safety and quality of care for patients.

Reduced patient mortality.

Improved staff and team productivity.

Improved financial performance.

Reduced levels of sickness and absenteeism.

Improved patient feedback.

Increased service innovation.

Reduced turnover rates, resulting in reduced recruitment costs and improved staff retention.

A Great Place to Work.

Involvement is a journey for service users, carers and staff and can be a single instance or continuous, whereby those working together can build capacity, skills and knowledge to embed involvement at all levels of the Trust. This comprises a wide range of activities that includes giving feedback on services, sharing stories and experiences, involvement in focus groups and consultation sessions and working as equals on strategy groups.

Different types and methods of involvement are appropriate at different times and in different circumstances. Service users and carers should be involved in a way that is most appropriate for them.

In our workplan, the Western Trust recognises that working across systems and organisational boundaries will be critical to improve the health of our population and deliver safe, accessible and affordable services.

We can't do this without our staff, service users, carers and the general public. We are committed to involving and engaging with our staff, service users, carers and

public and to embedding an Integrated Involvement culture so that it becomes an intrinsic part of how we do our business.



"I support staff, service users and carers to be involved in developing services in the Western Trust. Every day I see the passion and commitment from staff to involve service users and carers and also the will of service users and carers to support the Trust. I find it so rewarding to be able to help facilitate this and learn from the experts who access our services. This partnership working is the future of service development and delivery and I am excited to be part of it."

Martin McCrory, Involvement Partnership Officer



How Will we Know we Have Made a Difference?



It is often difficult to define what difference the involvement of service users and carers will make at the outset of our work. For this reason we will always focus on the outcomes of the work, and try to understand as we move through the work, the impact which involvement of service users and carers is having on the decisions we make.

Our work plan provides details on how we will measure our outcomes and the difference we have made. A mapping exercise has also been conducted. Whilst not exhaustive, this gives an insight to how we currently involve staff, service users. carers and other partners in our work to make change and deliver improvements. The template will become the established system for recording, monitoring and evaluating our involvement programmes and will support the improvement plan under the Integrated Involvement Plan's five key themes.

Cancer Locality Partnership

A Trust wide group of cancer service users who are part of local charities meet to discuss how to improve services and develop partnerships across the Western Trust

Key Theme 1: Structures and Co-operation / Leadership

Aim: To create an integrated process for governance and accountability for Involvement to strengthen the Trust's culture of service user/carer, staff and stakeholder Involvement.

Aim/Objective

To ensure that Directorates are supported based on their business plans to confidently develop the necessary Involvement approaches appropriate to their work.

How Will we Achieve This?

Define and implement the Governance structure for the Improvement through Involvement Committee and any relevant subgroups at Directorate level. This committee will advise and lead the Trust's Involvement agenda.

Building on existing planning processes support directorate teams to collectively recognise existing assets and use strengths-based methodologies to further develop involvement and co-production approaches in their operational planning.

Further developing relationships across Patient Experience, Involvement and Equality, Organisational Development, Service Users/Carers and Quality Improvement to strategically review our existing data and to provide a rich source of information for Trust decision-making.

within the Trust are integrated

across the organisation

enhancing our existing

Co-Production and PCE)

involvement (PPI,

To ensure that strategic reporting processes for

How we Will Measure Progress?

Establishment of Improvement through Involvement Committee, committee minutes, reports to Board and assessment of achieving targets against the committee's work plan.

To have involvement models developed with directorates working across the full network of their teams which support delivery of their core work and priorities.

Case studies which evidence the application of our impact tools and framework by a selection of team projects from different Directorates.

Progress Reports from each Directorate on involvement work to meet reporting and governance requirements.

Key Theme 2: Building Relationships & Involvement Governance

staff, service users, carers and community representatives to work effectively towards the improvement of service provision. Aim: To create a range of meaningful and influential Involvement opportunities as appropriate for key stakeholders, including

Aim/Objective

Identify opportunities for Involvement to directly influence strategic corporate objectives and directorate development projects.

How Will we Achieve This?

Develop and resource the Trust's Involvement structures to become a central 'go-to' point of contact and resource portal for all Trust staff, service users/carers and community stakeholders in their involvement work.

NB: Need to reference CMT identifying strategic corporate objectives which will take a co-production approach.

Develop and expand
two-way engagement
opportunities for our existing
Involvement Network to
connect directly with
directorate teams' business

relevant stakeholders through events/virtual engagement and best practice guidance to enhance their relationships

and service outcomes

stakeholders and involvement opportunities. To create a

Working across Trust directorates to map existing

<u>databases of service users, carers, community</u>

conduit across teams and localities to connect with

How we Will Measure Progress?

Further development and strengthening of the Trust's Involvement online hub.

Identifying and co-ordinating existing databases and other information assets across the organisation which can be linked / employed to support directorates and the corporate team.

Involvement is an integral part of the corporate business planning process.

Increased number of opportunities for service user/carer/staff engagement promoted across our platforms
Pro-active engagement requests from service users, staff, carers and community representatives we receive to connect with services

Key Theme 2: Building Relationships & Involvement Governance

staff, service users, carers and community representatives to work effectively towards the improvement of service provision. Aim: To create a range of meaningful and influential Involvement opportunities as appropriate for key stakeholders, including

Aim/Objective

Strengthen relationships and developments and rebuild Trust's delivery of its plans stakeholders to support community and locality partnerships with staff including key service

involvement of staff, service Recognise and value the real-time and virtually. communities working users, carers and

the regional Northern Ireland Implement with consultation Consultation Scheme

How Will we Achieve This?

Opportunities for involvement across all Directorates are regional Involvement web portals, hard copy and social publicised through available media including local and media outlets.

service users, carers and community stakeholders in Recognising and celebrating the successes of staff, Trust involvement work.

Participation of WHSCT Involvement Manager at PPI Regional Forum.

How we Will Measure Progress?

Surveys with stakeholders capturing their experience of Involvement with Trust services and projects. Case studies developed to "tell the story". Presentations of Involvement initiatives 'projects to the ITI Committee/Board.

Capturing stories of success and awards we receive to reflect achievement

ramework agreed with DOH, PHA and To be determined on completion of consultation scheme and resulting

Key Theme 3: Communication Opportunity for Involvement

Aim: To communicate the Involvement agenda in a way which is informative, engaging and uplifting and to inspire genuine and effective engagement across all our stakeholder communities.

Aim/Objective

To continue to develop and strengthen Trust's online hub with input from all stakeholders (staff, services users/carers/general public).

How Will we Achieve This?

Continuing the development of WHSCT Involvement online hub in partnership with relevant stakeholders.

Working with our stakeholders to create innovative virtual spaces, to connect and continue involvement work remotely (e.g. such as facilitating Panel meetings via Zoom or mobile phone apps).

Develop innovative ways to maintain involvement communication through remote and virtual technologies.

communicate updates/feedback and good news stories.

community to promote involvement opportunities,

Developing a plan for digital engagement through our WSHCT social media platforms to expand our online

How we Will Measure Progress?

Have our Involvement online hub operational by March 2021.

Monitoring numbers of people signed up to get this information. Utilising existing communication formats to ensure there is information delivered on a regular basis to all stakeholders on Involvement and increased numbers of people signing up to receive our communications.

Monitor the methods and numbers of remote/virtual/face to face opportunities we facilitate to connect stakeholders and to drive service improvements.

Key Theme 3: Communication Opportunity for Involvement

Aim: To communicate the Involvement agenda in a way which is informative, engaging and uplifting and to inspire genuine and effective engagement across all our stakeholder communities.

Aim/Objective

services users and carers and which promote opportunities communication approaches engage with our Integrated general public) to actively or all stakeholders (staff, nvolvement Plan Develop different

How Will we Achieve This?

engagement and optimises existing online platforms for engagement in partnership with IT and Trust

Ensuring the Trust identifies online platforms for Communications

online channels (e.g. such as our ongoing phone support ormats and through various mediums to get maximum Ensuring our communications are delivered in various Keeping options open for connection to other outside ntegrated Involvement Plan and polls for feedback) reach including those who have limited access to broadband. Reformatting our communications for e-distribution (e.g. such as online newsletters, our

projects. Further develop our

eedback information on

range of updates and

service achievements,

eedback through various

Develop communication

systems which allow

media for all Involvement

outcomes of service user and

carer involvement

How we Will Measure Progress?

make in our communications as a result of feedback and ideas generated from our users, carers and staff and changes we The level of engagement from service nvolvement online hub and our stakeholder groups.

engagement platforms for service and Monitoring the level and type of The uptake and use of existing project involvement work.

engagement through our social media

platforms and website analytics.

Case study examples capturing innovative practice and use of remote and virtual ways for communicating, continuing nvolvement work and maintaining elationships

Key Theme 4: Training & Capacity Building Knowledge and Skills

Aim: To provide opportunities and tools for enhancing learning, leadership and personal development to build collaborative relationships and impactful involvement.

Aim/Objective

of Involvement in all its forms hrough training and sharing Further increase awareness of good practice using various media.

How Will we Achieve This?

How we Will Measure Progress?

opportunities and e-learning by staff

and involved stakeholders.

The uptake of Involvement training

needs of staff, service users/carers and other stakeholders and where relevant QI training. Dissemination of available nvolvement tools (such as GREAT and Engage and Involve) raining for staff, service users and carers, to include PCE introduction to Involvement. Scope further appropriate which will include the Trust's established face to face The provision of Involvement training relevant to the <u>for staff, service users and carers, </u>

develop Involvement skills and online learning resources Development team and Safety and Quality Team to Working with colleagues in HR Management and for involved staff, service users and carers.

Hub as a central learning resource with practical tools for Developing and then promoting the Trust's Involvement involvement work across the Trust

> To capture best practice and innovative approaches to p involvement work

exchanging innovative practice across our stakeholder

online/virtual via webinar or live online sessions we are able to facilitate using

employed, including face to face and

The range of training and learning

opportunities and methodologies

Quality Improvement approaches such as participating in our events/virtual fora and Flow Academy Coaching and Big Rooms. recording with case studies the ways we nnovate shared learning across our Monitoring the number of people stakeholder groups.

Monitor visitor traffic to our WHSCT nvolvement online hub. Establishing a database of innovative

learning and exchanges and identify Monitor the opportunities for shared

approaches and "what works" Through strategic projects, local and regional networks dentifying opportunities for shared learning and

Key Theme 4: Training & Capacity Building Knowledge and Skills

Aim: To provide opportunities and tools for enhancing learning, leadership and personal development to build collaborative relationships and impactful involvement.

Aim/Objective

Ensure that consultations, 10,000 voices, PCE, Care Opinion, and Co-production /PPI methods are utilised to strengthen the voice and influence of staff, service user/carers and stakeholders in service improvement.

Ensure a consistent programme of induction and training for staff, service users and carers which incorporates all levels of involvement as defined in this Integrated Involvement Plan.

To have a more detailed understanding of teams' training and learning needs to enable them to develop the required skills and confidence to lead their own involvement approaches in the delivery of business plans.

How Will we Achieve This?

Integrated pathway to allow the voices of more patients to be heard and clients' feedback to be provided to inform and support the Trust's continuous improvement.

Develop a training framework in partnership with HR Management and Development, QI, Health Improvement, Equality and Involvement to ensure access to development of skills and knowledge required by involved staff, service users and carers, learning from what has worked well from other Trusts, regional groups and partners.

Ensuring the training framework, programmes and delivery are co-designed and produced in partnership with stakeholders. Promote virtual face to face training where possible. Pro-actively survey staff, service users, carers and relevant stakeholders on what they consider desired learning and capacity building support. This will include capacity building in virtual engagement tools and technologies.

How we Will Measure Progress?

Regular reports to the ITI Committee.

Further development of the Involvement mapping exercise.

Developing a training framework based on the views of involved staff, service users/carers and relevant stakeholders.

Frequency, attendance and evaluation of induction programmes.

Monitoring the number of people becoming engaged with the work of the Trust who are new to remote engagement and involvement

Evaluating the quality and impact of training programmes.

Sharing best practice in training and development across and beyond the Health Sector.

Key Theme 5: Impact of Involvement Measuring Outcomes

Aim: To clearly demonstrate and evidence the effectiveness and impact of our Integrated Involvement Plan.

Aim/Objective

Establish a baseline of curre involvement projects across the Trust, with an aim to increasing this by 10% by March 2021.

To evidence how involvement has strategically influenced our work and achieved better

To show how involvement support has made a positive difference for stakeholders in how they collaborate and engage on project work.

How Will we Achieve This?

Production of Annual Integrated Involvement Report to meet our Involvement and performance reporting requirements.

Each Directorate to have an Involvement project Plan which is specific to delivering its service plans and objectives and which is responsive to working in a Covid-19 context.

Expanding activity of our Involvement projects to enable involvement and engagement.

How we Will Measure Progress?

Numbers and types of projects recorded in our mapping tool/exercise.

Monitor and evaluate the impact of process and service improvements.

The use of our involvement project impact template and outcome star tool by a selection of directorate staff teams and recording how they have developed and their 'distance travelled' in employing involvement approaches to improve their service outcomes.

Develop directorate involvement report plans which are reviewed at the end of 2021 to chart impact. Document involvement support plans which can be reviewed at the end of 2021 with directorate teams to chart impact.

Surveying samples of staff and service users, carers and other relevant stakeholders on the impact the involvement support provided has had a their work and personal development.

Creating the Conditions for Co-production Embedding a Culture of Improvement Learning From People's Experience Delivering Change

